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**Intersectionality used in the analysis of power relations in
connection with abuse of women with physical disabilities**

by

Vigdis Mathisen Olsvik

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Introduction

In this paper I develop further my analysis of power relations in connection with my study of abuse of women with physical disabilities. The beginning of this analysis was presented in an earlier paper (Olsvik 2006c) and is still ongoing. In part one I introduce the concept of intersectionality especially with reference to the work done by de los Reyes and Mulinari (2005) with regard to power analyses. In part two, I illustrate my use of the concept by examples from my doctoral study. I close with some concluding remarks on the value of using the concept in analyses of power relations and in disability research.

Background

To focus on power relations is essential to any study on abuse and violence. Initially, I assumed abuse could be understood through the power relations related primarily to the social categories of gender and disability. Progressively, it became clear to me that additional power relations are present and play a major role in understanding abuse. One example is age and generation; another example is the inappropriate exercise of power by persons in professional positions. In other words, the power relations contributing to understanding abuse of women with disabilities turned out to be more complex than I had assumed.

My doctoral study of abuse of women with physical disabilities consists of two parts; a qualitative study of in- depth interviews with 13 women and a comparative survey of the extent of abuse of women with and without physical disabilities (Olsvik 2006 a and b). This paper is, however, solely based on data from the in- depth interviews. During my analysis of the power relations related to the abuse of the women, intersectionality appeared as an interesting concept. So far, it has mainly been applied within gender studies and not so much within disability research, and I, therefore, take the opportunity to introduce it at this conference.

Part I Intersectionality and the analysis of power relations

The concept of intersectionality

The concept of intersectionality derives from the English word intersection and refers to the meeting and interaction of different social categories such as gender, race/ethnicity, class, sexual identity, age/generation and disability. Intersectionality emphasizes how different power relations involving these categories affect each other by reinforcing or weakening, supporting or competing with each other in a dynamic interplay.

The concept has its origin in the criticism of the hegemony of white feminism and was introduced by Crenshaw (1994) in her study on how race and gender interplay in situations of violence of women of color. She looked at what she called structural intersectionality by describing colored women's positions within overlapping systems of oppression, and also at political intersectionality by showing how both feminist and antiracist policies have contributed to conceal violence towards colored women. According to her, the problem lies not with the existence of these social categories, but rather with the values attached to them, and the way they are used to create social hierarchies.

Progressively, more researchers have developed the concept of intersectionality, especially within feminist theory, such as Collins (1998) who used an intersectional perspective to explore how race, gender, and class operate together in people's lives. At times one of them can be experienced as more significant than another, but they all overlap and influence each other. Race, class and gender are the most visible categories, and also the categories with the most direct socio economical consequences. They overshadow, according to Collins, the "newer" categories, such as age, religion, sexual identity and disability. Collins looks at what she calls "a matrix of domination" which consists of an interwoven system of oppressive hierarchies that influence both the consciousness of the individual, the relations within the

social group itself and the group's access to institutional power and privileges. This contrasts with what she calls "the additive model", where one speaks of a double or even a triple oppression. According to her, social inequality cannot be quantified in the form of a threefold oppression of race, gender and class. The intersectional model, however, stresses how these categories relate to each other, not by investigating each one apart or summing them up, but by examining how they are interwoven, and how they themselves change in a mutual interplay.

While Crenshaw and Collins have looked at different theoretical aspects of the concept of intersectionality, Essed (2001) has introduced a method for an intersectional analysis. In one of her works she used this method in trying to understand an aspect of everyday racism which she called "gendered everyday racism" (Essed 1991). Based on her data, she gives us five analytical suggestions on how to analyse everyday discrimination which she has developed on the basis of narrative theory. First, it is important to look at the context of discrimination, that is to explain where and when discrimination takes place and who is involved in it. Second, it is important to analyse what she calls the complication or "the unacceptable", that is to explain what went wrong. Third, it is important to focus on the reactions and the resistance from the women who have been the victims of abuse. Her fourth suggestion, explanations, tells us if there is a reason to believe that the discrimination is the result of interplay of race, gender or other types of hierarchies of power, such as privileges of age or what she calls "functional power" which reflects the unequal power relationship between for instance a student and a teacher. The fifth analytical suggestion that she refers to, is "argumentation", which means finding out if the incident is unique or part of a pattern of discrimination. The way to find out is to compare the incident to other research, statistics or literature related to the actual topic. In the analysis of my qualitative data I have used elements from Essed's outline of an intersectional analysis.

In the Nordic context there has been a growing interest for the concept of intersectionality, but, so far, mainly within gender research. In Sweden there has for quite some time been a debate about the concept which has resulted both in a special issue on intersectionality in *Kvinnovetenskaplig tidskrift* (2-3, 2005) and a conference at Linköping University, where Lykke (2003, 2005) among others has been a central contributor. In Denmark a special issue of *Kvinder, Køn and Forskning* (2.3.2006) has focused on the use of the concept of intersectionality. In Norway there is a growing interest for the concept within gender research,

while the concept so far has received little attention within disability research. My introduction of the concept at the Norwegian conference on disability research in Trondheim in 2006 aroused some interest, and hopefully this Nordic conference will initiate a debate on the usefulness of the concept also within the field of disability research.

The two Swedish researchers de los Reyes and Mulinari have had a special impact on my analysis, and in their book “Intersektionalitet” (2005) they depict intersectionality as a theoretical perspective showing how different historically and situationally dependent power relations are constructed by the mutual interaction of gender, class and ethnicity. Their point of departure is a criticism of the white middle class feminism that due to its hegemony has excluded other groups of women, for instance immigrant women, and, I will add, also women with disabilities. To them it is important to visualize not only the exercise of power and abuse of these women, but also to show their resistance against the abuse to detect how “the unstable construction of power” can be challenged, resisted and eventually neutralized. De los Reyes and Mulinari look at the concept of intersectionality both as a supplement to research on gender, but also as an important contribution to the analyses of power.

Intersectionality and the analysis of power relations

According to de Los Reyes and Mulinari research on power and inequality has gone through significant alterations. Structural and one-dimensional analyses of the construction of power have been replaced by theories that explain how processes create power and inequality at different levels of society. Power and power relations are more and more regarded as constituted by the social interaction between human beings instead of being considered as a result of more constant structures that govern the lives of human beings. Social categories such as class, gender and ethnicity have long been prominent in the analysis of power, but other categories, especially age/generation, have progressively received increased attention, while disability so far has received less attention as a constituting category for power analysis.

In what way do social categories such as gender, class and ethnicity differ from categories such as sexual identity, disability and age/generation? Historically, all these categories have resulted in exclusion, marginalization and stigmatization, but some of them differ from the others by being connected to what the authors call “constitutive forms of inequality”. While

categories such as class, gender and ethnicity are linked to more constant structural relations of exploitation and oppression, categories such as age/ generation and disability are not. Age, for instance, follows the life cycle, since the subordination that one experiences during childhood is temporarily reversed in adulthood only to reappear in old age. The appearance of functional disabilities may similarly happen at different stages in the life cycle, at the same time as there exists a great diversity of degrees and types of disabilities which results in varying degrees of exposure to discrimination and abuse.

Accordingly, the subjective experiences of these social categories are both highly individual, as well as resulting in a collective experience of the disabling barriers of society. The categories of age and to some extent of disability differ from the categories of class, gender and ethnicity which represent a subordination which may accompany you all your life. At the same time these categories constitute the supporting pillars of our society and, consequently, the allocation of economic and symbolic resources. This linkage is not as clear with the categories of age and disability.

Furthermore, the analysis of the intersection between the individual, institutional and structural levels is, according to the authors, fundamental to apprehend how different structures of oppression are articulated, and how they often strengthen each other. To illustrate this, the authors use the example of murders committed to restore the honor of the family to demonstrate how the focus on the patriarchal violence in the family transforms the structural character of violence to an individual or cultural occurrence. An intersectional analysis which links together different levels of analysis may, however, demonstrate how the patriarchal structures of society are reinforced by the racist practices at the institutional level and, thereby, worsening the conditions for women and children exposed to violence at the individual level. On the contrary, it is important to demonstrate how patriarchal violence in the homes is neglected, because of patriarchal and racist attitudes at the institutional and societal levels.

Part II Examples of using intersectionality in analysing abuse

In an earlier paper I have constructed a typology of different categories of abuse based on my doctoral study of abuse of women with physical disabilities (see Olsvik 2006b), which I will only briefly expound here. To embrace all the types of abuse mentioned by the women, I operate with a wide definition of abuse that includes different types and degrees of abuse. I classify abuse in the two main categories of direct or personal abuse committed by individuals and indirect or structural abuse that is “built into the structure and appears as unequal power” (Galtung 1974, p.36). One subcategory of structural abuse is “institutional abuse” which Sobsey (1994) defines as “neglectful, psychological, physical or sexual abuse that takes place in the managed institutional care of human beings” (p.90). Both personal and structural abuse may again be divided into different dimensions of abuse such as physical, psychological and sexual abuse in addition to “neglect” which, according to Sobsey, means that the fundamental needs of the individual are not being met or are unnecessarily delayed and which primarily can be found within institutional abuse.

In my study we can especially see how the power relations related to gender, disability, age in addition to professional power interplay. In the following I will analyse some examples of abuse from my study using the theoretical perspective of de los Reyes and Mulinari and the analytical frame of Essed.

Examples of analysing abuse in schools

In my qualitative study there were several examples of both direct abuse at schools such as physical and emotional bullying by fellow students and with indirect abuse such as neglect by the teachers and the school administration. I will illustrate this with two examples. One of the women, who was dependent on using a wheel chair from early childhood, described the

physical bullying at school in the following way: "In elementary school I was often exposed to physical bullying. It was always fun to push my wheel chair to the ground, since I was not able to get up again by myself. It happened many times that I was lying on the ground until the teacher discovered that I was missing and came to look for me". One of the women, who was hearing-impaired and ridiculed, because she did not always give the proper answers, also told me that during the entire elementary school she was chased and knocked over by a gang of bullies: "I remember the breaks very well. Some of the boys were after me all the time. They looked for me in the school yard and chased me around the school yard and knocked me over....None of the teachers did anything to stop it".

In addition to the physical bullying both these women experienced emotional bullying at school. The last student in the form of gossiping, the first one in the form of social isolation, because, as she said: "I was the first student with a disability who was integrated in my school, and neither the students nor their parents nor the teachers wanted me there". Both these women were in addition exposed to indirect abuse in the form of neglect. The hearing-impairment of the first student was at that time not taken into consideration by the teachers and the administration, which resulted in her having severe difficulties in following the instruction. The other woman felt that her school was not prepared to make adaptations for her specific disability which was both physical and cognitive. This also had serious consequences for her education. The women's reactions to the abuse they suffered in school were very different. The first one said: "I believed things were supposed to be like this, since no one reacted" and left it at that, while the second made an attempt to change her conditions, but without any success. She said: "It aggravated to the point, where I asked to be transferred to a so called special school, but I was not given permission to do that".

If we use the intersectional method of Essed, we see that the context, within which this abuse took place, was both inside the school building and outside in the school yard, and that the abuse involved both their fellow students and the teachers and the school administration. In these situations of abuse "the unacceptable" is both direct abuse in the form of shoving and pushing, teasing and slandering and indirect abuse in the form of neglect by not giving these women an instruction in accordance to their disabilities. Furthermore, it is important to emphasize that the abuse went on more or less continuously during their entire elementary school. Their reactions to this abuse, both in the form of resignation and as an attempt of protesting, were not taken seriously by the school administration and did result in any change

in their situations. By analysing the different power relations with regard to gender, age, disability and the use of professional power we can get a better understanding of the abuse. In the two cases the women's disabilities were prominent both with regard to the direct physical and emotional abuse and with regard to the indirect abuse in the form of neglect. Age seems less important in relation to their fellow students who are in the same age group, but is more relevant with regard to the teachers and the administration which implies an adult - child relationship. Gender was relevant in the cases of bullying by the boys, and it may also have been important with regard to the teachers and the school administration. In addition, we have examples of professional power or what Essed calls functional power in the form of a student-teacher relationship. Gender and age seem to interplay with the functional disabilities of the women, while the latter is strengthened at the expense of age and gender. In addition we have the effect of professional power, which seems to add to the women's vulnerability and which in this case can be looked upon as an underlying factor.

Examples of analysing sexual abuse

Eight of the thirteen women in my qualitative study had been exposed to sexual abuse either in the form rape, fondling, peeping or sexual comments. These different types and degrees of sexual abuse took place both within family settings, at boarding schools and at somatic hospitals and happened at different stages in the lives of the women, both during their childhood, youth and adulthood.

A couple of the women had been the victims of sexual abuse in their early childhood. One of them who was mobility disabled and dependent upon the use of a wheelchair, was sexually abused by a friend of the family from the age of five until the age of fifteen. The second woman was for the first time sexually abused at the age of three by a person unknown to her, and then later abused by other men during her childhood, youth and adulthood. Here sexual abuse of children with disabilities seems to be related more to their age and the sexual identity of the abuser than to their gender and disability. The first woman was very clear on this issue and said: "It did not happen due to my disability, but rather because I was a defenceless child. I believe sexual abuse of children has much to do with power. As I grew older, my gender became more relevant, but I still believe it was primarily due to a need for power and control".

We find the same pattern of power relations with regard to the sexual abuse that happened to three other women during their adolescence. The first one was exposed to peeping by a night watchman at a somatic hospital during one of her long stays due to her disability. The other experienced fondling by a night watchman at a boarding school for the blind during one of her school year. The third one was fondled by a doctor at a somatic hospital during one of her many treatments related to her disability. While she was resting alone in her room, a doctor unknown to her came and examined her in an invading and unpleasant way. The situation was the more traumatic, since she was mobility impaired and was therefore unable to get away from him. When another patient entered the room, the doctor abruptly left, and she never saw him again.

The context, within which this abuse took place, was in two of the cases that of a somatic hospital. The persons involved were in the first case a night watchman and a patient, and in the second a doctor and a patient. The third case took place in a boarding school and involved another night watchman and a young student. "The unacceptable", to use the terminology of Essed, was the sexually abusive acts towards these young women. The humiliation and the shock of this abuse were still very vivid in the minds of these women. The common factors for all the three cases were that the abuse happened, when the women were in their puberty, that the abuse took place in an institutional setting, and that the abusers were men in a superior position in relation to the girls. In these examples we see that the age of the women is an important factor, and that their age interplay with their gender. These two categories strengthen each other mutually and place the young women in very vulnerable situations. The special feature of these abusive situations is that the abusers were men whose job was to treat or look after the girls. Instead they took advantage of their positions to abuse the girls sexually. The underlying factor is the disability of the women which is the main reason why they were in the institutions in the first place, and which added to their vulnerability and therefore contributed to the possibility for abuse.

Three other women in the study had been repeatedly raped during their adulthood by their husbands or cohabitants. All of them were dependent on a wheelchair and had, consequently, problems to escape the abusers. One of them had been physically, emotionally and sexually abused by her husband for many years which resulted in serious physical damage and frequent visits to the emergency unit at the local hospital. "I had severe wounds and blue marks all over and went frequently to the emergency unit, until one guy there recognized me

and said that he did not believe me telling him that I had fallen down the stairway and all that. So he took the initiative to file a complaint against my husband... I simply was so brainwashed that I did not manage to do it myself”, this woman told me. The abuse of this woman happened within the context of her marriage, where the involved partners were husband and wife, and where the wife was severely mobility impaired. “The unacceptable” in this case was the physical and sexual abuse committed by her husband. Her mobility impairment prevented her from getting away, and her long term marriage with an abusive husband resulted in her being “brainwashed” and unable to get out of the marriage by herself.

While age was an important factor with regard to the sexual abuse committed by adult men during the women’s childhood and youth, it was not equally important in these last cases, where the abusers were men at about the same age as the women. Domestic abuse has, therefore, to be understood as a consequence of the patriarchal power relations within a marriage, where gender is an important factor. As we have seen, the abuse can also be related to the women’s functional disability, since it makes it difficult for them to get away from the abusive situations. Their limited mobility can, therefore, be seen as an underlying category that contributes to their vulnerability within their marriages.

Examples of analysing abuse in health institutions

Institutional abuse is an example of structural or indirect abuse that takes place within the framework of an institution and is exercised by the employees of the institution through their profession. I have already mentioned some examples of institutional abuse in the form of neglect within the school system. In addition, several cases of institutional abuse were reported within somatic hospitals, home care and centres for the allocation of help devices. They included cases of neglect, in addition to physical, emotional and sexual abuse.

Several of the cases of physical abuse that took place in hospitals and private homes with regard to medical treatment and care were examples of unnecessary harsh treatment. One of the women described it this way:”Yes, I will call it abuse, when they cross my tolerance for pain and do not pay attention to my pain. This is bordering to abuse”. Another woman told me about neglect in connection with the use of catheter after an operation, which resulted in great pain and a serious infection. “It was physical torture. It was a night in the recovery room that I

will never forget,” she said. A third woman who spent much of her time in hospitals due to her disability, pointed to “all the abuse that doctors and nurses are exercising either because of neglectful and unnecessary painful treatment or by not respecting you as a person”. Similar cases of neglectful care were mentioned with regard to home care. Some of the women were dependent upon home care several times a day, and they were, therefore, more exposed to this kind of abuse than others. Malpractices that result in permanent damage can be looked upon as institutional abuse at the extreme. One of the women in my study became severely speech and mobility impaired due to neglect during a minor operation. She wrote about it to me on her machine and labelled it a huge abuse against her whole family, because, as she wrote, her three small children “in many ways lost their mother that day”. The malpractice was further aggravated, since the hospital did not admit their mistake. Another woman had also experienced a serious case of malpractice; due to neglect by the hospital staff she had been exposed to blood poisoning and had been close to dying. She had just filed a complaint to the hospital. In addition to neglect several women had experienced psychological harassments in the form of degrading comments from the hospital staff often with reference to their disabilities. One of them explained it this way: “It has to do with their attitudes and their lack of respect for persons with disabilities. They do not manage to put their job in the right perspective and to show simple human courtesy towards those that they are supposed to help”.

These cases of abuse have taken place within the context of different health institutions, where those involved were health personal and their patients. “The unacceptable” included cases of malpractice, unnecessary painful treatments together with unnecessary long delays for important helping devices and verbal harassments. The reactions from the patients ranged from judiciary trials and complaints to resignation and frustration. In trying to analyse the abuse within health institutions, professional power appears to be a dominating factor. The use of professional power is closely related to the women’s disabilities, since they are dependent upon the services and help devices of these institutions to be able to function in their everyday lives. Those in need of daily personal services seem to be especially exposed to institutional abuse. Age seems to play a certain role, since children and young people are more vulnerable than adults, while gender seems to play a less significant role except with regard to sexual abuse. In relation to institutional abuse professional power is important and connected to the women’s disabilities, while age and gender are subordinate categories that seem to play an important role only under specific circumstances.

Concluding remarks

By using the concept of intersectionality, as it has been presented especially by de los Reyes and Mulinari, and by illustrating this use of the concept by examples from my doctoral study, I have tried to show how power relations related to gender, age, disability and professional power play different roles in different abusive situations. The social categories have shifted on being the dominant category, but often in interaction with another category. We have also seen how social categories in different abusive situations have strengthened or weakened each other. So far disability does not seem to be the most prominent social category, but it has, however, played an important role as an underlying and important factor in contributing to situations where women are exposed and vulnerable to abuse, and where the other social categories are free to interplay and create potential abusive situations.

By using Essed's method for an intersectional analysis I have tried in a systematic way to analyse the abuse that the women in my study have been exposed to. I have also in accordance to the suggestions made by de los Reyes and Mulinari tried to illustrate how the intersection of the individual, institutional and structural levels of abuse interplay by giving examples of how the abuse is experienced at the individual level, how it can be reinforced within different institutional frameworks, and how in some cases indirect abuse can be a result of state reforms, like the integration of disabled students in ordinary schools. More in-depth analyses are, however, needed in this area.

I also need to analyse more closely the type of resistance that the women have used in reaction to the abuse they have suffered. According to de los Reyes and Mulinari it is as important to point out the resistance to the abuse as to make visible the abuse itself. Only by analysing both factors can we expose what they have called "the unstable construction of power". The women in my study were by no means passive victims, but reacted to the abuse in different ways. Some of them sought help from private or public agencies. Others had filed complaints or asked for compensation for malpractices in hospitals or for the lack of adequate

instruction in schools. Others had become activists in women's network with the intent of helping other women who had suffered similar abuse. In addition, their motivation to join my research project was for some of them the result of a wish to draw attention to the abuse and, thereby, be of help to other women.

By the use of the theoretical perspective of de los Reyes and Mulinari and the method for an intersectional analysis of Essed I have tried to illustrate the usefulness of the concept of intersectionality in analysing power relations especially with regard to abuse and violence. In my view this concept deserves more attention not only within gender research, but also within disability research.

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Intersectionality used in the analysis of power relations in connection with abuse of women with physical disabilities

In this paper I first introduce the concept of intersectionality, especially as it has been presented by de los Reyes and Mulinari (2005), and I then present some examples from my doctoral study to illustrate how I use the concept in the analysis of power relations in connection with abuse of women with physical disabilities. I conclude by pointing out that I have tried to show how power relations related to gender, age, disability and also to professional power play different roles in different abusive situations. The social categories have shifted on being the dominant category, often in interaction with another category, and in some abusive situations some of them have either strengthened or weakened each other. Disability as a social category has not been the most prominent category, but it has played an important role as an underlying factor by contributing to situations where women have been vulnerable to abuse, and where the other social categories have been free to interplay and jointly create potential abusive situations.

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