The Study of Paralympic Athlete Malathi Holla’s Authorized Biography: A Different Spirit

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Abstract
The predicament of women with disability is very disheartening. They face triple discrimination because of their disability, social stigma, and gender issues. Human rights violation is seen in the denial of sex and reproduction. Their social and economic participation is resisted. The traditional roles of marriage and child bearing are denied. In this context, the study of Paralympic athlete Malathi Holla’s authorised biography “A Different Spirit” gains paramount importance in addressing the challenges of women with special challenges. Malathi Holla narrates her struggle to battle the marginalization which reduce the opportunities for the disabled to contribute productively to the household and the community. Attitudinal barriers as well as physical barriers such as lack of adequate or appropriate transportation, physical inaccessibility, and lack of training for Paralympic athlete resulted in reducing the opportunities in social participation. This paper addresses the trials and tribulations of Malathi Holla which unravel the aspects of socio-cultural construct and the struggle for identity of disabled women athlete. The paper also gives a brief introduction about the field of disability and its relationship with the different models of disability. Disabilities need to be accommodated and accepted. The WHO definition of this concept summarizes the most common understanding of the social model: Disability is not an attribute of an individual, but created by the social environment. Hence the management of the problem requires social action, and it is the collective responsibility of society at large to make the changes necessary for full participation of people with disabilities in all areas of social life. (WHO 2001, 28)

Keywords: polio, feminist disability, social model of disability, medical model of disability.

Introduction
Life writings of specially challenged are “performative, meaning that the telling of personal narrative creates the teller’s identity as it is told, rather than simply reflecting a static identity. The story is not outside of the body; it intimately involves the body, its perceptions and lived experiences. As such, the telling of personal narratives is necessarily an embodied experience” (Lindemann, 2009, 5). The authorised biography “A Different Spirit” of Paralympic athlete Malathi Holla is an honest rendition of her struggle in her life’s journey with disability and her incredible accomplishments. Malathi unfolds her fight not only with the bodily disease, but also her accomplishments to prove her “ability” against “disability” amidst lack of accessibility, inaccessible built environments such as public accommodations, transport systems and information. Absence of access to transport is a common community motive to discourage a person with a disability from seeking work to become economically independent or
preventing access from health care to become able. Malathi an international athlete conveys that even in
countries with laws on accessibility, amenability in public buildings is often very poor. The
communication needs of people with disabilities are repeatedly ignored. On detailing her trials and traumas
due to her disability, Malathi Holla addresses the magnitudes of the problem of disability with the eventual
goal of achieving disability pride by giving meaning to her disability experience. The present paper studies
the experiences of Malathi Holla in the light of cultural model of disability, medical model of disability,
social model of disability and theoretical approach, like theory of disability.

Methodology and Approach
The research garbs a theoretical lens and follows the analysis of Maalathi Holla’s authorized biography A
Different Spirit and it employs some internet sources for complementary materials, tries to interpret the
experiences of Malathi Holla in the light of some of the theories of disability studies.

Text
A Different Spirit
An Authorised Biography of Malathi K. Holla
Written by Anantha Krishnan M, the authorized biography is a true story of confidence, optimism,
courage, and the determination to battle and win against a terrible disease ‘polio’. Affected by polio at the
age of fourteen months had to combat every step-in life. Malathi Krishnaswamy Holla was born on July
6, 1958 in Bangalore. Her father ran a small hotel, while her mother took care of her four children. When
Malathi was one year two months old, a raging fever paralyzed entire body. Electric shock treatment for
more than two years saw little Mala regaining strength in her upper body, but below the waist her body
remained completely weak. Observing the undaunted energy in Malathi, Ananth Krishnan writes,
“Notwithstanding the trials and turbulences that plagued her, Malathi decided to live life of Queen Size,
undaunted by the fury of fate”. (Krishnan M, Anantha. A Different Spirit an Authorized Biography of
Malathi K. Holla. Manipal Press, Manipal, 2008.)

Malathi chose sports as the best alternative medicine to forget her pain, and went on to become one of the
most inspiring sports personalities of modern India. With over 300 medals to her credit, she has also been
honored with the prestigious Arjuna, Ekalavya and Padmashree Awards after fighting for her disabled
rights to get nominated for these honors. She represented India in the Paralympics held in South Korea,
Barcelona, Athens and Beijing, Bangkok, South Korea and Kuala Lumpur; World Masters held in
Denmark and Australia, Commonwealth Games in Australia and Open Championships in Belgium, Kuala
attitude has been an eye-opener to many contemporary sports stars, who often refer to her as the Champion
of Champions.” For the record, Malathi has so far undergone 32 surgeries. At present, Malathi works as
a Manager with Syndicate Bank and shelters 16 children with various disabilities at Mathru Foundation –
a charitable trust formed along with her friends. She focuses mainly on polio victims from rural areas,
whose parents cannot afford to send their child to school or provide medical treatment.

Discussion
Before categorising Malathi Holla’s trials and tribulations under disability framework, it is essential to
know whom to categorise as disabled. Susan Wendell, a Senior White University professor in her book
“Toward a Feminist Theory of Disability” writes, “Disability is not a biological given; like gender, it is socially constructed from biological reality.”

The United Nations offers the following definitions and distinctions among impairment, disability and handicap:

Impairment: Any loss or abnormality of psychological, physiological, or anatomical structure or function.

Disability: Any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being.

Handicap: A disadvantage for a given individual, resulting from an impairment or disability, that limits or prevents the fulfilment of a role that is normal, depending on age, sex, social and cultural factors, for that individual. Handicap is therefore a function of the relationship between disabled persons and their environment. It occurs when they encounter cultural, physical or social barriers which prevent their access to the various systems of society that are available to other citizens. Thus, handicap is the loss or limitation of opportunities to take part in the life of the community on an equal level with others. (U.N. 1983: I.c. 6-7)

Malathi Holla introduces her disability in the very opening lines of her book by sharing her dream as a young girl,

“I wanted to chase all the chicks along with their angry mother into their little make-shift home whenever I spotted them….And, I wanted to be the first among my friends to run to the backyard to collect mangoes…I even wanted to fly like a bird. From one place to another fearlessly. But, as I grew up, I realised that you need legs to run. And wings to fly. I wasn’t disappointed. But then I was hurt…and dreamt that…may be …one day I would run…. I would run…. ” (p.1)

Malathi’s dream, disappointment and determination are here. This paragraph is followed by the painful experience of her journey. There is a lot of honesty and energy in the way the story has been told.

Medically, disability struck her when she was a baby. The attack of polio was so severe that it paralysed her whole body. Electric shock therapy for two years facilitated the upper body regain strength. But below the waist, little Malathi wasted away. She suffered from “contracture” (medical term) where her nerves bundled up like a ball. It had to be untangled surgically. If this condition occurred, especially near the pelvis, the legs get bent backwards and the back bends over forward. Malathi underwent surgery almost every six months. This condition of Malathi falls under the category of Medical Model of Disability which is also referred to as the ‘personal tragedy’ model (Thomas & Woods 2003:15), because it defines disability in a fundamentally negative way. From the mid-1800s onwards, the medical (or biomedical) model of disability began to gradually replace the moral and/or religious model in lieu of significant advances in the field of medical science. Disability is regarded as objectively bad, as a pitiable condition, ‘a personal tragedy for both the individual and her family, something to be prevented and, if possible, cured’ (Carlson 2010:5). Terms such as ‘disabled’, ‘invalid’, ‘cripple’, ‘spastic’, ‘handicapped’ and ‘retarded’ are all derived from the medical model (Creamer 2009:22).

The cultural model of disability developed in the North American context, where disability studies have been approached in an interdisciplinary manner by a number of scholars working in the social sciences.
and humanities (cf. Michalko 2002; Titchkosky 2007). The cultural approach does not seek to define disability in any specific way but rather focuses on how different notions of disability and non-disability operate in the context of a specific culture. The Cultural model of Disability refers to the cultural environment of our society which sees impairment as unappealing, unpleasant and unwelcome. Accordingly, parent’s feelings towards the disabled child and treatment of a child with impairment are influenced by the opinion of disability from the world around them. Malathi’s parents were not an exception. Malathi felt like an outsider when she was discouraged from attending relative’s weddings and other family functions. She was not permitted to get her friend’s home. She says, “During my menstrual cycle, I had to stay by myself in the room for three days, and wash my own clothes.” The humiliation and dejection that Malathi experienced is the result of cultural construct.

Her father was determined she should grow up to be self-reliant and confident. He made sure she got a sound education, the sort she needed, even if it meant sending her away from Bengaluru to a special school in Chennai. He said, “Only education will give you the power of knowledge and that will take you a long way in life.” (p.5) She was admitted to a rehabilitation centre in Chennai. There she developed the parts of her body that were strong, and got interested in wheelchair sport. She also learned to be independent. But the travelling from Bangalore to Chennai were heart rendering experience to Malathi. She recalls thus:

“Travel, especially by trains, is a huge problem for the differently-abled. Trains aren’t wheelchair friendly at all and we just cannot even think of using the toilet during our journeys. So, we are forced to control our bowel and bladder movements. Infrastructure in India is very bad for the differently-abled. Those in a wheelchair suffer the most. I’m not even talking about restaurants, cinema halls or shopping complexes.” (p.21)

Further she also adds,

“It’s embarrassing, but nothing can be done as the place was never built keeping the differently-abled.” (p.21)

These feelings of Malathi Holla articulated remind the reader about the recklessness of the society. Inspired by the activism of the British disability movement in the 1960s and the 1970s, the social model of disability developed in reaction to the limitations of the medical model of disability (D’Alessio 2011:44). According to the social model (sometimes also referred to as the minority model), it is society ‘which disables people with impairments, and therefore any meaningful solution must be directed at societal change rather than individual adjustment and rehabilitation’ (Barnes, Mercer & Shakespeare 2010:163)4. It was athletics that allowed her to accept her disability and gain disability pride. This type of marginalization based on the denial of female able-bodied athletics have negatively impacted disabled athletics.

**Conclusion**

The study apart from exemplary accomplishments of Malathi Holla, introduces us to the fact that the People with disabilities are more susceptible to abuses. Though the Article 16 of the United Nations Convention on the Rights of Persons with Disabilities includes the right to be free from all forms of violence, exploitation and abuse. In pursuance of this aim, Article 16 (3) imposes an obligation on States
Parties to ‘ensure that all facilities and programmes designed to serve persons with disabilities are effectively monitored by independent authorities’\(^5\), the exploitations on the specially challenged continues.

**Outcome**

Awareness programmes for an inclusive environment need to be conducted for an effective monitoring of the implementation of Rights of Persons with Disabilities.

**Work Cited**


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