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Voices of Resilience: A Comparative Analysis of *Jyoti Binako Ujyalo* by Sanu Lama and *The Cleft* by Prajwal Parajuly

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Abstract

In the realm of human experience, the concept of disability has undergone a metamorphosis, transitioning from a shadowed existence to a beacon of diversity. This paradigm shift emphasizes the importance of societal acceptance and inclusivity for people with disabilities. Disability, once secluded by a society's misunderstanding, now emerges as a vibrant thread in the fabric of human diversity. It carries with it not just challenges, but also a unique prism through which the world is perceived. Acceptance, the crux of this narrative, stretches its arms wide to encompass all shades of the human experience. The process of disability acceptance involves recognizing that disabilities are an integral part of human diversity, rather than deviations from a norm. This perspective challenges traditional notions of normalcy and encourages a shift towards embracing differences.

This paper presents a comparative exploration of the representation of disability in ‘Jyoti Binako Ujyalo’ by Sanu Lama (Gadul Singh Lama) and ‘The Cleft’, a short story from the anthology ‘The Gurkha's Daughter’ by Prajwal Parajuly. The study seeks how two distinct authors from the region of Sikkim address the theme of disability within their narratives. ‘Jyoti Binako Ujyalo’ delves into the complex interplay between disability and parental acceptance, providing a poignant narrative that highlights the challenges and transformations within familial relationships. The story exemplifies the pivotal role parental acceptance plays in the protagonist's pursuit of identity and empowerment. In ‘The Cleft’, a nuanced exploration of the intersections between disability and gender unfolds. Drawing upon intersectionality, the analysis unveils the double marginalization experienced by the female character with disability. The narrative becomes a canvas where the entwined impact of gender-based discrimination and ableism is painted vividly, urging a more comprehensive understanding of their identities.

Keywords: Disability, Representation, Parental Acceptance, Gender, Female Identity, Intersectionality, Cultural Representation.

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Introduction

Literature serves as a lens to explore human experiences, including disability, and offers insights into how societies can be structured more inclusively. Disabled individuals often exist on the fringes of society, subjected to systemic inequality, discrimination and oppression. Over time, attitudes toward disability have changed due to a variety of factors, such as gender, education, religion, socioeconomic status, and cultural context. These variables significantly shape public consciousness and societal responses to disability. Through its narratives, literature not only reflects the realities of individuals with disabilities but also critiques the societal structures that perpetuate their exclusion.

While terms like ‘special’ are often used to describe individuals with disabilities, such language frequently disguises underlying prejudices that diminish their societal roles, viewing them as burdens rather than as valued contributors. The obstacles faced by disabled individuals are often rooted not in their physical or psychological conditions but in societal attitudes that withhold support at critical moments. This disconnect underscores the role of societal structures in constructing barriers for people with disabilities, rather than their so-called ‘imperfections’ being the source of their challenges.

This paper delves into the representation of disability in two short stories: *Jyoti Binaki Ujyalo* by Sanu Lama (Gadul Singh Lama) and *The Cleft* from Prajwal Parajuly’s anthology *The Gurkha's Daughter*. By examining the psychological and sociological dimensions depicted in these works, the study investigates how societal attitudes influence the lives of individuals with disabilities. Additionally, the analysis explores various models of disability and their intersections with cultural and social frameworks, aiming to illuminate the complex dynamics of marginalisation and advocate for more inclusivity.

Understanding Disability

Disability encompasses physical, mental, cognitive, and sensory impairments that may be congenital or acquired later in life due to accident, illness or other circumstances. It is typically categorised into two broad types: physical disabilities, which restrict physical mobility, and mental disabilities, which affect cognitive functioning and intellectual activities (Ginsburg & Rapp 2013). However, disability is not solely a biological or medical phenomenon; it is a multifaceted concept that encompasses various physical, mental, cognitive, and sensory impairments that affect an individual's ability to perform certain tasks or engage in activities considered typical by societal standards. However, the definition of disability is not universally fixed as it is shaped by cultural, social and political contexts. Over time, disability studies have moved from a narrow, medical model of disability to more complex, inclusive models that consider the social, environmental and psychological factors that influence disabled individuals' experiences.

The concept of disability also extends beyond individual impairments to societal structures that marginalise and restrict the life choices of disabled people. Retief and Letšosa (2018) describe societal attitudes that impose barriers on individuals with impairments as a form of 'social disability.' This perspective emphasises that disability is often less about the physical or mental conditions of the individual and more about the failure of society to embrace and accommodate diversity. The term 'disability' itself suggests a legal and social construction of incapacity, often equating to undesirability or exclusion within societal norms.

Disability Studies, an interdisciplinary field rooted in social sciences, humanities and rehabilitation sciences, has challenged traditional perspectives that view disabilities as conditions requiring cure or correction. Instead, this field advocates for understanding disabilities as differences that demand societal accommodation and acceptance. Historically, disabled individuals have faced alienation and have been positioned as a minority against a normative, able-bodied majority. They are often perceived as 'other,' leading to their marginalisation. This dynamic creates a binary where disabled individuals are treated either with hostility or with patronising sympathy, both of which undermine their dignity and autonomy.

The representation of disability in literature reflects and perpetuates these societal attitudes. Literature often portrays disability as a marker of exclusion, reinforcing discriminatory environments. Disabled characters are either framed as burdens to be pitied or as inspirational figures whose primary function is to catalyse the growth of able-bodied characters. These portrayals echo societal fears of disability and reinforce the idea that it is something to be overcome or escaped, rather than accepted as part of the human condition.

Models of Disability

The study of disability and its representation in literature is informed by various theoretical models and frameworks. These models provide critical insights into how disability is perceived, experienced and narrated, moving beyond simplistic or deficit-focussed understandings to embrace the diverse realities of disabled individuals.

Medical Model of Disability

The Medical Model of Disability, which dominated Western understandings of disability for much of the 20th century, posits that disability is a defect or dysfunction located within the individual. It views disability as something to be fixed or cured, focussing on impairment as a medical condition that limits an individual's ability to function. According to this model, the solution to disability is primarily medical intervention, rehabilitation or care. As Michael Oliver, a key figure in Disability Studies, describes, the medical model frames the person with a disability as a passive recipient of medical treatment, often disregarding the role of societal structures in creating barriers to full participation (Oliver 1996). This model has been critiqued for its emphasis on medical diagnosis and its failure to acknowledge the social and cultural factors that contribute to the disabling experience.

Social Model of Disability

In contrast to the medical model, the Social Model of Disability, which emerged in the 1970s and 1980s, shifts the focus from the individual's impairment to the societal structures and attitudes that create obstacles for disabled people. Pioneered by scholars like Michael Oliver, Tom Shakespeare and Vic Finkelstein, the social model argues that disability is not an inherent trait of the individual, but rather a result of society's failure to accommodate and include diverse bodies and minds. The social model emphasises the need to change societal attitudes, eliminate barriers in the physical environment and provide equal opportunities for participation.

In this framework, disability is understood as a social construct rather than a medical or moral problem. As Oliver explains, disability is the disadvantage or restriction of activity caused by a contemporary social organisation that takes no or little account of people who have physical impairments and thus excludes them from the mainstream of social activities (Oliver 1990). This model advocates for societal change through accessible infrastructure, education and equal rights policies, which would allow disabled individuals to lead full, independent lives without being burdened by societal prejudices or physical barriers.

The Human Rights Model of Disability

The Human Rights Model of Disability frames disability as a social issue and emphasises the inherent dignity and equal rights of persons with disabilities. It seeks to ensure that individuals with disabilities enjoy fundamental human rights on par with others, focussing on equality, autonomy and non-discrimination. This model emerged as a response to earlier paradigms, such as the medical and charity models. The human rights model underscores the need to dismantle societal barriers — be they physical, legal or attitudinal — that limit the full participation of disabled individuals in society. It aligns with international frameworks that advocate for inclusive policies, equal opportunities and respect for individual differences. By emphasising empowerment and inclusivity, the human rights model reframes disability not as an individual's deficit but as a collective responsibility to ensure equitable access and participation in all aspects of life.

Critical Disability Studies

Critical Disability Studies (CDS) is a relatively recent and evolving field, with its boundaries often intersecting with and overlapping those of the social model of disability (Davis 1995; Garland Thomson 1997). Drawing from postmodernist and poststructuralist theories, particularly the works of Foucault (2006) and Derrida (2001), CDS challenges foundational concepts like ‘impairment’ and ‘disability.’ This theoretical grounding offers significant flexibility, allowing for diverse and critical interpretations of disability. CDS emphasises the cultural and linguistic construction of ‘disability’ and disableism (Thomas 2012). While it can incorporate ideas of emancipation or rights-based approaches, not all scholars in the field necessarily align with these perspectives.

CDS seeks to re-conceptualise ‘disabled bodies and minds’ by focussing on their capacities, potential, interconnectivity, and possibilities (Sadjadi 2012; Goodley 2013). The field has been particularly influential in examining ableism and challenging normative assumptions about functionality. It also addresses critical intersections between disability and sexuality, including the incorporation of queer studies, and has contributed significantly to the development of ‘mad studies’ (Siebers 2008; Campbell 2009). By politicising the demand for user involvement, CDS underscores the necessity of fostering greater control and representation for individuals within these frameworks.

Disability, Culture, Society, and Gender

In the 21st century, theorists like Rosemarie Garland-Thomson and Simi Linton have emphasised the role of identity in shaping the experience of disability. Garland-Thomson, in ‘Extraordinary Bodies’, discusses how disability is socially constructed through physical difference and its meaning in a cultural context. She focusses on the ‘normate’ as a dominant societal standard, against which all deviations (including disability) are measured and often devalued. The ‘normate’ is an idealised concept of the able-bodied, able-minded individual, which marginalises disabled individuals and reinforces stereotypes about their worth or abilities.

Simi Linton, another prominent scholar in the field, explores how disability is constructed not only as a physical reality but also as an identity category. Linton argues that disability identity is often shaped by social stigma, exclusion and representation in media and culture. In her work ‘Claiming Disability: Knowledge and Identity’, Linton contends that disability can be a source of empowerment when individuals reclaim the label, shifting it from a negative signifier to one of pride and resistance (Linton 1998).

The foundation of disability studies lies in understanding disability as a culturally constructed narrative of the body — a system that categorises, differentiates and labels bodies, thereby shaping societal hierarchies. This framework legitimises the unequal distribution of resources, status and power within an inherently biased social and physical environment. Disability, as a concept, encompasses a few essential dimensions: it serves as a system for interpreting bodily differences; it signifies the relationship between bodies and their environments; it is a set of social practices that produce the categories of both the able-bodied and the disabled; and it reflects the inherent instability and variability of embodied identities.

Culture plays a significant role in shaping individual needs, perceptions, emotions, and societal interactions. Societies, through their distinct values and practices, mould not only personal consciousness but also collective attitudes toward disability. Cultural forces influence relationships within families, peer groups and broader socio-economic and political structures, shaping feelings about gender, sexuality and social roles. These cultural pressures often dictate how societies perceive and respond to disability, embedding patterns of acceptance or marginalisation within their fabric.

Religion, too, exerts a profound influence on individuals and societies, including those with disabilities. Across history, religious beliefs and practices have shaped attitudes toward disability, offering explanations, justifications or frameworks for inclusion and exclusion. However, the exploration of religion's impact on disability remains scattered across fields like religious studies, health, ageing and disability studies, leaving a gap in comprehensive understanding.

The intersection of disability and gender introduces a complex dynamic. Both are constructs that historians trace through time, philosophers interrogate, religious scholars interpret, geographers examine, rhetoricians critique and literary critics unravel. These narratives, deeply embedded in cultural stories, often simplify disability's complexities, restricting the autonomy and opportunities of disabled women. Such stories perpetuate exclusionary environments and employment discrimination, reinforcing a societal push toward escaping or erasing disability rather than embracing it.

Feminist disability studies seek to challenge and transform these cultural narratives about disabled women. This field works to reimagine representations of women and individuals with disabilities, using critical theory to dissect and reframe these discourses. It treats gender and disability as evolving concepts — discourses to be analysed, rhetorical traditions to be contested and metaphors to be deconstructed. As Kim Q. Hall observes, 'Feminist disability theory engages several of the fundamental premises of critical theory: (1) that representation structures reality, (2) that the margins define the centre, (3) that gender (or disability) is a way of signifying relationships of power, (4) that human identity is multiple and unstable, and (5) that all analysis and evaluation has political implications' (Hall 2011).

Exclusion and marginalisation not only restrict the social participation of disabled individuals but also reduce their ability to contribute productively to their households and communities, increasing their vulnerability to poverty. Barriers — both attitudinal and physical — such as societal biases, inaccessible transportation and limited learning opportunities, severely impact access to education and employment. This, in turn, diminishes income prospects and restricts social engagement, perpetuating cycles of exclusion and inequality. Feminist disability studies thus advocates for dismantling these barriers, emphasising inclusivity and equity to reshape societal perceptions and practices surrounding disability.

The Cleft

The Cleft by Prajwal Parajuly tells the story of Kaali, a domestic helper with a cleft lip. She is entangled in a co-dependent relationship with Parvati, her verbally abusive employer from Kathmandu. Simultaneously, she corresponds with a man who lures her with promises of fame, which the reader discerns as an attempt to manipulate her into a life of prostitution**.** The narrative shows how the representation of disability challenges societal norms and examines the complexities of human diversity, portraying disability through the characterisations and narrative as a crucial dimension of individuality and identity. Through this exploration, the narrative casts a critical lens on the cultural perceptions, prejudices and stigmas associated with disability, focussing particularly on the impact of community and familial expectations.

Kaali, the central character is born with a cleft lip, a physical deformity that becomes both a literal and metaphorical marker of her difference. Parajuly's narrative addresses the social implications of this difference, emphasising the ways in which a single physical characteristic can become the basis for broader exclusion. The cleft lip symbolises her separation not only from an idealised standard of beauty but also from societal acceptance, leading to her marginalisation within her own family and community. Through her experiences, the text reveals the subtle and overt mechanisms by which people with disabilities are 'othered' in society, whether through open ridicule, avoidance or pity.

In his foundational work, *Enforcing Normalcy: Disability, Deafness, and the Body*, Lennard J. Davis argues that 'the problem is not the person with disabilities; the problem is the way that normalcy is constructed to create the "problem" of the disabled person' (Davis 1995). Davis emphasises that disability is not an inherent issue but one that society constructs by enforcing rigid standards of normality. This idea is evident in *The Cleft* when Kaali is identified by her cleft lip, internalising societal judgments of 'perfection' and 'beauty' as reflective of a person's worth. Kaali is identified by others as: '…stupid. Are you the one with the bad lip?' (Parajuly 2012). Kaali is not normal as she does not fulfil the criteria of having a normal whole, complete lip like others. By creating a character who experiences shame and alienation due to her physical difference, Parajuly demonstrates Davis's concept of enforced normalcy. The reaction of others towards her showcases how societal expectations define certain bodies as 'deviant', underscoring the protagonist's struggle to fit within a normative framework that devalues her unique appearance. This aligns with Davis's critique that disability only emerges as a 'problem' when contrasted with an arbitrary norm.

Kaali, a 13-year-old servant girl, faces rejection even within her own family. Her mother, pressured by poverty and of too many dependents, sells her '...for free' (Parajuly 2012) when she is just eight years old. The act of naming her 'Kaali — the black one' (Parajuly 2012) underscores her family's rejection, associating her dark complexion and cleft lip with undesirability. Growing up in a society that venerates the myth of the ideal, beautiful body is challenging for all women, but for disabled women it becomes an even greater source of alienation. As Ghosh (2010) notes, girls with disabilities often begin to feel ashamed of their bodies as early as late childhood and early adolescence, a time when bodily identity becomes central to their sense of self. Kaali's family primarily rejects her due to her gender. However, her status as both a girl and a disabled individual makes her even more unwelcome. This compounded marginalisation leads her mother to easily abandon her to a stranger: 'Her mother, pressured by the growing number of mouths to feed, decided to chop off the weakest link in her family. It had to be a girl, and Kaali, with her cleft lip, was the most useless of them all. She was a sickly child, a liability who'd never be an asset' (Parajuly 2012).

Kaali's life takes a turn when she is taken in by Parvati, a widow living in Kathmandu. However, her acceptance into Parvati's household is not framed as compassion but as charity stemming from her perceived inferiority due to her cleft lip. Parvati makes this evident through her constant reminders: '...you'd be thrown out of everywhere else. Not to forget the way you look — black as coal and those grotesque lips' (Parajuly 2012). The language used reflects how society devalues individuals with disabilities, reducing their presence to a tolerable act of benevolence rather than genuine inclusion.

Kaali's continued stay in Parvati's household hinges entirely on her uncomplaining and submissive demeanour, which serves as her only redeeming quality in the eyes of her employer. Parvati explicitly acknowledges this, stating, 'That's the reason you still have a home, Kaali — you never complain' (Parajuly 2012). This dynamic underscores the harsh reality that for disabled individuals, particularly women, societal acceptance often demands conformity to subservient roles. The narrative demonstrates that disability, coupled with gender, compounds the need to conform to oppressive expectations, reinforcing the notion that a 'good life' for disabled individuals can only be achieved through silence and submission.

Rosemarie Garland-Thomson, a prominent voice in disability studies, introduces the concept of the 'aesthetic of disability' in her work *Staring: How We Look*. She explains that disability challenges traditional aesthetics, stating: 'The disabled body... has been historically constructed as an aesthetic spectacle, an object of curiosity and a symbol of societal fears' (Garland-Thomson 2009). In *The Cleft*, Parajuly's protagonist experiences society's scrutinising gaze, with her cleft lip becoming a focal point of ridicule and rejection. This societal disdain is justified within the narrative when Parvati remarks about Kaali: 'Your brothers and sisters hated you, and I shouldn't blame them, for you were scary to look at' (Parajuly 2012). Kaali's cleft lip is not merely a physical trait but a social marker, serving as a locus for the community's anxieties and biases. Here, disability is both spectacle and stigma, and this gaze perpetuates the protagonist's marginalisation, positioning her as a visible 'other' within her cultural environment. Parajuly's depiction aligns with Garland-Thomson's assertion that disability often disrupts normative beauty standards, highlighting societal discomfort with physical differences.

Kaali’s cleft lip becomes central to her identity, with her entire existence revolving around this aspect of her disability. According to Parvati, Kaali’s condition is blamed for her every action, as reflected in statements such as: ‘Must be the extra hole in your lip that makes you hungry all the time’ (Parajuly 2012). Furthermore, her disability is portrayed as so potent that it can ‘... scare even the ghosts’ (Parajuly 2012). These perceptions are imposed upon Kaali, leading her to internalise the belief that the only way to escape her misfortune is to undergo surgery to fix her cleft lip.

In *Stigma: Notes on the Management of Spoiled Identity*, Erving Goffman examines the concept of stigma and its impact on an individual's social interactions and self-perception. He writes: ‘The term stigma... refers to an attribute that is deeply discrediting’ (Goffman 1963), emphasising how society imposes devaluation on individuals with visible differences. Kaali’s sense of ‘incompleteness’ reflects the psychological toll of stigma and societal rejection, which Goffman describes as the ‘management of a spoiled identity’. Parajuly portrays how social stigma transcends physical appearance, undermining self-worth and restricting the protagonist’s social interactions and aspirations and often leads to wrong directions. Thus, Kaali’s disability becomes her greatest vulnerability, leaving her susceptible to the manipulations of a boy who deceives her with statements like: ‘You have a pretty face... It’s a pity your bad lip conceals it’ (Parajuly 2012), and ‘You can even become an actress once people see your real beauty after the surgery’ (Parajuly 2012). Her desperation to ‘overcome’ her disability drives her to believe that surgery is the only way to escape her misfortune.

In *Disability and Difference in Global Contexts*, Nirmala Erevelles argues: ‘Disability is not merely a physical condition but is deeply embedded in social, political, and cultural structures’ (Erevelles 2011). Erevelles emphasises that cultural and societal values dictate who is considered ‘worthy’ or ‘normal.’ Kaali’s disability marks her as unworthy and, at times, even less than human. For instance, Parvati disparagingly asks, ‘Did you eat like a pig, Kaali?’

(Parajuly 2012). Furthermore, Kaali's disability is used to deny her basic opportunities, such as education. Parvati dismissively states: 'What will she do with an education and that face? It will all be a wasted effort' (Parajuly 2012). In this context, disability is not treated as a neutral characteristic but is laden with moral judgments and superstitions that reinforce Kaali's exclusion. Her disability is not limited to physicality but is entangled in societal narratives that assign worth — or the lack thereof — to certain bodies.

Jyoti Binako Ujyalo

Raising a child with special needs is an immensely challenging and often overwhelming responsibility for parents. When parents perceive that their child is unlikely to achieve an independent, routine adult life, parenting becomes a lifelong commitment. Research highlights the significant emotional, financial, and familial toll associated with raising a child with special needs (Craig et al. 2020; Hayes & Watson 2013). The anticipation of lifelong caregiving for such children is accompanied by heightened psychological challenges and pressures for parents, influencing their perspectives on parenting and shaping their vision of the family's future (Bekhet 2018; Karst & Van Hecke 2012). In *Jyoti Binako Ujyalo* by Sanu Lama (Gadul Singh Lama), the narrative explores these dynamics through the story of Manda, a young girl gradually losing her eyesight. The story delves into her family's struggles as they navigate this reality, striving to provide her with a 'normal' life while grappling with the emotional and practical challenges of their situation.

Susan Wendell, in *The Rejected Body: Feminist Philosophical Reflections on Disability*, critiques ableist ideologies that perpetuate the marginalisation of individuals with disabilities. She asserts that disability is deeply embedded in cultural ideals that stigmatise the different and devalue the non-normative body (Wendell 1996). Wendell's perspective highlights how societal constructs of health and normalcy frame disability as undesirable and problematic. This critique is reflected in the portrayal of Manda. Her blindness is perceived as a ‘curse’ by her family and community, with her father interpreting her condition as divine retribution for his past sins. This belief drives his wife to worship Suryanarayan as a form of atonement. Wendell’s theory underscores this critique, as she calls attention to the ways in which cultural norms impose limits on people with disabilities.

Susan Wendell also examines the transformative power of self-acceptance and resilience for individuals living with disabilities. Wendell states: ‘When society does not make space for difference, the disabled must create spaces within themselves to find acceptance’ (Wendell 1996). Manda’s journey embodies this principle. Although she experiences the world visually for only two years, she gradually adapts to her new reality, learning to navigate her surroundings and accept her altered circumstances. This reflects a shift within the family as well, as they move toward a more accepting perspective on disability, emphasising resilience over stigma.

Research on the emotional challenges faced by parents of children with disabilities highlights stress, distress, depression, anxiety, and guilt as significant factors affecting their well-being. These emotional burdens are not solely linked to the child’s behavioural difficulties or specific needs but also stem from the extensive familial, financial and practical adjustments required to meet those needs. Such demands often negatively impact the parents’ quality of life (Hayes & Watson 2013; Karst & Van Hecke 2012). In ‘Jyoti Binako Ujyalo’, this emotional turmoil is evident in Dhanraj, Manda’s father, who feels constant tension and desperation to find a solution to Manda’s blindness. Despite repeated diagnoses from medical professionals, Dhanraj remains sceptical of their ability to cure the ‘darkness’ in his daughter’s life, leading to his mounting frustration.

Parents of children with disabilities adopt various coping mechanisms to adjust to their child’s condition. These approaches can range from constructive and supportive to negative and detrimental. The emotional strain often leads parents to make decisions that may not align with their intentions but help them manage immediate challenges. This dynamic is portrayed in the ‘pink *papad’* episode, where Manda’s parents, Dhanraj and Chandra, manipulate her perception by giving her the incorrect *papad*. Unable to see, Manda is misled into believing she has received a pink *papad*, which she desires. While their actions stem from convenience rather than malice, the situation reveals their struggle to navigate the complexities of parenting a child with a disability. Notably, Manda’s brother sacrifices his own preference to ensure she receives the actual pink *papad*, highlighting a sense of familial support and compassion.

Support from family, friends and the broader social network is critical for disabled persons and parents raising a child with a disability. Such support can mitigate the negative psychological and physiological effects associated with caregiving (Ekas et al. 2016; Lovell et al. 2012). Manda’s sense of safety and comfort derives from her family’s care. Her younger brother’s role exemplifies this support; he assists Manda without complaint or a sense of superiority, prioritising her needs and even adapting their games to suit her abilities. This nurturing environment reflects the positive influence of familial education and values.

Despite their efforts to support Manda, her family remains influenced by societal perceptions of disability and desires for her to ‘overcome’ her condition. Dhanraj, in particular, struggles with the uncertainty of her prognosis. When informed that there is only a ‘fifty-fifty’ chance of restoring Manda’s vision through surgery, he feels immense frustration. His hope hinges on certainty — a guarantee of her recovery — because he fears the possibility of her world remaining perpetually dark. Unlike her brother, who can see the ‘light of a day,’ Manda’s life, in Dhanraj’s eyes, risks being engulfed in an unending night. This underscores the broader societal pressure to normalise disability rather than accept it as part of human diversity.

Comparative Perspectives on Both Texts

The Cleft by Prajwal Parajuly and *Jyoti Binako Ujyalo* by Sanu Lama centre on characters experiencing physical disabilities and explore societal responses to their conditions, yet they approach disability from distinct cultural and relational perspectives. In *The Cleft*, Kaali's disfigured lip marks her as 'other' and serves as a physical manifestation of her perceived subordination within a co-dependent and abusive relationship. Her disability becomes a defining trait that influences her interactions with others, including her mistress, Parvati, who controls Kaali emotionally, underscoring a power imbalance that positions disability as a point of exploitation. Kaali's interactions with the man who promises her fame illustrates another form of manipulation, where her vulnerability, stemming in part from her marginalisation as a disabled individual, is used to push her toward a life of prostitution. Here, disability is represented as a factor that subjects individuals to increased societal and personal exploitation.

In contrast, *Jyoti Binako Ujyalo* by Sanu Lama presents disability within a family context, depicting Manda's progressive blindness and the impact of her condition on familial dynamics. Unlike Kaali's disempowerment, Manda's family rallies around her, striving to provide her with a sense of 'normalcy' and mitigate the challenges of her impending disability. This narrative treats disability as a shared family experience, emphasising adaptation and support rather than alienation. Manda's story reveals a nuanced portrayal of disability as a process, one that the family collectively manages, reflecting a compassionate response and a desire for inclusion.

Both works shed light on the vulnerabilities faced by disabled individuals but do so through different lenses: *The Cleft* examines the exploitative potential of disability within hierarchical social relations, while *Jyoti Binako Ujyalo* portrays disability as a challenge met with resilience and familial solidarity. Together, these narratives illustrate contrasting societal reactions to disability, highlighting the role of interpersonal relationships in shaping the experiences of disabled characters.

Conclusion

In both these texts, *The Cleft* and *Jyoti Binako Ujyalo*, disability is not portrayed as a burden on the individuals themselves but rather as a challenge imposed by societal norms that prioritise conformity over inclusion. Both Kaali and Manda experience moments of joy and contentment, with capabilities and strengths unique to them. Yet, they face pressure to 'overcome' their disabilities to fit societal expectations of normalcy. Kaali's happiness could flourish if she weren't constantly judged for her cleft lip or relegated to a life shaped by others' prejudices; a supportive environment might have enabled her to pursue an education and live freely, instead of falling prey to those who exploit her vulnerability. Similarly, Manda finds joy and independence in small ways — locating her doll, discerning her parents' intentions, or differentiating colours through practice — demonstrating that her blindness does not preclude her from leading a fulfilling life. These stories raise significant questions about the necessity of medical intervention to 'cure' disabilities. Must Kaali undergo a cleft operation or Manda an eye surgery to live meaningful lives? Or could society's acceptance of their unique conditions allow them to thrive without altering their bodies? Ultimately, the narratives suggest that true empowerment lies not in forcing individuals to conform to societal standards but in creating a world where they can live authentically, without the added barriers imposed by societal expectations of 'normalcy'.

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