

Gender and Disability: Voices of Female Students with Disabilities on Gender-based Violence in Higher Education, Kenya.

Dr. Nyambura Salome

Department of Educational Foundations, Kenyatta University, P.O. BOX 43844-00100, Nairobi,
Kenya

E-mail: salomenm@yahoo.com

Prof. Paul Mbugua

Director, Disability Services, Kenyatta University, P.O. BOX 43844-00100, Nairobi

E-mail: paulkmbugua@gmail.com

Mr. Wyclife Ong'eta

M.ED candidate, Department of Educational Foundations, Kenyatta University, P.O. BOX 43844-00100, Nairobi, Kenya

E-mail: ongetaw2009@gmail.com

All correspondence should be directed to Dr. Nyambura Salome, E-mail: salomenm@yahoo.com

Abstract

Higher education is considered as an important engine for overall socio-economic advancement (Negash, Olusula and Colucci, 2010). However, there is a glaring disparity in provision of higher education opportunities to students with disabilities (SWD). Furthermore, a UN report (2010) posits that available data mostly focuses on educational achievements, this indicates that female students with disabilities (FSWD) fare less well in the higher educational arena than either their male with disabilities or female without disabilities counterparts. Moreover, women and girls with disabilities experience double discrimination, which places them at higher risk of gender-based violence, sexual abuse, neglect, maltreatment and exploitation. Stubbs and Tawake (2009) observes that despite some helpful laws, policies and systems of practice in some countries, compared to their disabled male or non-disabled female peers, women with disabilities: are less educated; experience higher rates of unemployment; are more likely to be abused; are poorer; are more isolated; experience worse health outcomes; generally have lower social status. The Higher educational needs of FSWD have yet to be taken into account by those who work to promote gender equality and the empowerment of women, as well as those who work in the field of disability (UN, 2010). This is an exploratory study of the experiences of FSWD at one of the public universities in Kenya. It gives voice to the students' experiences of various forms of gender based violence (GBV) through their study years and how this affects their participation in campus activities. The paper further provides suggestions on how the University can enhance equalization of learning opportunities regardless of ones gender and disability.

Key words: Female students with disabilities, Higher Education, Gender based Violence, Gender and disability

Introduction

The UN Convention on the Rights of Persons with Disabilities which came into force in 2008, states that persons with disabilities have the right to participate in all development programmes. In retrospect, the UN General Assembly in 2009 passed a resolution recognizing the importance of including disability in all MDG programmes as an important step for inclusive development (Norad, 2012). In a sense these activities brought the much needed focus on persons with disabilities. The World Bank (2008) estimated the number of persons with disabilities at between 10 and 12 per cent of the global population. According to UNESCO (2011) of the 67 million children of primary school age worldwide who are out of school, one-third are children with disabilities. An estimated 186 million children with disabilities worldwide have not completed their primary school education. Thus, children with disabilities make up the world's largest and most disadvantaged minority in terms of education. As a consequence, the quality of life of persons with disabilities in developing countries is significantly lower than that of their peers. The International Annual Review (IAR) (2009-2010), indicates that for people with disabilities, earning a living and education are top priorities, however, 90% of persons with disabilities in sub-Saharan Africa are unemployed, in India people with disabilities are employed 60% less than non-disabled people while in Thailand, 70% of persons with disabilities are unemployed. On the other hand, women with disabilities are less likely to participate in the labor force, the employment rate of non-disabled men as 85 per cent compared with 75 per cent for non-disabled women. The employment rate for disabled men is 52 per cent and disabled women 48 per cent in the world.

Indeed, women with disabilities are more marginalized, as they live at the corner of disability and womanhood, with two "minority" identities, a double dose of discrimination and stereotyping and multiple barriers to achieve their life goals. Their struggles remain on the margins of social justice movements that should represent them (Waxman and Wolfe, 1999). They experience double discrimination, which places them at higher risk of gender-based violence, sexual abuse, neglect, maltreatment and exploitation (UN, 2010). They often are perceived as sick, helpless, incompetent and asexual - and as powerless.

This has been attributed to the societal attitudes and prejudices, whereby in some communities those with disabilities are said to be as a result of a curse. Others are viewed as less human and invisible, this is worse for women than male with disabilities. This negative environment gives license to perpetrators, who may view female students with disabilities (FSWD) as easy targets. Young women with disabilities are regularly deprived of the skills and opportunities they need to recognize and address violence, including adequate opportunities to learn about sexuality or culturally appropriate sexual behavior and mores (Rousso, 2001). As the UN report (2009) observes they are often poor and/or face various other challenges unknown to most people. Wherever discrimination occurs, they often experience further prejudice, based on common assumptions and widely held beliefs about their status and capacity both as females and as people with disabilities.

While many women and FSWD derive enormous strength, resilience and creativity from their multiple identities, they also face the consequence of discrimination such as low rate of employment, low wages, low educational levels, high rates sexual and physical violence and limited access to health service, including reproductive health care (Waxman and Wolfe, 1999). According to UNESCO (2010) lack of opportunity rather than lack of interest is an important reason for their later and more limited experiences; indeed, FSWD face architectural, transportation and attitudinal, pedagogical and policy barriers as they attempt to take on their social and educational scene.

Although there is increased access to higher education globally, traditionally disadvantaged groups including FSWD have been continually neglected as their educational needs has been unnoticed, for instance, a global study by National Disability Authority (2004) indicated that only 1% of undergraduate students in higher education had a disability. Groce and Bakshi (2009) research revealed that literacy rates for adults with disabilities in developing countries are possibly as low as 3% overall, and for women with disabilities at only 1%.

The evidence drawn on by Stubbs and Tawake (2009) revealed that, despite some helpful laws, policies and systems of practice in some countries, compared to their male with disabilities or able bodied female peers, women with disabilities: are less educated; experience higher rates of unemployment; are more likely to be abused; are poorer; are more isolated; experience worse health outcomes and generally have lower social status. In addition, they experience violence within the family, institutions and community at higher rates than their nondisabled counterparts. Physical and sexual abuse and other forms of violence, including sexual harassment, disrupt the lives of most female students and young women with disabilities. Similarly, despite the growing interest nationally and internationally in the physical and sexual abuse of people with disabilities, most of the research has not been gender-specific or age specific (Rouso, 2001).

The Universal Declaration of Human Rights (UDHR) 1948 Article 3a states that admission to higher education should be based on merit, capacity, efforts, perseverance and devotion, showed by those seeking access. No discrimination can be accepted in granting higher education on grounds of race, gender, language or religion, or economic, cultural or social distinctions, or disability (UNESCO, 1998). However, the contents of this article have not clearly been implemented in higher institutions in many countries as the needs of FSWD such as provision of safe spaces are an afterthought. The UN report (2010) indicates that available data, mostly focused on educational achievements, indicates that FSWPD fare less well in the higher educational arena than either their male with disabilities or female without disabilities counterparts. The Higher educational needs of FSWD have yet to be taken into account by those who work to promote gender equality and the empowerment of women, as well as those who work in the field of disability.

The Kenya Persons with Disabilities Act (PDA) came into force in June 2004 GoK (2003) with its mandate being to implement the rest of the Act on the rights, privileges and protection of persons with disabilities such as inclusion of persons with disabilities in education and training programmes. Several efforts have been undertaken towards implementation of this policy, such as the establishment of special units in public schools, provision of assistive devices, training of teaching

personnel and sensitization in order to counter the effects of stigmatization. However, there is limited monitoring and evaluation of these initiatives in order to clearly ascertain the success and challenges that have contributed to incidents of GBV among the FSWD in higher education institutions.

Statement of the problem

There is a glaring disparity in provision of higher education opportunities to FSWD. Moreover, it has been noted that women and girls with disabilities experience double discrimination, which places them at higher risk of gender-based violence, sexual abuse, neglect, maltreatment and exploitation. Research observes that despite some helpful laws, policies and systems of practice in some countries compared to their disabled male or non-disabled female peers, women with disabilities: are less educated; experience higher rates of unemployment; are more likely to be abused; are poorer; are more isolated; experience worse health outcomes; generally have lower social status. The Higher educational needs of female students with disabilities have yet to be taken into account by those who work to promote gender equality and the empowerment of women, as well as those who work in the field of disability.

Purpose of the study

The study aimed at exploring the forms of GBV experienced by FSWD through their studies particularly at the university, their coping mechanism and the effects these experiences had on their participation in social and academic activities.

Theoretical underpinning

The Social model theory contends that it is the society which disables persons with disabilities. Disability is something imposed on top of the physical impairments by the way society isolates and excludes those with disabilities from full participation in society (Hodkinson and Vickerman, 2009). In 1983, the disabled academic Mike Oliver coined the phrase "social model of disability" in reference to the ideological developments. He focused on the idea of an individual model (of which the medical was a part) versus a social model, derived from the distinction originally made between impairment and disability (Brain, 2006). Furthermore, Watermeger, Swartz, Lorenzo, Schreito and Priestly (2006) observe that disability can no longer be seen as a static feature of an individual but rather as a dynamic and changing experience defined by the changing nature of environment.

Hodkinson and Vickerman (2009) pointed out that the social model perspective turns the attention away from identifying people with disabilities to identifying and addressing the barriers in society that restrict their full participation in everyday life. Thus, from this perspective, disabling can be understood by focusing on the relationship between persons with impairment and the society or environment of which they are part. Therefore, the response to disability is the restructuring of society for it to be able to deal appropriately with people with disability. In this paper an extended use will be made of the social model theory in its analysis of how the society disables persons with disabilities by the way they are unnecessarily isolated and excluded from access and full participation in higher education.

The model draws attention to identifying and addressing the barriers in higher education institutions that restrict access and full participation of SWD in learning activities rather than the traditional approach of only identifying students with disabilities. This implies that certain mechanisms need to be put in place to create an environment where all students, including SWD, can participate equally in the process of teaching and learning. According to Wawire, Elarabi and Mwanzi (2010) identifying disabling barriers to academic participation in higher education would promote improvement of organizational structures within higher education institutions by addressing specific needs of students with disabilities.

The feminist disability critical theory, views disability as a representational system rather than individual or medical issues. Feminist disability theory similarly questions our assumptions that disability is a flaw, lack, or excess. To do so, it defines disability broadly from a social rather than a medical perspective (Rosemarie, 2005). A feminist disability approach fosters complex understandings of the cultural history of the body. By considering the ability/disability system, feminist disability theory goes beyond explicit disability topics such as illness, health, beauty, genetics, eugenics, aging, reproductive technologies, prosthetics, and access issues. The theory addresses such broad feminist concerns as the unity of the category woman, the status of the lived body, the politics of appearance, the medicalization of the body, the privilege of normalcy, multiculturalism, sexuality, the social construction of identity, and the commitment to integration. This theory enabled this study to pay particular attention to the forms and extent of disability amongst the respondents and how this contributed to their being at risk of GBV.

Research methodology

The study employed mixed methods data collection through the use of both qualitative and quantitative methods to produce comprehensive data on the plight of FSWD in Higher Education. A case study of a higher institution of learning was undertaken, whereby the FSWD were sampled. The case study approach allows for an intensive or an in-depth investigation of the problem at hand and brings out a deeper understanding of the situation (Kombo and Tromp, 2006). The target population was 13 FSWD who were purposively sampled from the institution of higher learning. The study utilized questionnaires, interviews and Focus Group Discussion to collect rich and in-depth data regarding GBV experiences of the respondents. The statistical package for Social Sciences (SPSS) Version 20 was used to process and analyze the data from all the questionnaires. The qualitative data was analyzed thematically where by codes were established using the data and this enabled categories and emergent issues to be identified.

Findings

The 13 FSWD in the study had various levels of disabilities and were in various levels of study. There were 54% of the respondents who had various levels of physical disabilities such as amputee, using crutches and cerebral palsy, while 46% were students with visual impairment. The FSWD cut across the various levels of study, 46% of the students were 1st year, 23% were in their 2nd year of study while 31% were in 3rd year.

GBV experiences

In terms of experiencing GBV, 69% of the respondents had experienced various forms of GBV within the University precincts. Out of this number, 53% had experienced psychological and 27% physical violence, while 20% were non-committal. The students, who experienced psychological violence, revealed that their peers without disabilities made derogatory remarks in their presence as indicated in the following statement:

“Someone jeered at me telling me that I will never amount to anything with my disability”

Another respondent, observed that:

“People usually give very disturbing comments as I pass by due to the deformity of my legs, and they are also not ready to mingle freely with me.”

The research revealed that the students also experienced discrimination while in class. For instance lecturers demanding them to participate in practical works regardless of ones disability as illustrated in this quote:

“...During a dancing lesson a lecturer demanded that I should also dance..... When I told him I couldn't because of my disability, he insisted that I had to dance either by shaking my head or else I was going to lose some marks for that unit.

A female student in crutches also echoed that it was frustrating to get to class on time because of the few tuk-tuks available at the university.

“It is frustrating to go to class when late, one misses part of the lesson..... (She pauses and puts a sad face)..... Tuk-tuks drivers sometimes do not observe time and ignore my phone calls. This makes me late for class.”

Some also observed their experiences while attending the large classes whereby other students pushed and shoved for seats disregarding their inability to do the same for themselves. The visually impaired students noted their agony when some lecturers indiscriminately wrote on the board without reading aloud what they wrote thus not considering their presence in class. Some also noted the demeaning language the peers used such as, “Na huyo anaitwa.” (What's that one called) instead of talking directly to them. This in essence portrays how able-bodied students reduce the personhood of the students with disability by referring to them as, 'it' or as a reference to others.

Other female students with disabilities said that their fellow students both male and female sat far from them while in class or a group discussion as this denied them a chance to make an opinion in a group as well as not befriending. As a result they felt isolated and lacked one to consult when need arose:

“People seat far from you. They feel that you are not like them. You feel isolated, no person to ask anything.”

All the respondents shared about instances where lecturers failed to involve them in learning activities due to their disability or made comments that hurt them deeply. This is illustrated by one of the students, as follows:

“When I shared my agony with a certain lecturer in terms of accessing his class which was on second floor, he angrily told me to go hire a helicopter.”

It emerged from the research that the non-disabled peers largely did not understand the FSWD nature of disability and challenges that came as some seemed only geared to take advantage of them. This was exemplified in this quote:

“.....There is my friend, a boy we have known each other for a fairly short time. He usually insists we have a sexual relationship but I disagree. This denies me peace because I feel he wants to take advantage of my disability.”

In terms of physical violence, one student with visual impairment revealed that she was drugged and raped by a drunkard male student at night within the university. The other visually impaired students claimed that they had experienced sexual harassment within their hostels during the day and at night when very few people were present in the hostels. One student with visual impairment explained that some students pushed her while walking along the university streets without apologizing as well as others pretended to help them in their rooms only to steal their belongings.

The study also sought to know whether the respondents felt safe when in campus. The study results revealed that 39% of the students felt safe in class, 29% inside hostels, 29% in the university compound while 3% only felt safe when at home. The findings of the study further revealed that in the hostels male students without disabilities roamed around and stayed beyond the 10.00am-10.00pm university rule and this posed a lot of insecurity for instance.

“The tension at night is so high for me as there are no enough security within our hostel.”

The washrooms are usually outside the room and thus for the visually impaired they reported experiencing fear when they had to go to the washroom late at night, since sometimes they could feel the presence of strangers in the corridors.

The lack of adequate provision of security personnel allocated to the hostels seemed to create the sense of insecurity mostly amongst the visually impaired students, as 3% noted only felt safe when at home where they are showered with a lot of love and care.

The research further interrogated whether the female students with disabilities experienced GBV when at home. The students expressed various forms of discrimination in their families, 30% reported having experienced stigma from members of their extended family due to their visible

disabilities where they would be taunted and excluded from familial events, 54% experienced GBV at home, where they would be beaten indiscriminately as indicated by the following statement:

“My aunt, whom I lived with, would beat me so severely for no reason, and after I could do nothing after the beatings.”

The research further revealed that the respondents also experienced various forms of GBV while undergoing basic levels of education. This was more for those who went to mainstream public schools, whereby they shared being teased and taunted not only by their peers, but also some of the teachers, who told them that they were incapable of achieving high grades at school as compared to the other students in spite of their cognitive ability. This mitigated on their self-esteem and concentration in class

The research also sought to know whether the respondents felt that the GBV issues were resolved amicably. Most of the respondents 65% noted that there were many unresolved issues and this greatly hurt them. For instance, the visually impaired student who had been raped never got to know who the culprit was, she was bitter because justice had not been achieved. Another respondent who had also been physically abused noted that her case had been dismissed since she had no evidence.

Coping Strategies

The study also explored the various mechanisms the respondents used to cope with the forms of GBV they experienced. The majority of them noted being defensive whereby they would either be brunt and rude to those who were harassing them, others said they would just laugh it out since they could not do anything more about it. For instance a student, who had not been able to access a seat in one of the large classes, just decided to sit on the corridor in spite of her straining to listen to the lecturer. Probed why she could not ask the others to help her, she laughed and noted that, ‘Why ask them when they can see for themselves that I have crutches?’

Another coping mechanism was withdrawal, whereby some of them noted to living isolated lives between their classrooms, the library, hostel and the church. These respondents pointed out that they did not want to provoke instances where they would be hurt by others if they tried to engage in more social activities within the campus. We observed that most of the students who used this mechanism were those who had severe physical impairments.

A paltry 20% of the students noted that they were assertive and that they would insist on being noticed and included in group discussions, in spite of the resistance from their able-bodied peers. This group of students had a high self-esteem and after more probing we discovered that these were students who had been in special needs schools, where most probably they had been encouraged to stand out in spite of their disability.

The other coping mechanism that was employed by the respondents to cope with the various forms of violence was seeking out solace from God. Half of the respondents attested to having been actively involved in church activities and that whenever they were hurt they would recoil to the church, where they would cry and pray for comfort, and sometimes talking to the church ministers.

When probed on whether they would seek for counseling services and the mentorship programmes that were there, the respondents noted that they would rarely seek for the counseling services because of the attitude many have on counselors revealing the clients information. Some of the students, though mentioned their mothers as strong pillars, and that they would often share with them such experiences.

Effects of GBV

We also inquired on the effects of experiencing the various forms of GBV, where most of them noted of being stressed, because most of the time they were defenseless. This led to poor concentration on their studies and eventually low performance compared to their intended expectations.

The second aspect that we observed was that majority of them suffered from low self-esteem that affected their contribution in classroom activities. Some of them shared the fear of joining group discussions with male students, whom they felt would try to take advantage of them, whereas others shied away from joining some groups because of the attitude they felt from their peers.

Another significant effect was the tendency to withdraw from academic and social activities within the university. This led to most of them socializing with other disabled peers thus mitigating on their personal development.

Finally, due to their sense of feeling unsafe, their poor socialization with other peers and their being no transport system at night, most of them were unable to access the library at night and during the weekends. Certainly, this curtailed them from other research on their courses and thus mitigated on their academic performance.

Discussion

The majority (69%) of the respondents indicated to have experienced various forms of GBV while pursuing their studies at basic level and at the university and also within their home environment. The study indicated how the FSWD experience psychological and physical forms of violence as they negotiate through their campus life. The respondents expressed their dissatisfaction with their able-bodied peers both males and females who seemed oblivious of their situation, and how using derogatory remarks, taking advantage of them was hurting towards them. The results of this study further showed that the respondents experienced discrimination in class, from their peers but also the lecturers, majority of whom seemed oblivious of these students. The study also noted incidents where some FSWD experienced sexual harassment within the university premise an act that was done by male non-disabled counterpart. In terms of the coping mechanisms, it emerged that the respondents largely felt defenseless and thus opted to withdraw from social and academic activities thus reducing their experience of GBV, others noted being engaged in the church for solace, majority turned to their mothers. This indicates that there is need for these students to be empowered and taught more coping strategies. It is noteworthy that GBV affected their academic endeavors as it interfered with their self-esteem, confidence and concentration in class activities. These findings corroborate with the Waxman and Wolfe (1999) research that pointed out that

women with disabilities live at the corner of disability and womanhood, with two “minority” identities, a double dose of discrimination based on gender and disability.

Recommendations

Based on the study findings, the following recommendations were made:

- There is need to undertake more sensitization and awareness regarding disability and gender issues. Awards can also be offered to those students who assist and promote the well-being of students with disability within the campus.
- Promotion of self-advocacy among the female students with disabilities is greatly needed. There is need to encourage students with disability, especially the female students who are more at risk of experiencing GBV to report those incidences and to talk about it freely.
- Provision of counseling services to FSWD to deal with self-esteem problems, the fear and sense of defenselessness or hopelessness in dealing with GBV.
- Boosting security within the university especially around the students’ hostels and this should be done hand in hand with the students with disabilities.
- The washrooms for students with disabilities should be within their quarters, since the security personnel cannot be present at the time students with disability need to use the washrooms at night
- Organization of workshops and social events to overcome shock and embarrassment of having children with disabilities particularly the parents and the society in general to enhance inclusivity.
- Full implementation of the Disability University Gender Policy Act and also the Disability Policy Framework in Higher education (2009).

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