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A Study and Critique of Sexual Violence Against Disabled Individuals in Sub-Saharan Africa: Implications for Policy and Practice of Trauma-Informed Care

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A Study and Critique of Sexual Violence Against Disabled Individuals in Sub-Saharan Africa: Implications for Policy and Practice of Trauma-Informed Care

By Kaeley L. Sells

In Sub-Saharan African countries, sexual violence is an unfortunate reality for many women and girls. It is a gender-specific crisis, yet women and girls with disabilities have higher exposure to such sexual violence and discrimination. Violence against people with disabilities is a multifaceted issue that occurs most often in situations of cultural and religious stigma, economic disparity, and lack of legal protection. This paper will explore the intersection of gender and disability in the experience of violence and discrimination against females throughout their lifetime. Disabilities and what constitutes an individual as disabled can be defined in a myriad of ways. According to the Centers for Disease Control and Prevention, a disability can be defined as, "any condition of the body or mind that makes it more difficult for the person with the condition to do certain activities and interact with the world around them."[1] However, for the purpose of this paper, disability or a disabled person is specifically in reference to those with physical and/or mental abnormalities that limit activities and creates a barrier for participation in the world around them.

Countries located in Sub-Saharan Africa are especially susceptible to economic inequality, cultural prejudice, and corrupted governments that place women with disabilities at risk of sexual violence. For the purpose of this paper, the countries located in Sub-Saharan Africa, or "south African countries" refer to countries that lie south of the Saharan Desert. However, research from African countries with similar social and political structures will be

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[1]"Disability and Health Overview," Centers for Disease Control and Prevention, September 2020, https://www.cdc.gov/ncbddd/disabilityandhealth/disability.html#:~:text=A%20disability%20is%20any%20condition%20of%20the%20body,disabilities%2C%20such%20as%20those%20that%20affect%20a%20person%E2%80%99s%3A.

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applied in this paper. Sexual violence towards women with disabilities is the byproduct of the

influence of folk and modern religions encouraging this type of abuse. The history of religious

and cultural misinterpretation which has led to violence and prejudice against disabled women

has set the precedent for modern culture in southern African countries. This societal expulsion of

the disabled community in partnership with sexist cultural perspectives has led to a place of

increased vulnerability of sexual violence specifically towards disabled women. The economic,

societal, and legislative disparity present within many Sub-Saharan African countries similarly

contribute and perpetuate cycles of sexual violence. Therefore, knowing there is a historical

cultural and social stigma towards women and girls with disabilities due to the influence of

traditional religion, lack of political protection, and lower economic status, both non-government

organizations and government organizations in southern Africa must focus not only on

inclusivity but advocate for protective legislation and holistic, trauma-informed care for

individuals with disabilities who have experienced sexual violence.

Sexual Violence Against the Disabled

Physical Violence

It is imperative to begin the critique of sexual violence against women and children with

disabilities in southern African countries by first highlighting the general acceptance and role of

physical violence towards the disabled. Individuals with disabilities who are living in Sub-

Saharan Africa are exposed to higher rates of physical violence than those without disabilities.

Specifically, physical violence can include, but is not limited to, beatings, hitting, physically

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pushing/pulling individuals, etc.[2] While physical violence may be present within a majority of

the world, those who are disabled are subjected to higher rates of violence as abusers often

justify such abuse through reference to disabilities. For example, many abusers often justify such

physical abuse by claiming that it is due to the child's disability that such maltreatment is

warranted. Most often the physical violence perpetrated against these disabled individuals is by

the people closest to these women and children. Abuse is commonly found in schools,

institutions, and homes and committed by parents, teachers, and peers.

This physical violence often begins as soon as a child is born, as there are high rates of

infanticide throughout countries in southern Africa. Infanticide plays a role in such violence as

many parents with disabled children believe their child has been cursed. The community then

similarly reflects such beliefs. The role of community belief and religion will be further

discussed in this paper; however, it is helpful to see that physical harm to those with disabilities

often begins at birth. More specifically, girls become the subject of physical and sexual violence

more often than boys as their gender is more closely aligned with folk traditions' view on

witchcraft and magic. Girls with any sort of physical disability or abnormality are often thought

of as being witches or cursed and thus become targets for physical violence.[3] The rates of

killings and/or physical violence towards children, and more specifically girls born with

disabilities are high as there remains a cultural and social stigma towards such physical and

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[2]Yeukai Muruzi & Priscilla Gutura, "The Vulnerability to Violence among Women with Physical Disabilities in the City of Tshwane Pretoria, South Africa," *African Journal of Gender Society and Development*, 11, no. 3 (September 2022): 96, 10.31920/2634-3622/2022/v11n3a3.

[3] Robert J. Priest, Abel Ngolo, and Timothy Stabell, "Christian Pastors and Alleged Child Witches in Kinshasa, DRC," *OKH Journal: Anthropological Ethnography and Analysis Through the Eyes of Christian Faith* 4, no. 1 (2020): 21-22, https://doi.org/10.18251/okh.v4i1.84.

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mental differences. Therefore, as physical violence towards the disabled continues to be accepted

as a social norm or cultural expectation, sexual violence often follows.

Sexual Violence

Physical violence against women and children with disabilities sets the precedent for the

acceptance of maltreatment of the disabled in many Sub-Saharan African countries, this in turn

leads to increased sexual violence. Women are exposed to violence at higher rates than their

male counterparts, especially when it comes to sexual violence and vulnerabilities. In fact,

women with disabilities are four times more likely to experience sexual assault when compared

with women without disabilities.[4] Women and girls who have disabilities have a double form of

discrimination as they are marginalized not only due to their sex, but because of their physical or

mental disabilities as well. Most sexual violence perpetrated tends to be gender specific, such as

intimate partner violence.[5] Therefore, women with disabilities are placed not only at risk of

sexual violence due their gender but because of their physical status as well.[6] Due to the

assumption that their bodies are outside of the norms of beauty and normalcy, intimate partner

violence against women and girls with disabilities often goes unnoticed. Likewise, the

assumption that such females are incapable of child-rearing often leads to the false presumption

that such sexual violence will render no consequences, such as an unplanned pregnancy, for the

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[4]Meg Stone, "Preventing Sexual Violence against People with Disabilities: Empowerment Self-Defense, Risk Reduction Education, and Organizational Change," in *Sexual Assault Risk Reduction and Resistance*, ed. Lindsay M. Orchowski and Christine A. Gidycz (Cambridge, MA: Academic Press, 2018), 354, https://doi.org/10.1016/b978-0-12-805389-8.00015-3.

[5]Judy L. Postmus, Gretchen L. Hoge, Jan Breckenridge, Nicola Sharp-Jeffs, and Donna Chung, "Economic Abuse as an Invisible Form of Domestic Violence: A Multicountry Review," *Trauma, Violence, & Abuse* 21, no. 2 (2018): 261–83, https://doi.org/10.1177/1524838018764160.

[6]Christine Peta, "Gender Based Violence: A 'Thorn' in the Experiences of Sexuality of Women with Disabilities in Zimbabwe," *Sexuality and Disability* 35, no. 3 (2017): 371–86, https://doi.org/10.1007/s11195-017-9485-9.

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abuser.[7] Women and girls with disabilities are exposed to intimate partner violence at higher

rates as there is similarly a social perception that due to their disabilities, they are not full human

beings and thus should not be granted the same human rights.[8] With such presumptions, society

enables for increased sexual violence as men view disabled women and girls as merely objects

rather than equal human beings. This perception, in cultures that struggle with such low view of

equality between genders, allows for further violence and discrimination towards the disabled

community. Sexual violence is not limited to women in relationships as the issue is larger than

merely intimate partner violence and can be expanded as rape and sterilization are similar forms

of sexual violence experienced at higher rates in girls and women with disabilities.

Rape has been an instrument of violence against women in developing countries for

centuries. Rape is predominantly found to be used as a weapon against women during war times,

as noted in recent conflicts. A United Nations report cited that during the civil wars in Liberia

ninty percent of girls and women over the age of three were raped.[9] Similarly, in the Congo,

there were at least twenty-seven thousand sexual assaults in just one providence during the wars

in the early 2000s. By another UN accounting, approximately three quarters of the women in

other areas were raped.[10] The correlation between instability in governance and rape is seen

through the increased presence of rape during civil wars. Countries in southern Africa are most

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[7]Jasmine McGowan and Karla Elliott, "Targeted Violence Perpetrated against Women with Disability by Neighbors and Community Members," *Women's Studies International Forum* 76 (2019): 102-117, https://doi.org/10.1016/j.wsif.2019.102270.

[8]Shanna K. Kattari, Angela Lavery, and Leslie Hasche, "Applying a Social Model of Disability across the Life Span," *Journal of Human Behavior in the Social Environment* 27, no. 8 (2017): 865–80, https://doi.org/10.1080/10911359.2017.1344175.

[9]Anne-Marie Goetz, "Women Targeted or Affected by Armed Conflict: What Role for Military Peacekeepers," (presentation, UNIFEM, Sussex, UK, 2008).

[10]Jeffery Gettleman, "Rape Epidemic Raises Trauma of Congo War," *The New York Times*, October 2007, https://www.nytimes.com/2007/10/07/world/africa/07congo.html.

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exposed to these seasons of instability and increased violence against women and girls, which, while affecting most females, increasingly places disabled women and girls at risk of violence. As noted in one study, eight of the twelve disabled women interviewed stated that they had experienced sexual assault. Three of which experienced this type of violence as a child. In fact, one participant with paraparesis, which is the partial inability to move one's legs, noted how she was raped by a relative at the age of eight or nine. Another, with visual impairment, noted how she was raped while in boarding school.[11] Similarly, disabled women are exposed to higher rates of violent rape as one study illustrates, twenty-seven of the thirty-two participants reported that they had suffered from aggressive and violent sexual harassment and assault. Seventeen of them reported being raped and gave accounts of assault thirty-nine times, as nine experienced such abuse more than once. In the same study, thirteen experienced such sexual violence as children while twenty-six experienced it as an adult.[12] The issue of rape becomes increasingly common in the disabled community as their quality of life is often seen as inferior to even their abled-body female counterparts. Therefore, in cultures in which rape is commonly accepted during times of instability, disabled women and girls must be further protected as they are not seen or valued as full human being.

Another form of sexual violence against specifically the disabled female demographic is sterilization. Societal prejudice and discrimination influences perception of disabled women particularly surrounding their ability to reproduce. This can become particularly dangerous as

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[11]Muruzi and Gutura, "The Vulnerability to Violence", 92.
[12]Richard A. Aborisade, "Sexual Violence against Women Living with Albinism in Nigeria: Exploring Abuse within a Disability-Specific Context," *Journal of Sexual Aggression* (2022): 1–14, https://doi.org/10.1080/13552600.2022.2095450.

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there is an increased normalcy of involuntary sterilization.[13] Sterilization can be defined

medically as the "process or act that renders an individual incapable of sexual reproduction."[14]

According to the Human Rights Watch, involuntary sterilization is considered a form of sexual

violence as it constitutes a violation of the right to be free from torture, cruel, inhumane, or

degrading treatment.[15] The primary concern is that these women with disabilities often cannot

express desire or lack of desire in sexual matters. This reality then can lead to the justification of

sterilization as groups want to protect against sexual violence. However, the act of involuntary

sterilization is a sexual act of violence in that it is stripping away dignity and worth of these

women upon the presumption that they are inadequate to reproduce. Similarly, there tends to be

increased risk of sexual assault and/or rape in women who have been sterilized as there is no

longer a fear of accidental procreation.[16] It is vital to note that sterilization does not eliminate the

role of sexual abuse nor decrease the risk of a sexually transmitted disease.[17]

Vulnerability to HIV/AIDS

        Considering the prevalence of sexual violence against women with disabilities, it is also

important to note the increased likelihood of transmission of STDs/HIV as well as the physical

repercussions of such violent sexual encounters for these women and girls. Unfortunately, one of

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[13]Open Society Foundations, "Against Her Will: Forced and Coerced Sterilization of Women Worldwide," 2011, https://www.opensocietyfoundations.org/publications/against-her-will-forced-and-coerced-sterilization-women-worldwide.

[14]Mosby, "Mosby's Medical Dictionary," Internet Archive, January 1970.

[15]Tafadzwa Rugoho and Maphosa France, "Challenges Faced by Women with Disabilities in Accessing Sexual and Reproductive Health in Zimbabwe: The Case of Chitungwiza Town," *African Journal of Disability* (May 2017): https://doi.org/10.4102/ajod.v6i0.252

[16]Shantha Rau Barriga, "'As If We Weren't Human'" Human Rights Watch, March 2023, https://www.hrw.org/report/2010/08/26/if-we-werent-human/discrimination-and-violence-against-women-disabilities-northern.

[17]Miriam T. Gomez, Glenys M. Carlson, and Kate Van Dooren, "Practical Approaches to Supporting Young Women with Intellectual Disabilities and High Support Needs with Their Menstruation," *Health Care for Women International* 33, no. 8 (2012): 678–94, https://doi.org/10.1080/07399332.2012.684812.

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the common myths associated with disabled women and girls is that they are asexual. This then
translates to the presumption that women with disabilities are unable to transfer or give
HIV/AIDS or, in more extreme cases, that sex with disabled women can cure one's AIDS.
Therefore, women with disabilities are placed at a much higher risk of sexually transmitted
diseases and sexual violence as men attempt to cure their AIDS through forced sex.[18] Similarly,
the transfer rate of sexually transmitted diseases and HIV/AIDS is higher in women and girls
who cannot negotiate safe sex.[19] Because disabilities often inhibit one's communicative
capabilities, there is little to no acknowledgment of safety in these sexual encounters. Within the
conversation of sexual abuse, it is imperative that there is discussion on the role of STD/HIV
transfer, noting the ways in which protecting from sexual violence can limit unnecessary
transfer.[20] Not only is there an increase in sexually transmitted diseases, but there are other
medical risks such as gynecological problems including painful infections that damage
reproductive organs and cause bleeding, infertility, pelvic discomfort, and painful
menstruation.[21] These results help highlight the interconnectedness of physical violence and
sexual violence against disabled women and girls as often the sexual abuse and violence leads to
further physical impairment or increases the chances of death through transmission of
HIV/AIDS.

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[18]Willene Holness, "Informed Consent for Sterilization of Women and Girls with Disabilities in the Light of the Convention on the Rights of Persons with Disabilities," *Agenda* 27, no. 4 (2013): 35–54, https://doi.org/10.1080/10130950.2013.857869.

[19]Samrawit Dessie, Yirgashewa Bekele, and Margarita Bilgeri, "Sexual Violence against Girls and Young Women with Disabilities in Ethiopia. Including a Capability Perspective," *Journal of Global Ethics* 15, no. 3 (2019): 325–43, https://doi.org/10.1080/17449626.2019.1690554.

[20]Trevor G. Mazzuchelli, "Feel Safe: A Pilot Study of a Protective Behaviors Program for People with Intellectual Disability," *Journal of Intellectual & Developmental Disability* 26, no. 2 (2001): 115–26, https://doi.org/10.1080/13668250020054431.

[21]Amy Elman, "Confronting the Sexual Abuse of Women with Disabilities," *National Online Resource Center on Violence Against Women* (January 2005): 12.

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Psychological effects of Discrimination

When discussing the role of both physical and sexual violence, it is crucial to discuss the psychological effects of such maltreatment. In one study in South Africa, eleven of the twelve participants experienced some form of emotional abuse as well as emotional effects post experiencing physical and sexual violence. Primarily, much of this psychological and emotional turmoil occurred in participants who experienced sexual violence throughout their childhood.[22] Several known psychological effects can be identified post-sexual assault. These include depression, anxiety, increased stress, and suicidal ideation.[23] Individuals who have experienced sexual assault due to their disability have long-term emotional turmoil and trauma due to such events which then can cause a cyclical pattern of increased exposure to violence, as there are increased internal thoughts of self-harm. In many cases, the sexual offender is someone close to the individual, making such psychological trauma much more drastic. For many women who were abused or assaulted by their partners or husbands, they merely had to devise ways of adjusting to and accepting such abuse. Many victims testified to coping mechanisms including "alcoholic drinking," "smoking," "crying out my sorrows," and "seeking God's consolation."[24] This process of covering for and submitting to such abuse is especially common in intimate partner violence as the women state that they felt no choice but to accept their fate and did not consider reporting such behaviors because of the relationship between the two individuals. Even fewer women considered accessing therapy or counseling services because they stated that they,

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[22]Muruzi and Gutura, "The Vulnerability to Violence," 94-95.
[23]Dena Hassouneh-Phillips and Elizabeth McNeff, "I thought I was less worthy: Low Sexual and Body Esteem and Increased Vulnerability to Intimate Partner Abuse in Women with Physical Disabilities," *Sexuality and Disability* 23 (2005): 227-240, doi:10.1007/s11195-005-8930-3.
[24]Aborisade, "Sexual Violence against Women Living with Albinism," 9.

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"never considered it necessary," "do not have the money to pay for such service," "have worse problems to be concerned about," or "can easily shake off the negative effects of being raped."[25] There are clear psychological effects to such sexual violence that largely stem from the societal and cultural stigma and perception of those with disabilities that cause women and girls with disabilities to accept such maltreatment.

While the connection between disabilities and sexual abuse is evident, there is also a strong connection between negligence and individuals with disabilities. When discussing psychological impact on those with disabilities, it is helpful to see the role of negligence as it is a form of emotional abuse. Those with physical disabilities or any limitation to one's ability to participate in daily living activities are at higher risk of not only abuse but neglect.[26] In another study, five of twelve participants stated that their needs had been neglected at home and in school.[27] This neglect perpetuates feelings of loneliness and isolation already felt by individuals with disabilities who have experienced such sexual violence. Such negligence perpetuates cycles of violence as it contributes to a lack of support systems to disabled women and children and contributes to the prevalence of under-reporting in such circumstances. Both negligence and abuse cultivate negative psychological effects that are pervasive and long-term, thus when evaluating the sexual violence against disabled women and girls it is vital take a holistic approach.

Traditional Religion and Culture's Influence on the Disabled

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[25]Aborisade, "Sexual Violence against Women Living with Albinism," 9.
[26]Della Valentina Fina, Rachele Cera, and Giuseppe Palmisano, "The Preamble of the CRPD," in *The United Nations Convention on the Rights of Persons with Disabilities* (Cham, Switzerland: 2017).
[27]Muruzi and Gutura, "The Vulnerability to Violence," 97.

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Traditional Religion and Culture

There are three primary types of cultures that are found throughout the world: guilt and innocence, shame and honor, and fear and power. Many countries in southern Africa associate themselves with a fear and power culture. This means that much of their culture promotes instilling fear to discourage that which is unpleasant and ascribing power to that which the collective culture finds meaningful.[28] This type of power-fear dynamic becomes especially dangerous when mixed with animistic society's religious beliefs that incorporate the influence of evil spirits as individuals seek power through magical rituals.[29] As previously noted, many witchcraft and occult practices view women and girls with disabilities as being malign witches, which is particularly dangerous as the consequence of such accusations often leads to physical punishment and/or death. Therefore, family members often neglect or physically abuse many of their children with disabilities. Community and family members subject children to prolonged periods of starvation and dehydration along with perceived cleansing rituals such as removal of body hair, being burned with fire, etc.[30] One pastor in Kinshasa, the capital of Democratic Republic of Congo, states that many rituals include burning, cutting hair, purging, hitting the witches with an iron rod, making the claimed witch stare into the sun or putting hot peppers into the witch's eyes or ears.[31] Traditional beliefs within many Sub-Saharan African countries place those with disabilities at a clear risk of physical violence as they connect physical impairments with the influence of spiritual evils. Similarly, these myths can lead to increased sexual violence

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[28]Geoff Beech, "Shame/Honor, Guilt/Innocence, Fear/Power in Relationship Contexts," *International Bulletin of Mission Research* 42, no. 4 (2018): 338–46, https://doi.org/10.1177/2396939318783682.

[29]Jayson Georges, *The 3D Gospel: Ministry in Guilt, Shame, and Fear Cultures* (New York, NY: Time Press, 2017).

[30]Priest et al., "Christian Pastors and Alleged Child Witches," 3.

[31]Priest et al., "Christian Pastors and Alleged Child Witches," 26.

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as disabled women and girls are often thought of as having the ability to cure diseases or conjure

up wealth for those that sleep with them.[32] Likewise, many in rural South Africa believe the

common myth that having sex with a disabled women will make another person wealthy,

successful, respected, and most importantly, feared by the community.[33] Many traditional

societies believe that being disabled is the result of magical influence thus increasing the risk of

physical and sexual violence towards disabled women and girls.

In contrast to the Western world, most countries in south Africa are considered

collectivist cultures. Within collective cultures, the individual's desire is considered less valuable

than the collective good of the community.[34] The role of collectivism within African countries is

important to note as an individual's personal well-being is overlooked on behalf of the collective

good for their group. When examining the role of traditional beliefs and the violent cycle of

maltreatment for women with disabilities because of cultural influence, it is clear to see that

often the treatment of the individual is overlooked because of collective acknowledgement of the

importance of protecting the society. One example of this was in a case study of a young girl

named "Akua" in Ghana, where the fear of witchcraft is prevalent. As Onyinah states, a child can

be accused of being a witch if they have any sense of illness or disability that causes them to act

differently. Onyinah goes on to state that in Akua's case the collective belief in the role of

witchcraft prevented her from receiving help from others in her community and instead she was

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[32]Tlakale Nareadi Phasha and Lucy Dudu Myaka, "Sexuality and Sexual Abuse Involving Teenagers with Intellectual Disability: Community Conceptions in a Rural Village of KwaZulu-Natal, South Africa," *Sexuality and Disability* 32, no. 2 (2014): 153–65, https://doi.org/10.1007/s11195-014-9344-x.
[33]Phasha and Myaka, "Sexuality and Sexual Abuse,"159.
[34]Batja Mesquita, "Emotions in Collectivist and Individualist Contexts," *Journal of Personality and Social Psychology* 80, no. 1 (2001): 68–74, https://doi.org/10.1037/0022-3514.80.1.68.

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pushed aside.[35] Because of the role of collective culture within most African nations, viewing

such individuals as spiritually cursed demands physical reparations. This then continues the

cycle of violence against individuals and particularly women and girls with disabilities.

In this discussion, one cannot dismiss the role that Western religions such as Christianity

play in the continuing discrimination of people with disabilities. One of the most traumatic

events for Africa is when its culture collided with Western philosophy.[36] Specifically,

syncretization between occult traditions and Christian morality has led to a continuation of

violence within predominantly Christian cultures in southern Africa. Gifford argues that this

misunderstanding of the faith as Africa began to inherent Western practices is evident most in

the misunderstanding and mixing of the spiritual matters found in traditional beliefs with the

Christian faith. Most predominantly, he argues, is the misidentification of discriminated

individuals (such as those who are disabled) as witches. There is a disconnect between the

interpretation of scripture and the authority of scripture leading to a fundamental

misunderstanding of the role of the spiritual realm on those with disabilities Despite biblical

teachings found in Psalm 82:3 and 31:8-9 which encourage Christians to defend and care for the

poor and oppressed, many Christians in Sub-Saharan Africa misinterpret scripture and focus too

heavily on spiritism. One example of such misunderstanding of the Christian faith that has led to

a continuation of violence against those with disabilities within Christian nations is Daniel

Olukoya, a Nigerian pastor and the founder of the Mountain and Fire and Miracles Ministries.

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[35]Robin Scott, "Pentecostal Exorcism: Witchcraft and Demonology in Ghana, by Opoku Oniyah," *OKH Journal: Anthropological Ethnography and Analysis Through the Eyes of Christian Faith* 4, no. 1 (2020): 132-133, https://doi.org/10.18251/okh.v4i1.93.

[36]Paul Bowers, "African Theology: Its History, Dynamics, Scope and Future," *Africa Journal of Evangelical Theology* 21, no. 2 (2002): 109-125.

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Olukoya claims that the entire Bible deals only with witches, demons, spells, and curses and singles out a measly thirty-five verses in which he bases his entire theology.[37] Olukoya is just an example of the continued mixing of folk tradition within modern religious practices in Sub-Saharan African countries, perpetuating the violence against women and girls with disabilities. It is vital to recognize the syncretization of traditional beliefs and spiritual matters within the Christian faith as many countries in south Africa now claim to hold predominantly Christian views. Despite this claim to be Christian nations, there is a clear connection to traditional practices and spiritual beliefs that influence treatment of disabled individuals which enable for a continuation of maltreatment towards this demographic .In understanding the power/fear cultural dynamic presence and the way in which religion permeates many Sub-Saharan African countries, government and non-governments organizations alike need to be working in reconciling biblical truths and faith practices. This can be done through intentional discipleship so Christians can understand passages such as John 9:1-3, and other examples of healing in the Bible through a theologically sound base rather than through a syncretistic viewpoint. While there has been a shift in many African countries towards more Western religions such as Christianity, traditional beliefs still influence much of their culture.[38] Therefore, there needs to be correction of such syncretism as it creates harmful religious practices so that there is a clear understanding of the responsibility for everyone to protect vulnerable individuals, no matter where their religious inclinations lie.

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[37]Paul Gifford, "A Dysfunctional Worldview," *OKH Journal: Anthropological Ethnography and Analysis Through the Eyes of Christian Faith* 4, no. 1 (2020): 70-71, https://doi.org/10.18251/okh.v4i1.63.
[38]Angi Stone-MacDonald, "Cultural Beliefs about Disability in Practice: Experiences at a Special School in Tanzania," *International Journal of Disability, Development and Education* 59, no. 4 (2012): 393–407, https://doi.org/10.1080/1034912x.2012.723947.

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Economic Disadvantages Against People with Disabilities

Lower Economic Status

Since societies in many countries in southern Africa hold to the view that disabled individuals are cursed, there tends to similarly be discrimination in economic accessibility for disabled families and individuals. There is a clear correlation between poverty and the presence of disabilities. In one case study that looked at Kinshasa, in the Democratic Republic of Congo, which is considered the third largest city in Africa, it is estimated that roughly 60% of the Kinshasa's street children, the total being roughly twenty thousand, are homeless.[39] Estimates of Kinshasa's street children range from a low of twenty or twenty-five thousand.[40] These estimates can also be as high as fifty or even a hundred thousand.[41] The cultural association of disabilities and witchcraft have placed those with such physical or mental impairment in low socioeconomic situations as there is little desired interaction with the disabled demographic. As seen in Kinshasa, those who are claimed to be witches tend to end up on the street, living in physically violent and dangerous environments. What is occurring in Kinshasa reveals a strategy to expel undesirable children, or those seen as economic burdens.[42] Because families view children with disabilities as economic burdens, they often attempt to discard them. This is then seen through

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[39]Jill Schnoebelen, "Witchcraft Allegations, Refugee Protection and Human Rights: A Review of the Evidence," UNHCR—The UN Refugee Agency, 2009.

[40]Jérôme Ballet, Benoit Lallau, and Claudine Dumbi, "The Exploitation of Sorcerer Children in Kinshasa (RDC)," *Child Exploitation in the Global South* (2018): 125–40, https://doi.org/10.1007/978-3-319-91177-9_8.

[41]Filip De Boeck, "Death Matters; Intimacy, Violence and the Production of Social Knowledge by Urban Youth in the Democratic Republic of Congo," in *Can There Be Life Without Others?,* ed. Antonio Pinto Ribeiro (Manchester, UK: Carcanet Press, 2009).

[42]Andy Anguini Alo, "Conversation Time Has Come*," OKH Journal; Anthropological Ethnography and Analysis Through the Eyes of Christian Faith* 4, no. 1 (2020): 162, https://doi.org/10.18251/okh.v4i1.84.

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the accusations of witchcraft for children with disabilities that led to physical and sexual

violence, as previously noted.

There is also a lack of equity to accessibility of jobs for parents of children with

disabilities. In a comprehensive study on southern African countries that evaluated the

relationship with disability and economic status there is a clear correlation between poverty and

disabilities. The study focused its research on Namibia, Zimbabwe, Malawi, and Zambia noting

how families with a disabled child find themselves at a higher risk for economic poverty. In this

study, researchers found that many families with a disabled child have more children. While

there is no clear explanation for this, literature suggests that when there is a disabled member

within a household there is a need for a caretaker, which is often tasked to another child within

the family, thus families tend to be larger. However, in larger families there are more mouths to

feed thus they have more costs than families without a disabled member.[43] Larger families often

increase the costs and needed income, thus families with disabled members are exposed to

situation which perpetuated physical and sexual violence as they lack the material needs to

escape such environments. While these economic realities are challenges for a majority of

populations in Sub-Saharan Africa, there is a strong correlation with economic disparity and

families/individuals with disabilities. This correlation of disabilities and vulnerability

economically then permeates into several other social and cultural sectors of life such as access

and equity within education.

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[43]Arne H Eide, Mitch E. Loeb, Sekai Nhiwatiwa, Alister Munthali, Thabale J. Ngulube, and Gert van Rooy. "Living Conditions among People with Disabilities in Developing Countries," *Disability and Poverty* (2011): 55–58, https://doi.org/10.2307/j.ctt9qgths.8. .

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Lack of Holistic Care in Education

Economic Status and Education

In assessing access to education and literacy rates above the age of five, the research suggests that individuals with disabilities are between two to three times more likely to be denied access to education and have disproportionately lower rates of literacy. The study goes on to clarify that both sensory and physical impairments lead to the most disadvantages amongst children with disabilities. In Zimbabwe, 80.9% of children who never attended school had a sensory or physical disability. Similarly, in Malawi 83.1% of the children who never attended school have physical or sensory disabilities.[44] Lack of education and lower literacy directly correlate with lower economic levels and higher rates of poverty as employment is harder to access. As seen in the same study, unemployment is significantly higher in families with a disabled member, excluding Zimbabwe. It is worth noting that the four countries represented in this survey often have forms of informal employment such as subsistence farming and barter trading. Since "working" is defined as an operationalized job that is outside of the household that brings cash to the household, the survey may underestimate the level of activity needed to secure the living for these households.[45] Therefore, if there is a significant difference in employment status in disabled families versus non-disabled families within the survey and it is not all-inclusive. Therefore, it is logical to conclude that disabled families have less accessibility for employment and therefore are exposed to higher rates of physical and sexual violence.

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[44]Eide et al., "Living Conditions among People with Disabilities in Developing Countries," 61.
[45]Eide et al., "Living Conditions among People with Disabilities in Developing Countries," 62.

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Failures of Inclusivity in Education

Education can be one of the most powerful tools to protect women and girls against

sexual violence; however, disabled females are often unable to access the same level of

education due to a lack of inclusivity and protection with educational systems in many southern

African countries.[46] As previously noted, having a mental or physical disability is one of the top

contributing factors to illiteracy in many Sub-Saharan African countries.[47] Education,

specifically sex education, is pivotal when it comes to the protection of disabled women.

However due to societal attitude towards disabled women and girls there is a lack of provision

for such specific education.[48] Many argue that girls from the ages of 14-24 should be the target

for education as this is typically when sexual assault occurs.[49] It then can also be noted how

school is the most suitable environment in which girls are to be educated and empowered to fight

against such sexual assault.[50] However, disabled females are often unable to access such equality

within educational systems, placing them at an increased risk for such sexual violence. Currently,

the United Nations Educational, Scientific and Cultural Organization (UNESCO) sees inclusive

education as a process of incorporating and addressing the diversity of needs of learners with

such disabilities that has often excluded them from educational opportunities. According to

UNESCO, inclusive education seeks to respond and incorporate the learning needs of all

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[46]Amylee Mailhot Amborski, Eve-Line Bussières, Marie-Pier Vaillancourt-Morel, and Christian C. Joyal, "Sexual Violence against Persons with Disabilities: A Meta-Analysis," *Trauma, Violence, & Abuse* 23, no. 4 (2021): 1339–43, https://doi.org/10.1177/1524838021995975.

[47]Eide et al., "Living Conditions among People with Disabilities in Developing Countries," 59.

[48]Mailhot et al., "Sexual Violence against Persons with Disabilities," 1340.

[49]Dinesh Sethi and Alexander Butchart, "Violence/Intentional Injuries – Prevention and Control," *International Encyclopedia of Public Health* (2017): 352–57, https://doi.org/10.1016/b978-0-12-803678-5.00485-9.

[50]"Responding to Young People's Disclosure of Sexual Assault: A Resource for Schools," Australian Centre for the Study of Sexual Assault, Australian Institute of Family Studies, 2008.

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children, and specifically those who are vulnerable to exclusion and marginalization, this

includes children with special needs.[51] Inclusivity becomes a challenge when society places little

worth on disabled individuals. Likewise, many of the educational systems in southern African

countries that do have inclusive classrooms are failing to adequately protect students from forms

of exclusion and violence once in the classroom.

As previously noted, rape and sexual exploitation of children with disabilities often

occurs within the school systems themselves. For example, a young female noted how she was

raped while in boarding school.[52] If policies aim at merely inclusivity in the classroom, they fail

to recognize and target the violence against disabled persons, as lack of inclusivity is merely one

of a plethora of disadvantages that place disabled women and children at risk. Inclusivity aims at

ensuring equity in access to education but rarely implies equity within the classroom itself.

Especially in corrupted environments, many teachers will take advantage of students with

disabilities forcing sexual activity or physical violence upon the student in exchange for

improved grades or extra help. Students with disabilities are often the target of maltreatment as

their disabilities often hinder academic success. Thus, students with disabilities are at higher risk

of being taken advantage of.

Current Legal Protection and its Failure

Failure of Protection within Legal Systems

Along with failure to holistically protect those with disabilities in education, the legal

system in many Sub-Saharan African countries similarly disregard violence towards the disabled

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[51]"In-Depth Study on All Forms of Violence against Women: Report of the Secretary-General," United Nations General Assembly, 2006.
[52]Muruzi and Gutura, "The Vulnerability to Violence among Women," 92.

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as there is little policy in place that protects and fosters flourishing for disabled members of

society. One common type of mitigation of poverty on behalf of the disabled community is

through cash transfers. These programs tend to be small with low take-up rates in low-income

countries.[53] In South Africa they are currently testing non-contributory and means-tested

Disability Grant programs which target working age persons who cannot work due to physical or

mental disabilities. However, these programs have an exclusion rate of 42% meaning that almost

half of the households are excluded and thus are worse in terms of food security and essentials.[54]

In Ethiopia, they have several legislative protective measures in place that aim at protecting and

mainstreaming the disabled. Most recently, they passed their National Plan of Action of Persons

with Disabilities (2012-2021).[55] While many of these countries in Southern Africa have

legislation in place to protect disabled members of the community, they have failed to implement

such legislation. The lack of implementation often occurs due to a lack of public funding and

lack of data. Under-reporting, as seen in cases of physical and sexual violence, is pervasive in

political structures as well. There is a general lack of data on families with disabled members.

This then makes it difficult to accurately assess the necessity for and accessibility to such

programs that support disabled persons.[56]

        Similarly, current legislation to protect disabled persons stems from the social model.

However, there are several issues with having legislation influenced by the social model,

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[53]"Living Standards Measurement Study," World Bank, January 2020,
https://www.worldbank.org/en/programs/lsms.
[54]Raghav Gaiha, Shantanu Mathur, and Vani S. Kulkarni, "Rural Poverty and Disability in Ethiopia: Formidable
Policy Challenges," *Journal of Policy Modeling* 44, no. 5 (2022): 1009–1012,
https://doi.org/10.1016/j.jpolmod.2022.09.019.
[55]Gaiha et al., "Rural Poverty and Disability in Ethiopia: Formidable Policy Challenges," 1010.
[56]Gaiha et al., "Rural Poverty and Disability in Ethiopia: Formidable Policy Challenges," 1011.

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especially south African countries as the model often relies on corrective justices and looks at merely first generational rights rather than full scale rights in a multi-generational lens.[57] Social model policies focus on breaking barriers that cause disabled individuals to be separated and segregated against. For example, a social model policy may see that certain conditions limit disabled persons participation in a particular environment and thus aims to alter that environment to allow for participation. However, what the social model fails to recognize is that this is merely making such environments neutral and entirely dependent on formal justice.[58] Yet, in many southern African countries there is still a notion that it is justified to exclude disabled individuals due to their limitations. Until this perception of individuals is broken, social model policies and structures will not be an effective way to bring equity between non-disabled and disabled members of the community.[59] In a similar light, the social model policies present in most southern African countries focus primarily on first generation rights rather than second generation rights. First generational rights often deal with the prohibition of discrimination in employment, whereas second generation rights include labor market participation, provision of health care, education, and employment preferences. Since social model proponents neglect further empowering possibilities through the first-generational approach, many countries whose policies are founded on this principle are neglecting and positioning disabled members in the community at greater risk of continued generational violence.[60] In contrast to the plethora of social model policies that are present within Southern African countries, there should be an

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[57]Michael Ashley Stein, "Disability Human Rights," *California Law Review* 95, no. 1 (February 2007): 75–121, https://doi.org/10.4324/9781315090412-1.
[58]Michael Ashley Stein, "Same Struggle, Different Difference: Ada Accommodations as Antidiscrimination," *University of Pennsylvania Law Review* 153, no. 2 (2004): 579, https://doi.org/10.2307/4150664.
[59]Stein, "Disability Human Rights," 113.
[60]Stein, "Disability Human Rights," 115.

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implementation of the "disability human rights" model which addresses the limitations in the

social model policies.

Even if current legislation was protective, there is little to no legal enforcement as

governments in many Southern African countries are corrupt and maintain high levels of social

exclusion towards disabled persons. Within government systems in these countries, there are

legal protections for such disabled peoples yet there are still violences that are being perpetrated

against this demographic. Even if there was proper legislation that addresses up to third-

generational laws, there is corruption which prohibits enforcement of such legal protection.[61]

Within legislation passed, there must be enforced legislation meaning that those who are

violating such human rights are made punishable by the law and that these punishments are

followed through on. Many countries currently fall under the Standard Rules built upon the

Works Progress Administration, which emphasize the equity of people with disabilities and

define disability as merely the byproduct of social construction. They argue that to protect

disabled peoples there must be a change in the societal misperception of the disabled and service

to allow for their full inclusion.[62] These standard rules stress that governments must be morally

and politically committed to ensure the equalization of opportunities for disabled persons.[63]

However, these rules are largely soft laws and thus not legally enforceable. Even the human right

to development, outlined in the previous section, lacks legal enforceability. Prior to the Ad Hoc

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[61]Stephen P. Marks, "The Human Rights Framework for Development: Seven Approaches," *Reflections on the Right to Development* (2005): 32–42, https://doi.org/10.4135/9788132102144.n1.

[62]Theresia Degener, and Yolan Koster-Dreese, "Standard Rules on the Equalization of Opportunities for Persons with Disabilities," *Human Rights and Disabled Persons* (1995): 285–319, https://doi.org/10.1163/9789004479890_021.

[63]Dimitris Michailakis, "The Standard Rules: A Weak Instrument and a Strong Commitment," *Disability, Divers-ability, and Legal Change* (1999): 119–30, https://doi.org/10.1163/9789004481770_013.

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Committee's creation by the United Nation, there was no existing international human rights

instrument that could be both applicable and enforceable by individuals on the basis of disability.

The Ad Hoc Committee therefore was aimed at protecting the human rights of disabled persons

and adding to the existing canon of human rights for individuals with disabilities. They created

the "disability human rights paradigm" which ultimately combined the social model of disability,

with the human rights to development, and Martha Nussbaum's version of the "capabilities

approach" as previously referenced. However, what many of these international human rights

policies fail to recognize is the lack of enforceability not because the laws are soft, but due to the

corrupt nature of many of these countries' governments.[64]

Corruption is commonly found in southern African countries as parties desire to keep

power. In a country like South Africa, there is a history of abusive government systems that keep

one demographic in power over the other. The presence of fraud similarly impacts the

implementation of legislation that would protect disabled women and children. Corruption can

take on a plethora of looks as it is pervasive. Some forms include bribery, misappropriation or

embezzlement of public funds or property, fraud, money laundering, extortion, theft, nepotism

and favoritism, etc.[65] Any of these forms of deceit can affect the lives of those living with

disabilities and the implementation of legislation that could protect such individuals. However,

political corruption can affect the implementation of legislation to protect disabled peoples as it

can be defined as the deviation from formal duties of an elective due to personal wealth or status

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[64]"Disability | Division for Inclusive Social Development (DISD)," United Nations, 2023,
https://social.desa.un.org/issues/disability.
[65]Anzanilufuno Munyai and Avitus Agbor, "Delineating the Role of Foreign Governments in the Fight against
Corruption in Africa," *Cogent Social Sciences* 6, no. 1 (June 2020): 4,
https://doi.org/10.1080/23311886.2020.1778988.

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gain.[66] This is the broadest form of misconduct as it enables for random changes of government particularly within the electoral branches. Electoral corruption has three primary ways that it effects the disabled communities as it manipulates electoral rules, voters, and voting.[67] This manipulation then can lead to legislation and implementation that is personally motivated which, in societies that largely disregard and view the disabled community as harmful, can be particularly dangerous. Similarly, misappropriation is when government officials intentionally use the funds of another person for one's own use or for an unauthorized purpose.[68] This can be particularly harmful when it comes to the allocation of public services to demographics such as the disabled community. Finally, abuse of discretion is when public officials have the power to make judgments or make decisions that have the force of the law, without adhering to its regulations.[69] This also includes irrational decisions to suit the public officials' own needs. This then affects public administration and delivery of services, which affects the rights of individuals especially in at-risk populations such as disabled peoples. For example, in South Africa anyone can challenge administrative decisions based on the content of section 33 of the Constitution of South Africa. This then enables for blockades and total dismissals of legislation that protects disabled peoples as social stigma influences legislative implementation. Corruption, while an impediment for many within African countries, is particularly endangering the disabled community as it prevents implementation of protective legislation and skews the political agenda away from protecting disabled women and children from such sexual violence.

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[66]John G. Peters and Susan Welch, "Gradients of Corruption in Perceptions of American Public Life," *Political Corruption* (2017): 157–68, https://doi.org/10.4324/9781315126647-15.
[67]Munyai et al. "Delineating the Role of Foreign Governments in the Fight against Corruption in Africa," 5.
[68]*Nolo's plain-English Law Dictionary* (Berkeley, CA: Nolo, 2009).
[69]Munyai et al., "Delineating the Role of Foreign Governments in the Fight against Corruption in Africa," 7.

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Plausible Solutions to Dissolve Discrimination

Government Action: Enforced Legislation

Legislation needs to incorporate aspects of the disability human rights model, along with

the social model and Martha Nussbaum's capabilities approach to comprehensively view

disabled persons and cultivate legislation that aims at protecting the holistic individual. The right

to development is one of the most recent theories on human rights which looks at integrating

both civil and political rights with economic, social, and cultural rights.[70] This approach will

enable for disabled individuals to be not only included but protected by their governing powers.

Similarly, there needs to be proper implementation of anti-corruption laws in place. On a large

scale, the United Nations has passed legislation to enable for reforms in certain African

countries. Specifically, the ratification of the United Nations Convention against Corruption

enabled for many African countries to have some form of legislative framework in place to

combat fraud so that marginalized communities, like the disabled, will be protected.[71] Similarly,

the Heads of State of the African Union have acknowledged that corruption violates fundamental

rights and human rights and thus, to fight against such deceit, adopted instruments to aid in their

fight. Some instruments include the African Union Convention on Preventing and Combating

Corruption and the African Charter on the Values and Principles of Public Services and

Administration which aim at ensuring quality services, public participation, and improved

working conditions. These instruments will attempt to ensure high levels of equity for

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[70]Marks, "The Human Rights Framework for Development: Seven Approaches," 38.
[71]"General Provisions and Obligations Applicable throughout the United Nations Convention Against Corruption," *Legislative Guide for the Implementation of the United Nations Convention against Corruption* (2007): 7–13, https://doi.org/10.18356/a3970930-en.

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demographics such as the disabled community within the public sector.[72] It is clear to see that there is a myriad of attempts to combat corruptive and harmful legislation against disabled individuals in southern African countries. However, it is similarly clear to see that protection and inclusion cannot overcome the social and cultural stigma that invokes such violence against individuals with disabilities.

Role of Trauma Informed Care for Non-Government and Government Organizations

Non-government and government organizations must not only petition for inclusivity but also for an incorporation of trauma informed care when working with women and children with disabilities who have been victims of sexual violence. Current legislation, as previously noted, focuses too heavily on inclusion without acknowledging the social and cultural stigma that marginalizes and victimizes those with special needs. Therefore, government and non-government organizations who are working in this environment should first be aware of the social stigma that marginalizes disabled individuals. Additionally, they must also apply holistic care when working with this particular demographic. Non-government and government organizations must take a holistic approach when it comes to combating sexual and physical violence against women and children with disabilities. Often when disclosing information women with disabilities who have experienced intimate partner violence will be dismissed or their experience is minimized which leads to an increase in feelings of worthlessness and powerlessness within the women.[73] Even in situations in which the matters and concerns of these

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[72]Paul Mudau, "The Role of the African Charter on Values and Principles of Public Service and Administration in Promoting Good Governance," *SSRN Electronic Journal* (2022), https://doi.org/10.2139/ssrn.4174170.
[73]Patricia A. Findley, Sara-Beth Plummer, and Sarah McMahon, "Exploring the Experiences of Abuse of College Students with Disabilities," *Journal of Interpersonal Violence* 31, no. 17 (2016): 2801–23, https://doi.org/10.1177/0886260515581906.

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women are taken seriously, the response often fails to match the real need.[74] A trauma-informed

approach and the goal of fostering relational autonomy enables for complete protection of

women with disabilities from such sexual and physical violence.[75] Once physically separated

from the perpetrator of the violence, women and girls must be met with appropriate resources to

help them cultivate a desirable future. These resources must include increased internal

capabilities (basic abilities and acquired skills), basic life needs (healthcare, housing, financial

support), as well as supportive relationships.[76] Within this study they presented relational

principles that will aid in a more holistic care for people with disabilities coming from violent

relationships. The first principle is reflexivity, which involves one's own self-conscious critique

of social position, modes of thinking or feeling and doing according to cultural value as well as

the understanding of the culture one is within.[77] Reflexivity includes the understanding of social

and cultural stigma present that would limit the ability to escape such cycles of violence. This

then often leads women to recognition that the perceptions society has placed on them according

to their disability is not truth, thus leading to an empowering of self-autonomy for the women.[78]

This autonomy must then be fostered not as an individual, as collectivism reigns in most

southern African cultures, but rather autonomy within relationships. Many relational theorists

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[74]Michelle McCarthy, Siobhan Hunt, and Karen Milne-Skillman, "I Know It Was Every Week, but I Can't Be Sure If It Was Every Day: Domestic Violence and Women with Learning Disabilities," *Journal of Applied Research in Intellectual Disabilities* 30, no. 2 (2016): 269–82, https://doi.org/10.1111/jar.12237.

[75]David McConnell and Shanon K. Phelan, "Intimate Partner Violence against Women with Intellectual Disability: A Relational Framework for Inclusive, Trauma-informed Social Services," *Health & Social Care in the Community* 30, no. 6 (2022): 317-330, https://doi.org/10.1111/hsc.13932.

[76]McConnell and Phelan, "Intimate Partner Violence against Women with Intellectual Disability," 323.

[77]Loic J. Wacquant, "Towards a Reflexive Sociology: A Workshop with Pierre Bourdieu," *Sociological Theory* 7, no. 1 (1989): 26, https://doi.org/10.2307/202061.

[78]Nancy Fraser, "Recognition without Ethics?" *Theory, Culture & Society* 18, no. 2–3 (2001): 21–42, https://doi.org/10.1177/02632760122051760.

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recognize that autonomy develops and occurs within the dependency of others.[79] Therefore, when supporting women who are coming out of sexual or physical violence in Sub-Saharan African countries the aim should be at fostering autonomy as understood relationally.[80]

Likewise, there must be an implementation of trauma-informed care as the second relational principle required for holistic care. Trauma-informed care can be defined as the awareness of trauma and its effects as well as the knowledge of the plethora of coping styles employed by survivors of such violence.[81] It includes both the past and current experiences of trauma in all aspects of service delivery.[82] This then includes the importance of preventing re-traumatization when helping advocate for and support women coming from these systems of violence. Most importantly this includes preventing the feeling of powerlessness.[83] The feeling of safety must be NGOs and government organizations' first concern as they work with disabled women and girls who have experienced sexual and physical violence. Safety can be promoted by providing options and understanding the rights of those with disabilities in their choices and decision-making.[84]

[79]Y. Braudo-Bahat, "Towards Relational Conceptualization of the Right to Personal Autonomy," *American University Journal of Gende, Social Policy & the Law* 25, no. 2 (2017): 111–54,

[80]Catriona Mackenzie, "The Importance of Relational Autonomy and Capabilities for an Ethics of Vulnerability," *Vulnerability* (2014): 33–59, https://doi.org/10.1093/acprof:oso/9780199316649.003.0002.

[81]McConnell and Phelan, "Intimate Partner Violence against Women with Intellectual Disability," 319.

[82]Michelle S. Ballan, and Molly Freyer, "Trauma-Informed Social Work Practice with Women with Disabilities: Working with Survivors of Intimate Partner Violence," *Advances in Social Work* 18, no. 1 (2017): 131–44, https://doi.org/10.18060/21308.

[83]"Trauma and violence-informed approaches to policy and practice," Government of Canada, February 2018, https://www.canada.ca/en/public-health/services/publications/health-risks-safety/trauma-violence-informed-approaches-policy-practice.html.

[84]Jacinta Douglas and Christine Bigby, "Development of an Evidence-Based Practice Framework to Guide Decision Making Support for People with Cognitive Impairment Due to Acquired Brain Injury or Intellectual Disability," *Disability and Rehabilitation* 42, no. 3 (2018): 434–41, https://doi.org/10.1080/09638288.2018.1498546.

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The final principal necessary when taking a holistic approach to supporting those who are disabled coming from sexual and physical violence is taking a non-judgmental approach. This approach is particularly difficult to find in many countries in southern Africa as social stigma has perpetuated such violence in these demographics. According to interviews by McConnell and Phelan, participants desired someone to merely listen before speaking, being empathetic with where they are at, and authentic.[85] Support should be tailored to the individual with the understanding that each situation is different.[86] This also includes a necessity to understand culture for foreign NGOS who are going into such countries to provide aid. With the understanding that sexual and physical violence stems first and foremost from the influence of religion, foreign non-government organizations must recognize the role of spirituality on their work with the disabled population alongside the social and cultural stigma.

There also must be a willingness to collaborate and implement coordinated responses to this issue. As presented, the issue of sexual and physical violence against the disabled is a multifaceted issue, however much of the current work to combat such cycles of violence are single tract resolutions. This means that there is little to no cooperation between government entities, non-government organizations, health, education, and social departments to protect disabled women and girls. The best way to support this demographic is protection at the district level. There does not need to be only specialized personnel but rather a collaboration of current efforts so that this discrimination and violence against the disabled is combatted from all sides.

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[85]McConnell et al., "Intimate Partner Violence against Women with Intellectual Disability," 321.
[86]Marilyn Ford-Gilboe, Marilyn Merritt-Gray, Colleen Varcoe, and Judith Wuest, "A Theory-Based Primary Health Care Intervention for Women Who Have Left Abusive Partners," *Advances in Nursing Science* 34, no. 3 (2011): 198–214, https://doi.org/10.1097/ans.0b013e3182228cdc.

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The authors emphasize the importance of linking families to government and non-government services to empower caregivers and families of those who are disabled towards autonomy and self-care, rather than dependency on such services.[87]

Conclusion

The continuation of sexual violence toward women with disabilities at every stage of life highlights the unwillingness of society to acknowledge that such a correlation between disabilities and violence exists. Specifically, Sub-Saharan African countries are environments in which sexual violence is perpetuated by the cultural and religious stigma partnered with economic disparity, legal and educational shortcomings, and a misuse of integration within society. Efforts by both government institutions as well as non-government organizations can no longer hide behind unenforceable or ill-informed attempts to mitigate such violence. There must be a revision of policies to protect disabled women and girls from such violence, as current legislation is failing to holistically care for women who are most vulnerable to sexual assault and exploitation. Similarly, organizations whose goals are aimed at alleviating such violence must be proactive in their implementation of holistic, trauma-informed care that recognizes the cultural stigma towards these women. They must also be active in alleviating psychological, emotional, and physical health barriers plaguing women with disabilities. Ultimately, this issue lies first in the cultural stigma towards disabled women and girls stemming from religious tradition which while difficult to combat, must be acknowledged to break down barriers and restore women who have been victims of such violence. Once these southern African countries begin recognizing the

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[87]G. Saloojee, M. Phohole, H. Saloojee, and C. IJsselmuiden, "Unmet Health, Welfare and Educational Needs of Disabled Children in an Impoverished South African Peri-urban Township," *Child Care, Health and Development* 33, no. 3 (2006): 230–35, https://doi.org/10.1111/j.1365-2214.2006.00645.x.

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full humanity within every individual, there can be a movement toward a holistic approach in

care for and implementation of protection for women and girls with disabilities.

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