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Gender-based violence against Women with Disabilities in Uganda
- A qualitative study about how local organizations are working with the issue

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Abstract

Gender-based violence (GBV) is both a human right violation, a threat to development and a global health issue. Women with disabilities (WWD) are a group more exposed to GBV. However, research has been scarce about WWD and GBV, especially in the Global South. This thesis studies how local organizations are working on the issue of GBV targeting WWD in Uganda. The theoretical framework employed is the Post-colonial feminist disability theory and praxis framework and Feminist Disability studies. Some findings from the results are the challenge of access to justice, disability stigma and widespread poverty. Another finding is the importance to work with different kinds of interventions such as advocacy, mentoring and skill-training. In the discussion, the double jeopardy, and double discrimination got discussed such as both disability and gender factors. Furthermore, the work of the organizations in the context of global and local rights.

Word count: 14841

I dedicate this thesis to all girls and women with disabilities around the world. There are so many stigmas and discrimination. But at the same time so much activism and hope. I wish you will believe in yourself and not let society define who you are and what you can and cannot do.

I am discovering the world and interpreting it in different ways as a woman with disabilities. The way my disabilities have impacted my life has differed in different periods of my life.

I will also send a thank you to my two supervisors, the special support staff, the language support centre and all my classmates and friends in LUMID, that I spent 2 intense years together with, studying and supporting each other throughout the COVID-19 Pandemic.

Acronyms

CRPD	Convention of Rights For Persons with Disabilities
DPO	Disabled people’s organization
GBV	Gender-based violence
GWD	Girl with Disabilities
GWWD	Girls and Women with Disabilities
HIV	Human immunodeficiency viruses
IPV	Intimate Partner Violence
LMIC	Low- and Middle-Income Countries
NGO	Non-governmental organization
OPD	Organization of persons with disabilities
PWD	Person with disabilities
SDG	Sustainable development goals
SRHR	Sexual and Reproductive Health and Rights
VAW	Violence Against Women
WWA	Woman with Albinism
WWD	Woman with Disabilities

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1 Introduction

1.1 Introduction

Gender-based violence (GBV) is both a development issue, a health issue and a human rights violation (Rose, 2013, Chouinard, 2012). It has consequences for the fulfilment of several Sustainable development goals (SDGs) and the development of countries and people (Sardinha et al, 2022). Goal 5.2 is related to work regarding GBV (Ibid). It is estimated that around every third of women will be a survivor of GBV during their lifetime (Chouinard, 2012). It differs for different groups in society and all over the world (De Beadrpic et al, 2022). Approximately 1 billion people are affected by Violence against women (VAW) (De Badraup et al, 2022). The rates of violence against Women with disabilities (WWD) are higher (Aborisade, 2022). It may be up to 4 times higher (Meer and Combrinq, 2016). GBV targeting WWD is an understudied issue and especially in Global South contexts (Dowsey et al, 2016). Some explanations are that WWDs face oppression both as women and by living with disabilities (Wajack-Pambé & Kouanda, 2022, Meer & Combrinq, 2015). The perpetrators take advantage of the challenges WWDs face because of their disability and are fuelled by ableism (Aborisade, 2022). For example, women with mental disabilities have a higher risk for sexual violence, because they can find it harder to disclose and be trusted (Chouinard, 2012).

Women with disabilities are a diverse group. Approximately every fifth woman in the world has any kind of disability, whereas around five-sixths of the world's persons with disabilities live in the Global South (Grech, 2016, Goyal & Gupta, 2015). Of those around 60% are women (Dowse et al, 2016). Much of the research focus until recently has had an emphasis on the Global North context and Global North understandings of disability (Grech, 2016, Dowsey et al, 2016). Similarly, many studies regarding GBV

among WWD have had a Global North focus, while some are addressing the issue with Southern perspectives (Vander Heijden et al, 2020, Meer & Combrinq, 2016).

Sub-Saharan Africa is a region with high rates of GBV such as Intimate Partner Violence (IPV) in terms both past year exposure and lifetime exposure (Sardinha et al, 2018). WWD are on increased risks for all kinds of violence, and also to contract HIV (Hanass-Hancock, 2008). WWDs often live in contexts of more severe poverty (Ibid).

One country in the Global South that has been praised for its work with disability is Uganda (Katsui & Kumpuvuori, 2008). Uganda has one of the highest political representation of Persons with Disabilities (PWD) globally (Abimany-Ochom & Mannan, 2012). However, there is a discrepancy between rights on the paper and the social and political reality (Katsui & Kumpuvuori, 2008). Uganda has high rates of GBV both in the general population and among WWD (Valentine et al, 2019). It is estimated that around half of ever-partnered women experienced GBV and around 64% of WWD (Valentine et al, 2019). From a survey about disability and sexual violence carried out in Uganda, it was estimated that 56% of WWD had faced sexual violence, and 38% of GWD (Kwagala & Ojiambo Wandera, 2021). WWD face discrimination in different areas. Women in Uganda face challenges such as patriarchal oppression, poverty and different perceptions and stigmas regarding disability (Irani et al,2022). The level of education is lower for WWD, and they have younger age for childbearing (Kwagala & Ojiambo Wandera, 2021). It is estimated that 90% of persons with disabilities, have no education beyond primary school (Aniyamuzaala, 2012). Many GWWDs in Uganda have challenges related to SRHR and are not included in sex education (Kwagala & Ojiambo Wandera, 2021).

Globally organizations are working with the issue of GBV targeting WWDs. Some include specific work, whereas other have more general work. There are both international organizations, local organizations and organizations of persons with disabilities. There are different ways to work to address and prevent GBV. Some of these areas are to work with community mobilization, direct support and economic empowerment (Keith et al, 2022). The civil society has an important role to play in addressing and preventing GBV. In Uganda there is a disability movement and an active civil society (Abimany-Ochom 2020 &, Aniyamuzaala, 2012).

The focus area of this study is how organizations are working with the issue of GBV targeting WWD in Uganda. It will focus on women already with disabilities, and not when violence is causing disability. The focus will be on social consequences rather than discuss direct medical consequences of the violence such as depression, miscarriage, affecting pre-natal and post-natal. The focus will be on how organizations are working with the issue and related issues from different dimensions and intersections.

1.2 Purpose

The purpose of this thesis is to understand the challenges facing organizations addressing gender-based violence among women living with disabilities in Uganda.

With the specific aim to unveil the impact of the intersection of gender and disabilities and different power relations when mitigating gender-based violence within this setting.

1.3 Research questions

1.3.1 Which actions do local organizations in Uganda take to advocate, prevent and support women with disabilities that are survivors of GBV?

1.3.2 How do organizations rationalize actions taken?

1.4 Definition of terminology

Gender-based violence

Gender-based violence is acts of physical, sexual, emotional, psychological and or economic violence used to show degradation because of gender (Rose, 2013). It can also be an act of intimate partner violence and interpersonal violence (Emerson, Lwellyn 2022). It can be carried out both against women and men, however, it is most common against girls and women. This thesis will focus on GBV targeting WWD. There is a discussion about whether to say Gender-based violence or Sexual and Gender-Based violence. Even though sexual violence was one kind of violence highly prevalent, it was still reasonable to put it under the umbrella of GBV. The main reason is that sexual violence has to do with unequal power relations and gender relations.

This thesis will be widening the scope of GBV to also include specific violence against WWD. Some of these are dependency in care situations or being denied support (Harpur & Douglas, 2014). It may also more commonly be the denial of Sexual and reproductive health and rights (SRHR) and for example forced sterilization or forced contraception (Ruiz, 2017).

Disability

In this thesis, I will not focus on a specific type of disability, but more generally. Although some organizations gave examples of challenges that were disability specific. There are several definitions of what counts as disability. One such is that it is at the interaction of impairment such as mental, visual, hearing, intellectual or physical and barriers and interactions with society and environment (Abimany-Ochom & Mannan, 2014, Neille & Penn, 2017). The barriers may be structural discrimination, stigmas or lack of accessibility (Neill & Penn, 2017). For instance. if a person with hearing impairment is being denied a sign language interpreter.

In terms of terminology there is a discussion whether to use person-first language such as person with disability or identity first language such as disabled people (Mkhize, 2015). Some hold the opinion that the word disability is oppressing in terms of being

the opposite of abled (Lesotha & Sefotho, 2021). Rather they emphasize the world differently abled (Ibid).

In this thesis I will mainly use person-first terminology such as Girl with disabilities, Woman with disabilities, since it is related to the rights of the individual. However, I am also aware of community understandings and shared identities. The theoretical lens of Southern Disability Studies often uses words such as disabled people to emphasize shared identity (Grech, 2016).

Poverty

There are various ways to measure and understand poverty. This thesis will use a multi-dimensional understanding of poverty. With multidimensional poverty it will include different factors such as economic poverty, social exclusion, challenges of lack of education, consequences for health and rights (Neille & Penn, 2017).

PWD live in more poverty, and face challenges such as inclusion in development (Madans et al, 2017).

UN Convention of the Rights of Persons with Disability (CRPD).

The CRPD is the UN Convention of the Rights of Persons with Disabilities. Many countries in the Global South were involved in the working process of the convention (Meekhosa and Soldatic, 2011). An aspect that is unique with the CRPD is that it includes both civil, and political rights, and social, economic and cultural rights. There are articles about WWD, and different rights (Ibid).

Intersectionality

Intersectionality is a theoretical framework about how different structures such as race, sexuality, class and gender intersect (Rice et al, 2019). Disability is another area of lens that can be added, and which this thesis will use specifically in terms of intersectionality (Garland-Thomson, 2022).

Albinism

Albinism is a disability more prevalent in Africa (Bradbury- Jones et al, 2018). To have albinism means to lack pigment and often sight impairment. Without protective sunscreen it can lead to skin cancer and harmed skin (Franklin et al, 2018). In the Literature review, in section 2.3. there will be a discussion about cultural stigmas and the oppression facing Women with Albinism in Africa.

The Global North and the Global South

Within development thinking and practice and in activism in the global civil society it is common to divide the world into the Global North and the Global South (Grech, 2016). The Global North is in the centre, and many global North countries are former colonies (Mekhosa, 2011).

2 Literature Review

Below is the review of literature relevant to the thesis. The Literature Review is based on various kinds of articles and literature, such as quantitative studies, qualitative studies, ethnographic studies and systematic literature reviews. First more general research will be presented, and then more context-specific research will be provided. In the end, I will discuss the research gaps and situate my study.

2.1 Placing Disability in the context of the Global South

The vast majority (around 80-85%), of the world's persons with disabilities, live in the Global South (Grech 2008, Grech, 2016, Meekosha & Soldatic, 2011, Chouinard, 2012). However much of the research and focus has been on industrial Global North contexts (Grech 2008, Grech 2016, Chouinard, 2016). Recently there has been discussion to include disability more in the development of cooperation and practice (Grech, 2016). One dilemma is to replicate Northern perspectives (Ibid). For example, the social model of disability got established in Northern industrial societies (Goodley & Swartz, 2016). The right-based model of disability is the latest model. The idea with the right-based model is to see disability as a human right issue and move from charity and the medical model (Katsui & Kumpuvuori, 2008).

There are different prejudices and perceptions regarding persons with disabilities living in the Global South. Grech (2016) argues in "Disability in the Global South: The Critical Handbook" how disabled people are deemed to be poor and oppressed in their societies. One issue raised in literature is to have local perspectives of understanding disabili-

ity and disability activism (Haang'andu, 2018,). How to name disability is another concern such as disabled or differently abled (Leshoto & Sefotho, 2020).

One area of concern for disability in the Southern context is the relationship between disability and poverty. There are discussions about how to understand, that relationship (Grech, 2016). Poverty for persons with disabilities is higher in rural areas, and they lack access to services (Gartell, Hoban, 2016). Generally, in terms of poverty and structural discrimination, persons with disabilities in the Global South can be seen as the poorest of the poor, and they face a challenge to education and face violence (Meekhosa and Soldatic, 2011).The poverty context is highly gendered. GWWD face multiple poverty and discrimination (Price & Goyal, 2016). WWD are extra disadvantaged in terms of level of education and employment opportunities (Ibid).

2.2 Gender-Based Violence Against Women with Disabilities Around the World

There is a vacuum in terms of research about WWD and GBV and VAW (Beudrop et al, 2022). For example, the Global survey of Violence against women from 2013 did not specifically focus on disability rather than in a few paragraphs (Ibid). There is a tendency to assume that WWD is not exposed to GBV (Meer & Combrinck, 2015, Hanass-Hancock, 2008). Some studies list disability as a risk factor among others (Keith et al, 2022). However, in practice, the rates are higher for WWD (Stern et al, 2020). WWDs face more violence than men with and women without disabilities (Chouinard, 2012).

The experience of GBV among WWD differs from women without disabilities. The literature discusses the experiences of GBV among WWD and why it differs from Women without disabilities (Beadrop, et al 2022, Hans-Hancock, 2008) One such area is because of increased vulnerability and lower status (Neille & Penn, 2017, Aborisade, 2022). Besides, it may be harder to report or make resistance, taking into consideration different barriers. For example, WWDs get treated differently by the justice system,

they are also often assumed to be asexual (Van der Heijden, 2020, Harper & Douglas 2020). There are elements of self-blame (Meer & Combrinck, 2015, Van der Heijden et al, 2020). WWD face both IPV and violence from the community and strangers (Neille & Penn, 2017). One challenge in terms of IPV is how the perpetrator may sometimes be viewed as a hero, or when there is a care-dependency situation (Harper & Douglas, 2020, Chouinard, 2012).

Violence against women with disabilities can be seen as the intersection of gender-based violence and disability-specific violence (Neille & Penn, 2017, Aborisade, 2022, Wajack). It is fuelled both by ableism and sexism.

Most of the research about GBV up until recently have has a Global North focus. Most systematic reviews have also had a Global North perspective (Emersson, Llewylun, 2022). One issue related to the lack of studies is that is harder to evaluate actions (Ibid). In recent times there are several studies from the Global South (Emerson & Llewylun, 2022, Valentine et al, 2019, Van der Heijden et al, 2020).

Various studies emphasize how the actual rates and context of violence are higher, taking into consideration the problems of underreporting (Dowsey et, al 2016, Van der Heijden 2020, Keith et al, 2022, Meer, and Combrink, 2016). Dowsey el al, (2016) argue that the silence on the issue of GBV is violence in itself. Different factors explain the profound issue of under-reporting (Van der Heijden et al, 2020). One such factor is self-stigma, and women feel they need to blame themselves (Van der Heijden et al. 2020). Another factor is the lack of access to justice, and the cases get covered up within the community.

2.3 Context of Gender-based violence against Women with disabilities in Africa

It is estimated that 60-80 million people or 80 million people live with disabilities in Africa (Kwagala & Gahlande 2022, Chisale, 2022). However, such numbers should be used cautiously. In practice the rates may be higher, taking into consideration how disability is measured and challenges related to of lack of data (Madans et al, 2017). A general development issue is lack of disability data among countries in the Global South (Eide & Loeb, 2016). Lack of data can make it harder to evaluate actions (Ibid).

WWD in Africa faces all kinds of GBV (Kwagale & Galande, 2022). These range from IPV, honour killings, violence from strangers, and child marriage (Ibid).

Different factors contribute to GBV against WWD in Africa. One such factor is poverty. Some argue that poverty in itself also can be seen as violence (Neille & Penn, 2017). In several studies, the authors discussed how sexual violence was more prevalent in the context of poverty (Aborisade,2022, Kwagala & Gahlande, 2022, Neill & Penn, 2017). Other factors contributing to violence are low levels of education and the age of women (Kwagala & Gahlande, 2022). Women with lower levels of education find it harder to recognize and challenge abuse (Ibid). Challenges with access to justice, must also be taken into consideration (Van der Heijden et al, 2020).

There is research about some types of disabilities more prevalent in Sub-Saharan Africa and local myths regarding those and the challenges WWD are facing (Likumbu et al, 2021). One such is about persons living with albinism (Likumbu et al, 2021, Bradbury-Jones et al, 2018, Aborisade, 2022). Albinism is a condition which causes a lack of pigment and often there is visual impairment (Bradbury-Jones et al, 2018. Albinism is more common in Africa than in other regions, and it is here that there is most discrimination (Aborisade, 2022, Bradbury-Jones et al, 2018). The different skin colour is a mark, and there are profound stigmas and discrimination (Likumbu et al, 2021). For example, myths that sex with a woman with albinism can cure HIV or that body parts of

a person with albinism can be used for witchcraft (Bradbury-Jones, 2018). Persons with albinism may also get denied employment opportunities (Aborisade, 2022).

In general terms, there exists research about GBV targeting WWD in Africa.

There are different qualitative studies and quantitative studies from Africa about the issue of GBV targeting WWD (Irani et al, 2022, Van der Heijden et al, 2020, Hanass-Hancock 2008, Aborisade, 2022, De Beadrup et al, 2022, Combrinck, 2017, Meer & Combrinck, 2015, Valentine et al, 2019, Kwagala & Galende, 202). One study from Uganda is a systematic review of the prevalence of IPV among WWD (Valentine et al, 2019). The study is based on baseline data from a population survey with support (Ibid). In South Africa, women with intellectual disabilities were facing double stigma and challenge to justice (Meer & Combrinq, 2015). Burkina Faso women faced double discrimination and oppression, by both being women and living with disabilities (Wajack-Pambe & Kouanda, 2022). One such dimension was in relation to that women with disabilities were seen as having less value and not seen as real women (Ibid.)

Women with different kinds of disabilities had challenges accessing justice and faced stigma (Van der Heijden et al, 2018). Sometimes when reporting abuse, they get abused again (Ibid). In Uganda in a qualitative about persons living with nodding syndrome, many girls studied were survivors of sexual abuse, and they lived in the context of poverty (Irani et al, 2022). Another study from Uganda compared risk factors for sexual intimate violence among women with and women without disabilities in Uganda (Kwagala & Galende, 2022). Risk factors were seen abuse in the home in childhood, age difference, level of education and economic status (Ibid).

2.4 Different actors work to addressing Gender-based violence targeting Women with Disabilities and local activism and rights work

Globally there are different programs and approaches to addressing GBV (Keith et al, 2022). WHO emphasizes work to strengthen relationship skills, women's empowerment, access to service, poverty reduction and transforming gender roles (Ibid). In a review manuscript of a systematic literature review regarding interventions to reduce GBV among women in Africa, the authors (Keith et al, 2022) emphasized various kinds of interventions such as empowerment, and community based. Some examples of community-based work were to work for change (Ibid).

In terms of work addressing GBV targeting WWD, there are both general programs and disability specific. A mindset among some general organizations was that everyone is human, assuming inclusion by default (Hanass-Hancock et al, 2020). One challenge was the ability to reach WWDs (Ibid). Many Organizations of persons with disabilities worked locally and with specific disability categories (Ibid). However, from a study based on GBV prevention in 3 countries, the benefits for WWD did not differ profoundly compared to women without disabilities, but the rates of GBV were still higher for WWDs after the programs ended (Dunkle et al, 2020).

The role of the disability movement and activism for change is being raised (Bezzina, 2019, Aniyamuzaala, 2012, Katsui & Kumpuvuori, 2008). In the African context there are both work at the local and global nexus of rights (Nett, 2021). The disability movement and the role of Organizations of persons with disabilities in Africa is being discussed (Bezzina, 2019, Aniyamuzaala, 2012).

2.5 Research gap and situating my study

My study is situated in a context where knowledge about disability and GBV in the Global South is emerging, but still not the main focus. However, many models are still from the Global North. Uganda is being a patriarchal society, with some disability perspectives. The research from Africa and Uganda that I found was both quantitative and qualitative.

The area of how local organizations are working with the issue of GBV in different contexts of Uganda has not been studied as far as I found. Studies are rather about determinants for violence, and various challenges.

Through my research I hope to work for increased knowledge regarding local organizations work against GBV targeting WWD in Uganda.

3 Methodology chapter

The methodological choices and epistemology are affected by the social constructivism and feminist school. The methodology is qualitative. In this chapter, I will present and discuss the research design, sampling, interviewing, thematic analysis, reflexivity, ethics, strengths and limitations of methodological choices and the study.

The thesis is a qualitative interview study of how organizations in Uganda are working on the issue of gender-based violence targeting Women with disabilities. The qualitative study is based on interviews with six local organizations and one international organization working locally. All interviews took place online, six on Zoom and one as a WhatsApp audio call. All interviews took place in the Month of March 2022.

3.1 Research focus, research design, sampling

To carry out a qualitative study it is crucial to have a research focus (Bryman, 2012). Qualitative research is often related to studying people and social relations (Ibid), In my case, I first come into the area of GBV targeting WWD in the Global South when I did an internship for a disability NGO working globally with disability issues for LUMID. GBV targeting WWD in the Global South is an often hidden and understudied issue (Howell, et al, 2016). The rationale behind picking Uganda for my qualitative study was among others personal interest. I have been in Uganda in 2015 with my people's college. Uganda is an interesting case since it has been praised for its work with disability in Africa, whereas there is a discrepancy between laws and social reality (Katsui & Kumpvuori, 2008). Uganda is also an interesting case since it has high levels of GBV (Valentine et al, 2019). The rationale to go for online interviews, was that due to Covid-19 it was not possible to travel and carry out fieldwork. Online interviews enabled a global context.

Contacting organizations without gatekeepers was not possible. While trying on my own, one challenge was first to try to email organizations from addresses I found on organizations' websites through google, since I got zero responses. So, in the end, I used a chain of gatekeepers. First, I contacted my former people's college teacher with over 40 years of experience cooperating with different African countries among others, Uganda. He then put me in contact with a Swedish senior lecturer in social work who had carried out fieldwork in Uganda. She then gave me the contact details of a senior lecturer in Uganda, who was the first woman with disabilities to finish a PhD in Uganda.

Through her, I carried out purposeful sampling, my first sampling strategy. She could send me the contact details of different kinds of organizations. The type of organizations in the interest of the study were both organizations of persons with disabilities and mainstream organizations and organizations working both urbanely and rurally. This is an example to work to get both depth and breadth (Bryman, 2012). It is depth in the sense of studying different meanings, and breadth while covering different types of organizations working in Uganda.

After my first interview, I also used snowballing as a strategy. My first interview was with an umbrella organization for women's organizations in Uganda. They also worked with disabilities. Bryman (2012) emphasizes how one strategy for snowballing is to find people that know other people. This was the case here, through snowballing I got into contact with some organizations that gave unique insights. In the result, analysis and discussion I will refer to the organizations as Organization A-F. In the first section in the Result section, there are brief descriptions of the different organizations.

3.2 Interviewing

Interviewing is one of the most widely employed methods of data collection within social science (Bryman, 2012). One explanation is because of its flexibility (Ibid). Another motivation behind can be to give voice and dwell on social issues. However, you can never fully give voice as a researcher, since it is your interpretation and through your

text and voice. Within different traditions of feminism, there is the idea of emancipatory research and changing relations (Rice et al, 2019).

The rationale for conducting online interviews was to not be limited by time and space and to have a Southern focus taking into consideration I am located in the Global North, however I wanted to learn about issues in the South. Carrying out online interviews was one way to learn from the field, get an in-depth understanding and learn how organizations were working. Taking into consideration the context of Covid-19 it has been more common with online interviews (Lobe et al, 2020).

The type of interview employed was the semi-structured one. The semi-structured interview is the most widely employed interview in qualitative studies (Bryman, 2012). One advantage of semi-structured interviews is that it gives the researcher both some structure and flexibility (Ibid). One dimension I would like to add is that it also contributes to credibility when the different interviews have the same themes. The flexibility and structure are generated by an interview guide (Ibid). For my semi-structured interviews, an interview guide focusing on challenges facing WWD, GBV, organizational work, norms, stigma, and challenges got prepared. In the interviews, besides the interview guide follow-up questions took place. The duration of the interviews was between 20-45 minutes. One advantage with the short format, was to have it quite focused. One disadvantage was that I could not dig as deeply.

All interviews were carried out online. For some interviews, I had just audio on zoom and some with video. One advantage of online interviews was that I did not get limited by geographical location and could access organizations in Uganda. One disadvantage was that I could not control the environment of the informants, for example, if they were in a confidential and safe environment. During the interview with organization, B my informant was in a loud environment. Taking into consideration that the interview with Organization F was a what's app audio call, and that consequently I could not record that interview, I decided to just refer to Interview F in the Result section, but not use quotes from that interview.

3.3 Being a Woman with disabilities myself- Reflections on research impact

I am a woman with disabilities myself, here I will discuss how it impacted the data collection and analysis. Having the experience of growing up with speech impairment (severe in childhood) and being a woman living on the autistic spectrum had both disadvantages and advantages. One disadvantage was that it was harder to analyse pauses and non-verbal communication. I also often had to repeat questions. While listening to the transcript I realized how sometimes I changed the questions when asking them again. One advantage of being a WWD was that I had more patience and let the informants speak a lot, rather than interrupt. I would say I had more patience in the sense of to a high extent listening to my respondents' answers and perspectives. That gave in-depth answers. It may also have decreased the unequal power relations between researcher and informant, in the sense of not controlling and directing the interview to a too large extent. It may also have improved the likeliness of the informants to participate since a WWD is studying issues related to disability.

3.4 Thematic analysis

The method employed for analysing the data was thematic analysis. It is an ideal method for novice researchers and crucial for the process of coding (Braun, Clarke, 2006). However, it has been criticized as an anything-goes method with a lack of guidelines (Ibid). Braun and Clarke (2006) are addressing this critique by providing guidelines and at the same time emphasizing flexibility (Ibid.).

One common fallacy among researchers and students while carrying out thematic analysis is in their work to say that themes just emerged from the data (Braun, Clarke 2006.). However, there is always elements of interpretation (Ibid). To not analyse the data deeply, and just paraphrasing and providing quotes without interpretation is another fallacy

(Ibid). The lack of description can affect credibility (Kiger & Varpio, 2020). To report and analyse occurring themes in a dataset is one purpose of thematic analysis (Kiger & Varpio, 2020).

While carrying out a thematic analysis several steps need to take place. The first step is to get familiar with the data and to start the analysis after all data is collected (Braun, Clarke, 2006). In my study, I first transcribed all the interviews word by word. Then I read through all the transcripts as carefully as possible. After reading through the interviews, I made notes on the side. The second step is to make initial codes (Ibid). I made codes by making comments on the side of the transcripts, with some interpreting elements. One example is how. The third step is to search for themes across the codes of the dataset and to make codes to themes. It is crucial to make sure that themes and codes are not overlapping (Braun & Clarke, 2006). I made themes by categorizing the codes together with the quotes. For example, I listed all codes in relation to challenges to justice, such as perceptions by legal personal, challenges of accessibility, not disability friendly law. The fourth step is to write up the analysis.

Within thematic analysis it is common to adopt deductive, inductive, theory-banded, literal or latent/interpreting elements (Braun & Clarke, 2006). My thematic analysis was mainly inductive, while I was on the same time guided by my research questions. The guiding of the research questions, is seen in the Result section/Thematic Analysis in the sense that I first have the research questions and then various themes in relation to them.

One common strategy among researchers is to employ software for the thematic analysis such as NiViVO. However, in my case, I decided not to use software, since I wanted to feel closer to the material. Instead, I worked with several sheets of word-documents.

3.5 Reflexivity

Within social research, it is important to work with reflexivity (Olmos-Vega et al, 2022). There are different kinds of reflexivity. These are personal, interpersonal, contextual, and methodological (Ibid).

I am a researcher who is a woman with disabilities myself. I decided to disclose my disability status in the contact with the gatekeepers and the respondents in the email conversation since it is an important part of my identity. The disclosure may have impacted interpersonal reflexivity in the sense that they may have felt they wanted to help a student with disabilities (Olmos-Vega et al, 2022). To be a woman with disabilities makes other understandings of ableism. However, I am also very privileged considering I am located in the Global North and have a middle-class background.

I am aware of the critique that personal reflexivity can be narcissist or just listing your positions (Olmos-Vega et al, 2022). Instead, it is important to analyse the consequences of positions (Olmos-Vega et al 2022). I am a white, middle-class, cis-gender woman located in the Global North. I am a feminist, having an academic background in Human Rights and International Development and Management. I have also been travelling in the Global South. I am aware of the importance of postcolonial perspectives. By focusing on how organizations were working and the challenges, I avoided the tendency to just focus on things perceived as problems in the Global South or stereotyping development (Thambinthan & Kinsella, 2021).

Being a feminist researcher implicated to dig into relations, power structures and challenges. I also decided to use I rather than the passive voice, to show how I am an active researcher. At the same time I avoided subjectivity such as “I believe...”, “I think that...”

While analysing I got impacted by being far away from the field, but I trust my respondents' perspectives and knowledge. In terms of communicating reflexivity, I tried to be transparent with all processes, and while writing up the result section, analysis and discussion.

3.6 Ethical considerations and dilemmas and how to address these

Carrying out a qualitative interview study about a sensitive topic had several ethical considerations and dilemmas. In following section, I will describe and discuss some of these.

One of the most important factors in research is the do no harm principle (Bryman, 2021). In the data-collection process, I had to take into consideration the unintended consequences of my study. Since I am not a psychologist or professional researcher, I decided not to interview the survivors themselves. It may mean going through traumas for women, and I could not control how they would feel after the interview. At the same time, the nothing about us without us principle is important while researching and working with disability issues. The idea of the Nothing without us about us-principle is to include persons with disabilities and let them speak. I would say I do justice to Nothing about us without us while interviewing organizations of persons with disabilities, and organizations working with disability issues. They have great second-hand knowledge, and some may also live with disabilities themselves. However, I am also aware of the issue of others speaking for persons with disabilities.

Informed consent is standard while carrying out interviews. In this case, it was done verbally, since it would be too complicated to sign paper while carrying out the interviews online. In the email with the request, information about the purpose, condition and focus of the interview got included. At the beginning of each interview, the purpose of the interview, the type of study it would be used in, confidentiality and withdrawal of consent were shared. All respondents accepted the conditions for the interview.

Power relations and representations of the world are other ethical considerations. With power relations, one must take into consideration that I am middle-class from the Global North interviewing organizations in Uganda. It is important how you describe the world and study participants in a study. It is crucial to not describe contexts as problems, romanticizing or simplifying. In terms of theory and the kinds of studies included

I made sure to include authors, theories and perspectives from the Global South. One common dilemma while researching disability issues in the Global South is to just use literature and theories from the Global North (Mekhosa, 2011).

3.7 Strengths and limitations of the qualitative study

Within the discipline of social science, there is a discussion regarding criteria for qualitative studies (Tracy, 2010). Although many hold the opinion that there are no general rules and case-to-case basis, Tracy (2010) argues the importance to have some criteria and to increase the credibility of qualitative research. To add it can be crucial for novice researchers to have some kind of guidelines (Ibid).

The first strength of this qualitative study was its potential to contribute to change and study an understudied issue. The key to social science is to increase knowledge. In my case researching how organizations are working with the issue of GBV among WWD may contribute to increased knowledge in some ways. I would also say that my topic is a worthy topic and researchable, in the sense that it is relevant to the field of development and researchable in the sense of specific research questions.

The second strength is that the study is credible. It is credible in the sense of being transparent about the process, and organizations interviewed and to have been able to get a broad scope of organizations. I am aware of different bias, such as progress-bias.

The first limitation of the study was that it was not possible to reach saturation, taking into consideration I only carried out seven interviews. But the number of interviews is not what counts as saturation, but rather the in-depth knowledge you get. I was not either able to triangulate the results which can be crucial. I could not triangulate it since I discussed not to combine it with for example organizational reports

The second limitation of the study is that no follow-up interviews took place and that I could not visit the field of study. In terms of the time consumption

The third limitation is that the respondents' answers may be biased, and that I studied their perspectives. However, by rather studying their actions and motivations, being aware of the second-hand knowledge, I worked through that.

Another factor that is both a strength and a limitation is that I interviewed organizations from different contexts in Uganda. It was a strength in the sense that I got wide perspectives. It was a limitation in the sense that it was harder to verify the result and get sufficient thick description. On the other hand, I still felt that I got thick description partly when seeing similar examples from the different respondents.

4 Theory Chapter

Postcolonial Feminist Disability Studies

The theoretical concepts and frameworks employed in the thesis can be labelled under postcolonial feminist disability studies or Transnational feminist disability perspectives. These concepts are related to the development of Feminist Disability Studies. First, some of the main ideas of Feminist Disability Studies will be presented which I will also employ in the analysis and discussion. Then postcolonial and transnational perspectives on disability and gender will be presented. Then I will discuss some critiques, strengths and limitations. In the end I will discuss the practical implications of the theories for my analysis-section. You can see the analysis in section, 6.1.

4.1 Feminist Disability Studies

Feminist Disability Studies got established as a field of study approximately 20 years ago (Garland-Thomson, 2002). The idea behind feminist disability studies is to integrate feminist and disability theory (Ibid). Garland-Thomson emphasizes how one problem was that disability studies and feminist studies did not have a conversation (Ibid). Feminist disability studies centre on disability in the context of rights and exclusion (Garland-Thomson 2005). With rights, it has to do with both civil and other kinds of rights. The exclusion is related to the able/disabled system (Ibid). The ableism system is related to the discrimination, stigma and degradation of those considered disabled (Ibid). The meanings of ableism are that it is a discriminatory system where the able-bodied is the norm and the one in power (Ibid). The disabled are seen as not following the norm and are stared at (Ibid). Feminist disability studies challenge stereotypes and assump-

tions of disability (Garland-Thomson, 2005). It goes beyond studying women with disabilities and puts disability in the centre (Ibid).

Several areas are of concern for Feminist Disability Studies. One is the representation of female bodies and the non-normative. Those are viewed as being weak, vulnerable and dependent (Garland-Thomson, 2002). Another area is identity. Many persons with disabilities do not identify as disabled (Garland Thomson, 2005). There are different perceptions about the woman with disabilities, such as being asexual and infantilized (Garland Thomson, 2005). Care, dependency and interdependency are other areas relevant to Feminist Disability Studies. Women with disabilities may need more care and it is not always an equal relationship with the caretaker. The notion of what care and dependency implicates gets challenged. For example, we all are dependent on care (Be', 2020). To add activism is another area of concern for Feminist disability studies. It can be about challenging the cultural script of disability, and to work for a larger representation (Garland-Thomson, 2002). The representation can be carried out in society by different actors (Garland-Thomson, 2002).

4.2 Postcolonial Feminist Disability Theory and Praxis-framework

In the academic article “Gender, Disability and the Postcolonial Nexus”, the author Pushpa Naikuh Parekh (2008) describes what she earlier introduced, which is called the postcolonial feminist disability theory and praxis framework. Postcolonial Feminist Disability Theory and Praxis Framework is a reconsideration of Feminist Disability Studies in a Postcolonial context. The logic behind feminist disability postcolonial theory and practice is to analyse how different structures intersect. One such area is within the nexus of identity formation from different angles such as geo-political, socio-economic, cultural and historical factors. The approach connects disability with post-coloniality. Similarly, how FDS raises the issue of how feminist scholars and disability scholars have not had a conversation, there has not been that much conversation be-

tween disability scholars and postcolonial scholars (Ibid). Rather postcolonial scholars have used disability as a metaphor for colonialization, whereas disability scholars have used postcolonialism and colonialism as a metaphor for disability (Sherry, 2007). One example is the discourse to compare disability with slavery (Sherry, 2007).

Key to postcolonial feminist disability theory and practice framework is to analyse different practices that oppress or empower. Different approaches and identities are of concern. For example, how ableism is affected by colonial structures. Some examples are how the colonized also got labelled as disabled (Parekh, 2007). A dimension I think is crucial to add is the interrelationship between colonial and disabled.

Situating disability in relation to other angles is crucial for postcolonial feminist disability theory and practice. Such angles are for example activism and power structures. Power structures can be related to specific contexts, colonial legacies and local practices. Parekh exemplifies how in the context of disability in postcolonial India, WWD got more freedom in the sense of not being expected to marry, while at the same time being denied the prospect of marriage. One point for marriage of WWD is that caste is not as important (Price, Goyal, 2016).

The combination of postcolonial theory, feminism and disability studies is further developed in the article 'The Fluid Connections and Uncertain Spaces of Women with Disabilities: Making Links Across and Beyond the Global South'. from *The Handbook Disability in the Global South* (Price and Goyal, 2016). The focus of their theoretical discussion is on the lives of women with disabilities in the Global South and beyond. The authors emphasize the importance of understanding and working with different contextual realities. One such is how there are many perceptions about women with disabilities in the Global South. One such is how it is assumed that women with disabilities live in the context of poverty, are oppressed and lack education. They argue that it is some truth in it, but not the only picture. The perception prevalent of WWD as asexual is related to different heterosexual patriarchal conceptions (Ibid). Women with disabilities are viewed as impure. In communities, families do not often accept a WWD to marry their son. Instead, some men only meet women during night-time and are ashamed of the association during daytime.

To add the combination of postcolonial theory, feminism and disability can be used to understand and theorize GBV targeting WWD in the Global South (Dowsey, 2016). For example, by understandings of violence and the issue of silencing violence. All kinds of violence are happening against WWD (Ibid).

4.3 Critique

One critique against FDS is how it is western biased and not discusses disability as created. Erevelles (2011) highlights how one flaw is how disability cannot be embraced as the most natural condition, taking into consideration disability created by violence or war (Ibid). Meekhosa (2011) argues how disability is created in post-colonial contexts, fuelled by the Global North exploitation. Erevelles (2011) argues that one must see the material reality and not just talk about ideas and ideology. Erevelles (2011) exemplifies that for example when talking about freedom, one must also understand violence.

Another critique regarding FDS is how its focus on activism is mainly corporate-based and in culture (Garland-Thomson, 2002). I would argue that for activism to have a true potential to change it is important to work with different actors.

One critique regarding post-colonial feminist disability theory and practice framework is whether the focus on the textual may contribute to less focus on reality. Another critique which may implicate elements of subjectivity is imperative to focus on the structures that are most important in a context rather than all. However, it may still be important to prioritise which structures that are most important. However, I see that it can be difficult to give all structures the same attention.

The discussion about the postcolonial as structures from the colonial past and not present is another critique. Grech (2012), editor of the book *Disability in the Global South, The Critical Handbook* (2016) argues how one rather should talk about neo-colonial subjects and disability. The emphasis is on how the current structures are colonial and new forms of oppression. Some examples of how postcolonial feminist disability theory and practice is the discussion of Indian literature from colonial time (Parekh, 2007). On

the other hand, Parekh also mentioned neo-colonial in her text, and imperial practices, but the discussion was mainly from the past. One example is how she focuses on post-colonial India

4.4 Strengths with chosen theories

The first strength of the chosen theories is that they situate disability in the context of rights and exclusion. Rights and exclusion are relevant for development and understanding discrimination.

The second strength is that it situates disability by adding a postcolonial dimension, and analysing how different power-structures intersects, and the structures that oppress or empower. It may show various intersections.

The third strength is the relevance of the theories for my empirical data. They are relevant in the sense of including several themes and concepts.

4.5 How I will employ the theoretical concepts

These elements of FDS and postcolonial feminist disability theory and practice framework will be employed. From the FDS to challenge stereotypes, rights and exclusion., studying beyond disability, and dependency. For example, with the ableism norms, and with rights and exclusions. I will also develop the concept with facial disability as discrimination, with the case of albinism in Uganda.

Instead of studying the textual which is common both within FDS and the Feminist Postcolonial Feminist Disability Theory and Praxis-Framework I will study how the organizations are working in Uganda and use the concepts to analyse and situate their work and discuss dilemmas and challenges facing WWD.

In terms of the postcolonial structures, I will combine with literature from Sub-Saharan African and African concepts of disability etc., taking into consideration that the Post-colonial feminist disability theory and praxis-framework examples are based from India.

5 Results section-Thematic analysis

The thematic analysis/result section is based on interviews with six local and one international organization's country office in Uganda. The organizations worked in various ways with WWD and with the issue of GBV targeting WWD. First, there will be a description of the organization and then I will present the thematic analysis in relation to the research questions.

Description of organizations

Organization A is an umbrella organization for women's organizations in Uganda. They do not specifically target disability, but they have disability women's organizations as their members and ensure a disability perspective in their work.

Organization B is an organization for women with disabilities in Uganda. They work with advocacy work, and access to livelihoods. They are part of different networks such as wives not brides.

Organization C is an organization for persons living with albinism in Uganda. They work with mentoring, challenging attitudes, support and legal representation.

Organization D: is the Ugandan field office of a UK-based organization working with disability activists in several Global South countries. They work with bottom-up approaches and include work about GBV.

Organization E: is a Ugandan organization working with disability rights through advocacy, skills training and work in the community such as with community radio. They are cooperating with the disability movement in Uganda.

Organization F is an organization for WWD in Uganda that works with skills and right-based work. They also spread information about different disabilities.

5.1 Which actions do local organizations in Uganda take in their work to address and prevent Gender-Based Violence targeting Women with Disabilities in Uganda?

5.1.1 Responding to emergent needs after events of GBV

One of the first things the organizations are working with after GBV has taken place, both by themselves and by partners is to respond to the direct needs. Those needs are both medical, psycho-social and practical. For example, after sexual violence organization E is working with doctors and providing emergent medical care and getting evidence needed to go to court.

If they are raped, they should report to the medical professional in less than in less than 72 hours in order to get them what can prevent them from getting HIV, that can prevent them from getting pregnant. Also, when they report to the medical doctor, they get a medical report, that can be used as evidence when going to police.

Mental and psycho-social health get affected by GBV. Most of the organizations worked with psycho-social support through partners. “And where when violence has happened, we refer them to psychological support from different organizations”, (Organization C).

Sometimes it is too dangerous for a survivor to stay at the place the violence takes place, and they may need help to leave safely and to get advice for a helpline. Organization D is not having the capacity to take survivors to a shelter. Instead, they work with partners

We have a relationship with Organization X Uganda, which provides counselling services, but also providing such shelters for survivors. By working with them we recognise that, there is always things that are needed for supporting Women with disabilities and that relationship is working very well.

Organization D has also developed an accessible helpline together with partners. With the helpline, deaf women can use a sign language interpreter.

5.1.2 Legal support and action

After GBV has taken place, the organizations work with legal support and access to justice.

Organization A worked with an entity offering legal services and worked with partners.

But we also have also an entity that offers free legal services, most of such services are directed to where the most vulnerable are, and women with disabilities are highly vulnerable. So in fact services are offered within those organizations that are legal providers.

Similar organization E worked with rereferral:

We have a number, and we have a referral where we trying to share in the law and also justice where people can follow what's stated in terms of where they can seek support.

Organization C is both working with referrals to legal entities and representing them directly.

Or there are times when we represent them directly especially in the formal courts of law like there is a commissioner state agency. This we do together with other social activists. We are able to work on cases with albinism. (Organization C)

They work with disability-specific cases, with the issue related to albinism. Sometimes they negotiate in communities when it is too dangerous to take cases to court.

Organization D worked to compile data about GBV for different disabilities,

Organization B is including another approach in their work. They included work with paralegals. "Train paralegals as women with disabilities, talk about the law. We also work with women. What happens if a case happens is that what to do." To add organization B helped to report to the police after cases of GBV.

5.1.3 Mentoring, peer-support

Organization C worked with safe spaces where Women with albinism freely could discuss and with mentoring. They cooperated with other organizations in the areas.

Organization D is working with peer-to-peer support in their GBV program. To add they use WWD that are survivors of GBV to advocate.

The other we are working with survivors; we are using them as self-advocates. Yeah, they are those that we should speak out so that they can help. We use them by where we have some kind of communication that we go through. To reduce some ways to provide, but with cases covered so that they can share their stories so that others can learn from it and to know the extent of the problem. (Organization D)

5.1.4 Skills-training

One way to provide opportunities, skills and alternative livelihoods for survivors was through skills training. These were both in terms of making artisanal art for selling, skil-

ling in terms of keeping accounts and organizational skills. There was also the alternative of skilling for survivors of GBV.

The organizational skill training was directed towards disability activists (Organization D). It had a bottom-up approach, with the actors discussing their needs, and Organization D providing a platform and some tools needed. Similarly, Organization B provided GWWDs advocacy skills.

5.1.5 Work in community

The organizations worked in the community in various ways. It can be divided into working with local organizations, organizing WWDs, working to change attitudes and get appetite for WWD human rights, work to spread information for example through community radio. Another strategy was to talk to people in the community and caregivers.

As an organization, we create safe spaces where girls are free to discuss issues that affect them. We have linked them to different organizations where we know that they can be free to express themselves. (Organization C)

Organization E talked with members of the community such as in places of worship, whereas Organization C asked persons to be change agents and worked together with community-based organizations.

We work with different community organizations in different parts of the country to engage women in activities so wherever we go and the team members in the field, we look out for these organizations that are in this area, we empower their leaders so that they can be a change agent. (Organization C)

Similarly, organization A worked by emphasizing the human value of persons with disabilities and working together with different membership organizations. Besides they allied with the disability movement.

5.1.6 Advocacy work

To do advocacy, by working with the leaders of disability. When we work with them. Of course, we put them especially with the CRPD so that they are aware of when we are going to engagement. We also participate in advocacy events like disability day, and women's day, so. We are participating in the issues of disability integrated when we do advocacy. We use the do no harm, we don't want to cause war between us and the government. (Organization E)

One strategy for advocacy work was to be visible in the community and to cooperate with other actors. Organization B took part in different networks and made themselves visible. For example, in networks against child marriage, they worked with various actors

Our advocacy work? We engage with different stakeholders, even duty-bearers, and other civil society organizations, including networks and we are part of a local network, and also a member at international level in girls not wives, so we don't work alone, we work with a number of partners and sometimes we ask for opportunity to speak on the different platforms. If there is a budget conference, we ask the district to also put us on the agenda. (Organization B)

Organization E emphasizes how advocacy is not one's man work, and at the same time that they do not want to create war with the government.

5.1.7 Work with disability mainstreaming

Several of the organizations worked with disability mainstreaming in various ways. Organization A worked to make sure that women with disabilities got included in all activities and to have a percentage of persons with disabilities.

Deliberately make sure that organizations of women and girls with disabilities are part of us. Once we work with such organizations it enables us to understand and also to work together. We want to understand their needs, challenges and obstacles. Within our membership, we have organizations of women. (Organization A)

To take the mainstreaming and awareness to the next level, Organization A had a foci-person (the respondent) working to ensure disability inclusion.

Organization D will work with disability mainstreaming in their next GBV program. Organization E works with various kinds of mainstreaming.

We do what we call mainstreaming. Disability mainstreaming, HIV mainstreaming and gender mainstreaming. So, for us in Organization E, we work with the principle of leave no-one behind. (Organization E)

5.2 How do local organizations explain actions taken and challenges in their work against Gender-based violence targeting Women with Disabilities in Uganda?

5.2.1 Poverty

We come to understand many people receive that kind of abuses because they are not economically empowered. So, what we do to link groups of people, and we part and receive some skills and speaking for them (Organization C)

Poverty makes WWD more vulnerable to violence, which makes it important to work with skills. At the same time, there are different unequal power relations, concerning multidimensional poverty, such as lack of access to school and challenges to getting formal employment opportunities. Related to the poverty-context is also that the law in Uganda is dual, where in customary law WWD cannot inherit from clan. There is a challenge of accessing bank-loans.

Now, there's a challenge with limited access to job, there's a big challenge, many people are uneducated and lack formal jobs, and these women with disabilities lack getting formal jobs. They face discrimination. Because they are looked at as women, but also as persons with disabilities. They are less valued, people conclude that they won't manage work. (Organization B)

Poverty also impacts one's ability to move out from the situation.

The other challenge affecting persons with disabilities inaccessible is the widespread poverty. Because most of the centres require to move to one place or another, and to seek for legal support a lawyer or anything. Or even to seek medical attention, all this requires money. Most of women and girls with disabilities do not have that kind of funding because of the widespread poverty. (Organization D).

5.2.2 Cultural devaluation, stigma and perceptions

One explanation why Organization C worked to change people's attitudes and raise awareness to the extent that persons with albinism got some recognition is because of different cultural myths and perceptions. Organization C emphasizes how one of the biggest challenges is the dehumanization of WWA and the violence they face.

But for people with albinism challenges are closer to the myths and beliefs and that they think that we are not fully human. And then for a woman, it can be a barrier. There are different stereotypes about women with albinism. One is that they cannot give birth. There is also a bad myth that people with albinism can cure HIV or aids. So, this alone poses people or men to rape women with albinism. Because they think it's a cure for HIV. Which really exposes us to more danger.

Similarly, Organization D discusses myths facing WWA and other disabilities, such as that sex with a virgin can give a blessing.

The cultural understandings are also highly both gender and disability based. Organization E discussed how when families have a girl with disabilities, she is not being considered their daughter and excluded from sense of belonging.

For example, in the home when the father has children, and if the child happens to be a girl with disabilities. That girl will be treated as other daughters. Actually, in that home, you ask the father about the number of children he has. He will mention those others who are not having any disabilities, and at the end of it, he will say. I also have another one, this one is like a waste.

Discrimination is widespread at different levels. Both within families and in the wider communities. That explains why organization E works to change mindsets and to meet persons in different positions.

The shame of association with WWDs happens also in terms of relationships. Many men do only want to meet women at night-time for sexual relations. Sometimes there are rejections from families when men want to marry a woman with disabilities.

Women and girls with disabilities are loved at night. People don't feel free to associate with them in public. They don't want to work with them in church or at weddings openly. Because they feel that people will laugh at them. Actually, women with disabilities are loved not by choice (Organization E).

After cases of pregnancy, WWDs are left behind. This is another explanation of the shame of association. Many cases of pregnancy are the result of rape. The perpetrators do not want to associate with the girls. In other cases, after GBV, the family is ashamed, and cases get settled in the community.

5.2.3 Mindset of people

One reason why Organization E is working with community radio and to talk at different is because of the attitudes and mindsets of people. They say that:

In the community, take the challenge as an opportunity. Challenges are mainly people's attitudes. We are challenging with changing peoples' attitude. To accepting people with disability, that they are people like others, we are struggling. Attitudes, ignorance. Leaders, especially leaders at grassroots levels. They don't have enough exposure, we are also struggling to face stigma and exclusion

Organization A is sharing this analysis:

The mentality of, ok, the negative attitude within families and communities, thinking you know that disabilities do not have that ability even to go to school. Creates a disadvantage for young girls to not be educated. Right from their families. Family members do not support them because of their ignorance.

Organization A argues that the mindset also challenges change:" So the moment we continue to see disability as a burden it really creates, obstacles for girls and women with disabilities"

5.2.4 Patriarchal structures and double jeopardy, Intersectionality

The work with role models, support and talking about rights is carried out because of different patriarchal structures. WWD in Uganda faces double discrimination. Organization D emphasizes how there are challenges compared to men with disabilities and Women without disabilities. At the same time, there are strong patriarchal opinions in the justice system (Organization D).

For example, there are different perceptions and unequal power relations, in the context of WWD as targets of violence. A blind woman cannot tell who the perpetrator is, or a deaf woman cannot scream (Organization D). Similarly, women in communities find it hard to disclose abuse by their caregivers (Organization A).

Besides, the patriarchal norms are related to traditional gender roles.

You find those women with disabilities are doing everything at home, water collecting, serving food, cleaning the houses, it is all too much. The other one is abuse, they are abused by those they stay with, and they give them nicknames to annoy. Then some are beaten because with a disability, there are some things they cannot manage. Sometimes when they fail, cared for by caregivers they get beaten (Organization B).

The traditional gender roles are related to a hierarchy where women and girls with disabilities are the lowest. They have the least access to school and services. Girls with disabilities are the first ones to leave school (Organization A).

There is both national and customary law in Uganda. WWD cannot inherit from customary law or have assets which can contribute to the cycle of poverty.

5.2.5 Challenges to justice, the structure of the legal system

Several factors explain why the organizations are working with legal support, legal rights and accessibility and paralegals. One such factor is how many court buildings, and the legal system is inaccessible, and where it is challenging for women with some disabilities to testify.

Considering physical challenges and the impairments they have; it is very challenging to access justice if not supported by well-wishers or organizations or even families it becomes very difficult. (Organization A)

For example, the domestic violence act does not exist in braille (Organization F). Organization D emphasizes how the laws are not disability friendly.

The fact that women with disabilities get treated differently if they go to the court themselves or may be asked why they ended up getting abused are other examples of why the organizations work with legal support.

Community and family opinions are also impacting the right to justice. For example, when cases of GBV get covered up in the community because there will be abandonment and stigma.

5.2.6 Lack of knowledge of rights, and challenges to recognising abuse

One reason to work with awareness raising, spreading knowledge about rights, and mentors is that WWD cannot always recognize abuse.

And one of the biggest challenges is that many of the girls with disabilities do not know and cannot report and recognise abuse. So they are not being sensitised enough. So when they are being abused, they are sort of normalising the abuses. (Organization D)

Being aware of your rights is one way to work for change. This is related to the low level of education among WWD. To add the low level of education and poverty are related to not being able to recognize abuse. Organization F highlights how many WWD are illiterate.

5.2.7 Self-stigma, low-self-esteem

One explanation why it is important to work with mentoring, organizational support and places to talk is because of self-stigma and low esteem. The self-stigma puts women at risk and a need to find affection. Some women end up with men simply abusing them. That also implicates low expectations of themselves and that they do not view themselves as an equal part of society.

When a man approaches them, it is in one way or another. It gives them confidence that you know someone also loves me. It is in the other way, it leads to their vulnerability. Because if someone approaches a girl with disability and tell them that they love them. There is a way, it is it is like someone is stalking them, and that kind of mindset puts them at a very high risk of being sexually abused. (Organization A)

5.2.8 Civic space and restricted funding

When it comes to going to a meeting, when you're a woman with a disability you don't have the opportunity to discuss, you don't have the opportunity to like talk in a meeting in a community. (Organization E)

.Then there is a discrimination in the role of political participation where they (Women with disabilities) are not given chance to participate and compete for different positions. For you to have a position, don't come to ours (is a response raised). (Organization B)

One reason why it is important to work in the community, and with advocacy is because of the challenge of WWDs to organize because of societal structures. Besides there is a lack of will sometimes to organize WWD seen it is viewed as taking time.

However, Uganda has been praised for its work with disability and political representation of persons with disability. There is a national organization for organizations of persons with disabilities. Organization F has worked together with the disability movement. But one challenge with their global support, was restricted funding for projects. Some of the methods, they worked with were providing skills.

To work with activists on the ground is one way to get change and to reach for change.

Activists with disabilities so that they can have much larger effect. One reason why we work with them. Because we know that they can easily mobilise, some of the work still reaching vulnerable people (Organization D).

5.2.9 Specific services and awareness, disability mainstreaming to get change

The challenge with the lack of information regarding GBV support services is related to the specific needs of women with different kinds of disabilities. For example, how many call services are not accessible to the deaf (Organization D). That explains the importance of alternative services.

That different disabilities requires different approaches, means that awareness of disabilities needs to be taken into consideration. Organization F makes sure to adjust for different kinds of disability needs in their activities.

The strategy to work with organizations supporting WWD is also an example of disability mainstreaming

Yeah so we have also leaders policy, with members to make sure disability is on the agenda. And to make sure such that issues and needs of women and girls with disabilities are not left behind. That's why we move along with organizations of directly targeting girls and women with disabilities because they enable us to get understand the issue deeper. So we leave s much to partnership. (Organization A)

5.2.10 Consequences of sexual violence and lack of healthcare

Cases of sexual violence are rapid, and perceptions about sexuality contribute to the need to work with medical services. At the same time providing alternative services, are important because of the lack of access to sexual and reproductive services. One such area is concerning the silence of the sexual and reproductive rights of WWD (Organization F). Related to this is GBV treated as a bedroom issue (Organization F).

Poor health impacts one's ability to fight GBV.

Also .we improve health. We know that people are when people are healthy with no sickness. They can be able to do things, once we do health, and they are being educated. They can be able to fight poverty, they can be able to fight gender-based-violence. (Organization E)

5.2.11 Rural-urban divide

To work with the ones most affected, and at the countryside can be explained by the rural urban divide. Generally rural areas are more conservative, and with less access to services and education. Organization F emphasizes how Uganda is not a developed

country and the issue of lack of accessibility. Similarly, many schools are not accessible or lack separate toilets (Organization A, Organization B).

6 Analysis and discussion

This section is divided by first discussing aspects in line with the theory and related dimensions from the thematic section, then what is not related to the analysis. Then there will be a discussion about literature confirming, problematizing and disagreeing with the findings of the thematic thesis.

6.1 Analysis

The aspect of the myths and stigmas regarding Women with albinism (WWA) and that they are seen as less than human can be explained both by concepts from FDS and the postcolonial feminist disability theory and praxis framework. FDS is highly related to how persons what is described with facial disabilities are most discriminated against (Garland-Thomson, 2002). Facial is related to the context of differing appearances, such as scars (Ibid). WWA differ by skin colour from the ones in the surroundings. More specifically in the Ugandan context, they lack pigment in a context, where others have black skin (Bradbury-Jones, 2019). Other concepts from FDS that are relevant in the concepts regarding WWA are rights and exclusions. It is exclusion in the sense of not getting employment (Bradbury-Jones, 2019). To the right-violation of violence, murder, and mutilation of body-parts. From the postcolonial feminist disability theory and practice framework, it can be related to local perceptions and practices that oppress. As mentioned earlier, the lack of employment is an example of socioeconomical structures. Clear examples, of such practices that oppress are myths that sex with a woman with HIV can cure HIV, or body parts can be used for good fortune. In Ugandan and other African societies those practices are prevalent, as seen in the result-section/thematic analysis (5.2.2) and in the literature (Dowsey et al, 2016, Howell et al, 2019). These are examples of cultural and social practices. The work on the other hand with change

agents and to raise awareness of the human values and acceptance is related to practices that empower. For instance, by the usage of ubuntu, and to work and empower persons with disabilities (Howell et al, 2019). Ubuntu is an African philosophy, with communal understandings and belongings (Ibid).

The perception that WWDs are not seen as suitable for marriage, can be understood from both FDS and from concepts of Postcolonial Feminist Disability Theory and Praxis-framework. One such area is in relation to various patriarchal structures exemplified in the Southern contexts (Price & Goyal, 2016). One example is how a WWD is not seen as a real woman according to others in the community, and especially families of the man (Wajack-Pambé 2022). Organization B discussed how families were against men marrying WWD. The concept of not wanting the man to marry is related to perceptions such as impurity of the Woman with disabilities. Men are afraid what other people will think and only meet the women during night-time as seen in the result section and in theory (Price, Goyal, 2016). The perspective from FDS as WWDs as seen as asexual and not having the same societal expected roles as Women with disabilities can also be used as an explanation (Garland-Thomson, 2002).

The widespread stigmas, poverty and the fact that women cannot inherit according to customary law. This phenomenon can be explained by different power relations and identity formations that oppress. One example of such power relations is the post-colonial where WWD is Uganda, in the countryside is in the periphery from the global centre and live in poverty and lack education. Another example is how the post-colonial and traditional system work on the same time. For instance, how post-colonial (law system) and traditional customary law work at the same time. According to traditional law women cannot inherit, and cases of violence get settled within the community. The stigmas can be understood from traditional beliefs and different perceptions. Such as that WWD should not complain, as seen in the result section. The poverty facing WWDs can be understood from different socio-economic structures, such as lack of access to education and employment institutions and opportunities.

The dimensions from FDS regarding problematization of care, dependency and interdependency can be useful to partly understand the results. The idea of problematizing

care, dependency and interdependency, is that we all may need care, whereas persons with disabilities more often is perceived as weak and dependent (Garland-Thomson, 2002). One example of dependency is when GWWDs got punished when they could not fulfil household tasks. The theoretical concept could be further developed by the dimension of denying opportunities by assumed dependency. Here I would claim that not allowing GWWDs to get education, is an assumption that they will not be independent in the future.

The aspects of various kinds of identity formations in relation to disability can be used to explain the importance of work with mentoring and forums where WWDs are free to discuss. The concept of identity relevant here is the identity of disabled as a social category (Garland-Thomson, 2002). However, many decide not to identify as disabled (Ibid). Through mentoring, and safe forum WWDs meet other WWDs in similar situations and it may be easy to identify as WWD.

The examples of activism from FDS and Post-colonial feminist disability theory and practice framework were from business and challenging mainstream representation and in the culture (Garland-Thomson, 2002, Parekh, 2007). It was from business in the sense of representation of a disabled friend to Barbie, and representation of culture with examples from India and various cultural expression (Garland-Thomson, 2002, Parekh, 2007). The activism from the theories can only partly explain the activism in my study. The activism differed in my study by being done by activists and organizations. However, some elements were similar such as the community radio to expose to disabilities and share knowledge. It was exposure in similar way, by increasing knowledge about disability. The work with community radio, was carried out by Organization E, and they shared talks about issues regarding disability and rights. However, one difference was a more bottom-up approach from Organization E and to work to directly change perceptions. To work with advocacy was to work more explicitly for change.

Another aspect that is partly not in line with the theory is the importance of not using disability-specific language but rather talking about traits deemed as disabled. From the angle that different disabilities implicate different challenges, it may be dangerous to not focus on disabilities. On the other hand, many disabilities face the same power rela-

tions. The idea of disability as a unique and natural variation may mean less focus on challenges facing specific disabilities. On the other hand, since women face similar kinds of oppression, this may put the agenda for the injustices.

6.2 Discussion

In the discussion, I will problematize the findings, relate my results to literature, and widen the scope by implications for practice.

6.2.1 Problematization of findings and the relationship to literature

The discrepancy between rights on paper, right fulfilment, societal norms, structural factors and local perceptions are being discussed in the literature and raised in my study (Haang'andu, 2019, Businge, 2016). In my study, WWDs rights were not fulfilled, and they faced oppression. They lacked enabling factors such as full access to education, challenges with political participation, stigmas and self-stigma. The aspect of local practices that both work with rights and some that oppress such as the concept of ubuntu, and that we all are humans can provide perspectives (Businge, 2016). Ubuntu is an African philosophy, that some use for disability inclusion as well (Ibid). The context one must take into consideration is the discussion of communal understandings and belongings such as that persons with disabilities are seen as a natural part of society (Bezzina, 2018, Businge, 2016). For instance, in pre-colonial Burkina Faso, persons with disabilities were protected in the community and seen as holding important power (Bezzina, 2018). The work organization A emphasized how we all are human, and part of society is an example to find acceptance within the community, whereas the work to include disability is a way to make the activities more inclusive.

However, it is important to acknowledge how cultural negative attitudes can be seen as the greatest challenge to disability rights and inclusion (Abimany-Ochom and Mannan, 2014). Similarly, how cultural norms and practices, can be the aspects that makes right-implementation difficult (Haang' andu, 2018). For instance, when girls and women with disabilities are hidden within communities, or when cases of violence get covered up because of shame for the family (Irani, 2021). Another challenge in relation to work with right fulfilment is the lack of disability data, which may make it harder to evaluate actions (Abimany-Ochom & Mannan, 2014). With disability data, from a postcolonial perspective it can highlight the challenges of measuring and what one can measure (Eide & Loeb, 2016).

To work for change is related to motivation and seeing opportunities. The reduced access to education, and at the same lack of special needs teachers is an example of a lack of adaptation for rights and political will. In Uganda, the funding for disability programs has been low (Anayimuzaala, 2012). In several African countries positive legalization regarding disability rights have not yielded social, political and economic implication (Haang' andu, 2019). However, it has also to do with community mindsets and community perceptions (Irani et al, 2022).

The work with activists, and Organizations of Persons with Disabilities can be seen as crucial to reach change as organization D shared. The work in rural areas has been showed as especially important (Bezzina, 2019). However, one must also take into consideration, the challenges facing OPDs and their relationship to international organizations for funding (Bezzina., 2019). One factor impacting organizational work, is the generally low rate of education in rural areas, which makes it harder to monitor activities (Ibid). In light of this, one can understand how Organization D let the organizations speak and gave them support.

The issue of lack of accessibility to justice can be understood from different structural factors. One such is perceptions of WWD as not a trustworthy subject for legal rights (Van der Heijden et al, 2020). Some challenges are lack of accessibility to places of justice and that it can be difficult for Women with hearing impairment to testify (Van der Heijden et al, 2020). The women may be treated badly while accessing justice sys-

tems themselves. One must also discuss the dimension of how people see the legal system as credible and possible for change. Haang` angdu (2018) argues how in societies alternative ways to justice may be seen as more important. In my study Organization C sometimes settled cases in the community, when it was seen as too dangerous to proceed through formal justice channels.

Findings from my study and various contributions from literature highlight how WWD face double discrimination and both disability and gender-based oppression and violence (Wajack-Pambe & Kouanda, 2022, Irani et al, 2022,). However, one question I ask in relation to double-discrimination is whether the situation for GWWDs is unique and not just combining types of structures. It may be unique in the that the nature of disability is being used against one. From another aspect, in my study, there are clear examples of gender discrimination such as devaluing education, traditional gender roles and being punished while not following traditional gender roles, and disability specific with WWDs was seen as a waste and an easy target for violence. For instance, a study from South Africa highlighted how women with intellectual disabilities were perceived as extra vulnerable (Meer & Combrinck, 2015).

Different factors contribute to the double-jeopardy such as widespread poverty. Disability-specific factors related to poverty in my studies were among others challenges with access to justice, and not being able to leave a place, which are also being discussed in the literature (Van der Heijden et al, 2020,). In terms of poverty WWD may be dependent on others in the community, and the last ones to get their rights fulfilled. A study from South Africa highlighted how in poverty, WWD got abused after getting things for their daily needs (Neille & Penn, 2017).

Structural factors were the assumption of the education of GWWD as a waste. Lack of education is another risk factor which is related to the challenge to recognize abuse and work against gender roles (Kwagala & Gahlande, 2022). However, from a study in LMICs, WWDs that had longer education faced a higher risk for non-partner sexual violence (Emerson & Llwellyn, 2022). One way to interpretate this could be that in the society, there is not as much as a regular contact daily when it is not a partner which may implicate that various power relations are not as important. Another explanation

could be that those with longer education, may go to more places in society. I also plausible interpret it that women with longer education may be seen as challenging gender-roles.

To the various factors discussed above I claim that self-stigma and low-self-esteem should be included. The self-stigma and low-self-esteem can be named under internalized ableism. Based on the example from Organization A about how women with disabilities were wanted to feel loved, and how that put into danger. The low self-confidence impacts one's ability to fight for their rights. The self-stigma is fuelled by psychological violence and how people in communities view WWD as animals (Neill & Penn, 2015).

To work with women's economic empowerment is seen as crucial to decrease violence and increase women's participation in society (Bourey et al, 2015, Keith et al, 2022). But the work with skilling such as artisanal crafts, in the context of rights in Uganda has been criticized as putting low expectations for PWD (Nett, 2021.) Local activists said in an academic article written by Nett (2021), how the work with all persons with disabilities making the same skills made it harder to sell. At the same time another issue was if it put low expectations of Persons with disabilities and less chance for them to get education (Ibid). Bezzina argues (2018), how the negative mindset regarding disability is related to assumed productive from colonial structures and the place in the market system. For skilling and economic empowerment, one must also situate it in the global capital system, and of Uganda located in the periphery, in the Global South. Meekhosa (2011) argues how areas of the Global South is poorest, and far from the centre, with higher unemployment. The unemployment rate among persons with disabilities in the Global South may be 90 % (Bezzina, 2018).

My study is to a substantial extent departing from the challenge raised about how organizations that work with disability issues lack focus on gender issues, whereas organizations working with women's rights lack disability inclusion, in the following factors. (Hanass-Hancock et al, 2020). The first factor was how the mainstream umbrella organization (Organization A). had a disability foci person and included women with disabili-

ties and were aware of different disability needs. That the organizations worked with various issues were other factors important. The work with both gender and disability are clear examples of a holistic approach.

One limitation in terms of relevance, is that the thesis is not focusing much on interventions in society against violence and including men and to change gender roles which has been discussed in literature, but rather on work with and for WWD as seen in the result section (Keith et al, 2022, Stern et al, 2020). However, work in community, for example to change attitudes, such as expectations, mindsets, and beliefs are also ways to mobilize community. To add the advocacy work can be seen as trying to change structures and the lives of WWD.

Much of the literature emphasized GBV within the context of IPV (Valentine et al, 2019, Kwagala & Gahlande, 2022). In my study, much emphasis was on GBV in the community and sexual violence, even though Organization B mentioned that women got beaten by the ones they were staying with. On the other hand, there are numerous examples of violence in the community or by neighbours. One may also take into the context raised in some of the literature and my study in terms of the shame of associating with WWD and WWD not being seen as a marriage partner. May it implicate higher rates of violence while marrying, because of stigma and low status? In a study from Uganda, it showed how many more women with disabilities faced violence in relationships (Kwagala & Galende, 2022). A related challenge raised in my study and in the literature is the high rate of pregnancy among GWWDs (Kwagala & Ojiambo Wandera, 2021). After pregnancy the man is often not recognizing the child (Ibid).

6.2.2 Implications for development practice and policy

The thesis has following implications for development practice and policy.

The first implication is the importance with intersectional discrimination such as GBV targeting WWD to realize that the situation is unique and not just both gender and disability-based violence. Even though it can be hard to distinguish what is related to different power structures, it is still important to have awareness about different dimensions. For example, how intersection creates unique violence. Furthermore, adding disability as a dimension is developing our understanding how to work intersectional, together with the perspectives of gender, sexuality, race and class.

The second implication for development practice and policy is that it is crucial to combine work with rights, norms, cultural perceptions and structural factors. As seen in the study there were many attitudes and challenges in terms of access to justice.

The third implication for development practice and policy is to include disability perspectives, different ways to work with various groups and inclusions. Otherwise, it will have severe consequences. One example is when work against HIV has not included persons with disabilities, due to the assumption that they are seen as asexual or not at risk for violence (Hanass-Hancock, 2008). As a consequence some developed Aids after HIV and died (Ibid).

7 Conclusion

7.1 Summary of the thesis process and the findings

In the Introduction of the thesis the topic of Gender-based violence targeting Women with disabilities in Uganda and globally got presented. The specific research questions of the thesis were: Which actions do local organizations in Uganda take to advocate, prevent and support women with disabilities that are survivors of GBV? How do organizations rationalize actions taken? In the literature review the topics of placing disability in the Global South, Gender-Based Violence against Women with disabilities, globally and in Africa, organizations work and understanding of rights got presented. The methodological choices employed for the thesis were qualitative interviews and thematic analysis. The theoretical perspectives were Feminist Disability Studies and Postcolonial Feminist Disability Theory and Praxis Framework. In the result section, various themes were presented such as legal work, responding to emerging needs, mentoring, advocacy, cultural beliefs, mindsets and challenges for implementations.

Some of the findings from the thesis is the importance to work with both rights and norms and structural factors. The importance to understand the intersection of disability and gender in relation to violence and discrimination, and that violence and discrimination facing Girls and Women with Disabilities go beyond combining factors are other findings.

7.2 Aspects and suggestions for further research

One area that would be interesting to research further is the co-operation among organizations within the disability movements, and the challenges they are facing while balancing demands from funders, stakeholders, persons with disabilities, and co-operation with the government. My thesis taught a bit upon challenges and societal factors.

Moreover, further areas that would be interesting to research would be the relationship between internalized and external ableism and how disability norms affect the fulfilment and participation in society for Women with Disabilities in different regions in the world.

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Appendix

Interview guide

Which challenges are girls and women with disabilities in Uganda facing?

Which challenges are girls and women facing in Uganda in terms of gender-based violence?

Is the GBV targeted against Women with disabilities different from that against girls and women without disabilities? If yes, in what ways? What could be the reasons?

What kind of perceptions and stigmas are common for girls and women with disabilities?

How are you working as an NGO?

How are you reaching out to survivors of GBV?

Do you have some disability sensitive approaches?

How are girls and women with disabilities included?

What methods are you using in your work?

How can you work to change the society?