

**REPORT OF BASELINE STUDY ON
LEVEL OF AWARENESS OF SEXUAL
REPRODUCTIVE HEALTH AND RIGHTS AS
HUMAN RIGHTS BY YOUNG GIRLS AND
WOMEN WITH DISABILITIES IN ENUGU STATE
NIGERIA**

**CARRIED OUT UNDER
WOMEN INFORMATION NETWORK (WINET)**

**PROJECT TITLED
SEXUAL REPRODUCTIVE HEALTH AND RIGHTS
EDUCATION AND COUNSELLING SERVICES FOR YOUNG
GIRLS AND WOMEN WITH DISABILITIES IN ENUGU STATE,
NIGERIA**

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Acronyms

| | |
|---------|--|
| FGD | Focus Group Discussion |
| GSSFD | Government Secondary School for Deaf Ogbete, Enugu |
| HIV | Human Immunodeficiency Virus |
| HND | Higher National Diploma |
| JONAPWD | Joint National Association of People with Disabilities |
| NCE | National Certificate of Education |
| NGOs | Non-Governmental organizations |
| OND | Ordinary National Diploma |
| PWDs | People with disabilities |
| SECBG | Special Education Centre for Blind Girls (SECBG) |
| SECBW | Special Education Centre for Blind Women |

| | |
|-------|---|
| SPSS | Statistical package for social sciences |
| SRHR | Sexual reproductive health and rights |
| WINET | Women Information Network |

EXECUTIVE SUMMARY

This report is based on a baseline study of women and girls with disabilities in Enugu state, Nigeria. The study was conducted in March 2019. The objective was to obtain baseline information on the level of awareness of young girls and women on the sexual, reproductive health and rights (SRHR) of females with disabilities. The study locations were Enugu and Oji River, both in Enugu State, Nigeria. A mixed method comprising quantitative survey and qualitative methodologies was used for data collection. For the quantitative survey, questionnaire was utilized as the instrument for data collection while Focus Group Discussion (FGD) was utilized as the instrument for the qualitative data collection

The total number of the survey respondents was hundred (100), thirty-two (32) respondents from Joint National Association of People with Disabilities (JONAPWD) Enugu, thirty (30) respondents were from Government Secondary School for Deaf Ogbete, Enugu (GSSFD), twenty-seven (27) respondents were from Special Education Centre for Blind Girls (SECBG) Oji River and eleven (11) respondents were from Special Education Centre for Blind Women (SECBW) Oji River. For the FGDs there were 20 participants that were purposively selected, 10 from JONAPWD and 10 from SECBW Oji River.

Key findings cover respondents' knowledge about reproductive health and rights and sexual health and rights and related issues. Knowledge about reproductive health and rights examined include distinction between sex and gender; effects of people's perception of sex/ gender on lifestyles of males and females; understanding of reproduction, human rights, good health, and reproductive health; concerns of women with disability about child bearing; and health problems that could result from inability of women and girls to maintain their reproductive rights. Information on knowledge about sexual health and rights covered understanding of sexual health, sexual rights, and sexual abuse; awareness of actions being taken at international, national and state levels to stop cultural practices that prevent women and girls with disabilities from attaining the highest standard of sexual and reproductive health and rights; and what should be done to enable women and girls with disabilities attain the highest standard of sexual and reproductive health and rights.

Suggestions by participants on what should be done for women and girls with disabilities to attain the highest standard of sexual and reproductive health and rights include providing women and girls appropriate

information on SRHR; that those with disability should endeavor to be independent; cases of abuse or infringement of rights reported should be treated seriously; efforts to be made to create awareness about needs and rights of people with disabilities (PWDs) by women's groups, Non-Governmental organizations (NGOs), Churches, and media and community members; provision of employment for PWDs; government and parents to provide for special needs of PWDs; groups of PWDs to make efforts to support each other; and that community leaders should provide financial support for PWDs.

1. INTRODUCTION

This report is based on responses from young girls and women with disabilities in Enugu state who participated in a baseline study of women and girls with disabilities in Enugu state. The objective of the study is to obtain baseline information on the level of awareness of young girls and women on the sexual reproductive health and rights (SRHR) of females with disabilities. Such information is expected to be used for advocacy and policy engagement by Women Information Network (WINET), with the goal of increasing awareness of Sexual Reproductive and Health Rights (SRHR) among women and girls with disabilities as a human right.

2. METHODS

The design of the study was a mixed method comprising quantitative survey and qualitative methodologies. For the quantitative survey method questionnaire was utilized as the instrument for data collection while Focus Group Discussion (FGD) was utilized as the instrument for the qualitative data collection. The study was undertaken at Enugu and Oji River, both in Enugu State, Nigeria. The sample size of one hundred for survey respondents (100) was predetermined in the proposal and was approved by the funders. Thirty-two (32) respondents were selected from Joint National Association of People with Disabilities (JONAPWD), thirty (30) respondents were from Government Secondary School for Deaf Ogbete, Enugu (GSSFD), twenty-seven (27) respondents were from Special Education Centre (Blind Girls) (SECBG) and eleven (11) respondents were from Special Education Centre (Blind Women) (SECBW). For the FGDs there were twenty (20) participants that were purposively selected, ten (10) from JONAPWD and ten (10) from SECBW Oji River.

Ten data enumerators, two per institution and two for administration of the FGDs were selected by WINET and invited for a one-day training workshop facilitated by the consultant in WINET's office. The objective of the study as well as the modalities for conducting the research were

discussed. The questionnaire items as well as the question guide for the FGDs were explained and the enumerators' understanding of the questions and ability to use the instruments were assessed through role plays. During the conduct of the survey, the questionnaires were other administered on account of the disabilities of the participants. For the FGDs, the consent of the participants was sought before the interviews were conducted and they were assured that their responses would be anonymized.

Analysis of the survey questionnaire data was facilitated using statistical package for social sciences (SPSS 25.0) software. The results are presented in table of frequencies and percentages and charts in order to draw inferences from the study. On the other hand, the two FGDs were transcribed verbatim, and analyzed manually and thematically using content analysis.

3. RESULTS

3.1. Demographic Characteristics

3.1.1. Location of Institutions/Associations of survey respondents

Participants for the survey were selected from four categories of institutions for people with disabilities at Enugu and Oji River of Enugu state. They are Joint Association of People with Disabilities (JONAPWD), Enugu, 32%; Government Secondary School for Deaf Ogbete, Enugu (GSSFD) 30%; Special Education Centre for Blind Girls (SECBG), Oji River 27%; and Special Education Centre for Blind Women (SECBW), Oji River, 11% (see Table 1).

Table 1: Distribution of survey respondents by Institutions/Associations and Locations

| | | | Locations | | Total |
|------------------------------|---------|---|-----------|-----------|-------|
| | | | Enugu | Oji river | |
| Institutions/ Association | JONAPWD | f | 32 | - | 32 |
| | | % | 100.0 | - | 100.0 |
| | GSSFD | f | 30 | - | 30 |
| | | % | 100.0 | - | 100.0 |
| | SECBG | f | - | 27 | 27 |
| | | % | - | 100.0 | 100.0 |
| | SECBW | f | - | 11 | 11 |
| | | % | - | 100.0 | 100.0 |
| Total | | f | 62 | 38 | 100 |
| | | % | 62.0 | 38.0 | 100.0 |

Source: Field data

3.1.2. Sex of the respondents

All the respondents both for the survey and qualitative methods using were female

3.1.3. Age Distribution of survey Respondents

The distribution of respondents by age of survey respondents ranged between 10 and 60 years. Table 2 displays the age distribution of survey respondents. With JONAPWD, 8 (25.0%) of the respondents were 10 – 18 years, 6 (18.8%) of the respondents were 19 – 30 years and 18 (56.3%) of the respondents were 31 – 60 years. Among the 30 GSSFD respondents, 24 (80.0%) of the respondents were 10 – 18 years, 2 (6.7%) of the respondents were 19 – 30 years and 4 (13.3%) of the respondents were 31 – 60 years. From the 27 SECBG, 24 (88.9%) of the respondents were 10 – 18 years, 3 (11.1%) of the respondents were 19 – 30 years and 0 (0.0%) of the respondents were 31 – 60 years. Also, for the 11 SECBW, 1 (9.0%) of the respondents were 10 – 18 years, 5 (45.5%) of the respondents were 19 – 30 years and another 5 (45.5%) of the respondents were 31 – 60 years. In all, 57% of the respondents were 10 – 18 years, 16% were 19 – 30 years and 27% were 31 – 60 years.

Table 2: Distribution of survey respondents by age

| | | | Age | | | Total |
|------------------------------|---------|---|---------|---------|---------|-------|
| | | | 10 - 18 | 19 - 30 | 31 - 60 | |
| Institutions/ Association | JONAPWD | f | 8 | 6 | 18 | 32 |
| | | % | 25.0 | 18.8 | 56.3 | 100.0 |
| | GSSFD | f | 24 | 2 | 4 | 30 |
| | | % | 80.0 | 6.7 | 13.3 | 100.0 |
| | SECBG | f | 24 | 3 | 0 | 27 |
| | | % | 88.9 | 11.1 | 0.0 | 100.0 |
| | SECBW | f | 1 | 5 | 5 | 11 |
| | | % | 9.0 | 45.5 | 45.5 | 100.0 |
| Total | | f | 57 | 16 | 27 | 100 |
| | | % | 57.0 | 16.0 | 27.0 | 100.0 |

Source: Field data

3.1.4. Distribution of survey respondents by educational attainment

Out of the JONAPWD respondents, 7 (21.9%) of the respondents had no education, 5 (15.6%) had primary education attempted, 4(12.5%) had secondary education attempted, 6(18.8%) had secondary education completed, 1(3.1%) had National Certificate of Education (NCE), 2(6.3%) had Ordinary National Diploma (OND), 4(12.5%) had Higher National Diploma (HND) and 3(9.4%) had University degree. All the 30 GSSFD respondents are students in secondary school. Among the 27 SECBG respondents, 25(92.6%) had primary education attempted, 1(3.7%) was a student in secondary school and another 1(3.7%) had secondary education completed. Also from the 11 SECBW respondents, 1 (9.1%) of the respondents had no education, 5(45.5%) had primary education attempted, 1(9.1%) had secondary education attempted, 2(18.2%) had NCE, 1(9.1%) had OND and 1(9.1%) had University degree. In the overall, 8 (8.0%) of the respondents had no education, 35(35.0%) had primary education attempted, 5(5.0%) had secondary education attempted, 31(31.0%) were students in secondary school, 7(7.0%) had secondary education completed, 3(3.0%) had NCE, 3(3.0%) had OND, 4(4.0%) had HND and 4(4.0%) had University degree. The information is presented in table 3 below.

Table 3: Distribution of survey respondents by higher educational attainment

| | | | Higher Education Attainment | | | | | | | | | Total |
|-------------------------------|---------|---|-----------------------------|-----------------------------|-------------------------------|-----------------------------|-----------------------------------|------|-----|------|-------------------|-------|
| | | | No education | Primary education attempted | Secondary education attempted | Student in secondary school | Secondary school completed (SSCE) | NCE | OND | HND | University degree | Total |
| Institutions/ Associations | JONAPWD | f | 7 | 5 | 4 | 0 | 6 | 1 | 2 | 4 | 3 | 32 |
| | | % | 21.9 | 15.6 | 12.5 | 0.0 | 18.8 | 3.1 | 6.3 | 12.5 | 9.4 | 100.0 |
| | GSSFD | f | 0 | 0 | 0 | 30 | 0 | 0 | 0 | 0 | 0 | 30 |
| | | % | 0.0 | 0.0 | 0.0 | 100.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 100.0 |
| | SECBG | f | 0 | 25 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 27 |
| | | % | 0.0 | 92.6 | 0.0 | 3.7 | 3.7 | 0.0 | 0.0 | 0.0 | 0.0 | 100.0 |
| | SECBW | f | 1 | 5 | 1 | 0 | 0 | 2 | 1 | 0 | 1 | 11 |
| | | % | 9.1 | 45.5 | 9.1 | 0.0 | 0.0 | 18.2 | 9.1 | 0.0 | 9.1 | 100.0 |
| Total | | | f | 8 | 35 | 5 | 31 | 7 | 3 | 3 | 4 | 100 |
| | | | % | 8.0 | 35.0 | 5.0 | 31.0 | 7.0 | 3.0 | 3.0 | 4.0 | 100.0 |

Source: Field data

3.1.5. Education and occupation of FGD respondents

From the ten FGD participants at JONAPWD, three, 30.0% had secondary school education, one, 10.0% had Ordinary National Diploma (OND), four 40.0% had Higher National Diploma (HND) while two 20.0% had university degrees. Among those from SECBW, four have secondary school education, two had OND, one had HND, while three had university degrees. With reference to their occupation, out of the ten participants from JONAPWD, one, 10.0% was a student, six, 60.0% were public servants, one, 10.0 % carried out business, while two 20.0% were unemployed. Among the participants from SECBW, four 40.0% were students, while the other 6, 60.0% were public servants (see Table 4)

Table 4: Distribution of FGD Participants by Education and Occupation

| Institution/Association | No | Education | | | | | Occupation | | | | Total |
|-------------------------|------|------------|------------|------------|------------|-----------|----------------|-----------------------|-----------------|-------------------|-------|
| | | <u>Sec</u> | <u>OND</u> | <u>NCE</u> | <u>HND</u> | <u>BS</u> | <u>Student</u> | <u>Public servant</u> | <u>Business</u> | <u>Unemployed</u> | |
| JONAPWD | 10 | 3 | 1 | - | 4 | 2 | 1 | 6 | 1 | 2 | 10 |
| Total | 10 | 3 | 1 | - | 4 | 2 | 1 | 6 | 1 | 2 | 10 |
| | 100% | 30% | 10% | | 40% | 20% | 10% | 60% | 10% | 20% | 100% |
| SECBW | 10 | 4 | - | 2 | 1 | 3 | 4 | 6 | - | - | 10 |
| Total | 10 | 4 | - | 2 | 1 | 3 | 4 | 6 | - | - | 10 |
| | 100% | 40% | | 20% | 10% | 30% | 40% | 60% | | | 100% |

Source: Field data

3.2 Issues related to disabilities of the survey respondents

3.2.1. Seeing difficulty

Table 5 shows the responses of survey respondents on difficulty they experience with seeing, even if wearing glasses. Among the JONAPWD, twenty-three (23) of the respondents (71.9%) had no

difficulty with seeing, even if wearing glasses, four (4) of the respondents (12.5%) had some difficulty and five (5) of the respondents (15.6%) cannot do it at all. For participants from GSSFD, twenty-eight (28) of them (93.3%) had no difficulty with seeing, even if wearing glasses, and only two (2) of the respondents (12.5%) had some difficulty doing so. For respondents at SECBG, none had difficulty, three (3) of the respondents (11.1%) had some difficulty, seventeen (17) of the respondents (63.0%) had a lot of difficulty and seven (7) of them (25.9%) cannot do it all. Also with SECBW, five (5) of the respondents (45.5%) had a lot of difficulty and six (6) of them (54.5%) cannot do it all. In all, 51% had no difficulty, 9% had some difficulty, 22% had a lot of difficulty while 18% cannot do it all.

Table 5: Responses of survey respondents on difficulty experienced with seeing, even if wearing glasses

| | | | Responses | | | | Total |
|------------------------------|---------|---|-------------------|----------------------|--------------------------|---------------------|-------|
| | | | No, no difficulty | Yes, some difficulty | Yes, a lot of difficulty | Cannot do it at all | |
| Institutions/ Association | JONAPWD | f | 23 | 4 | 0 | 5 | 32 |
| | | % | 71.9 | 12.5 | 0.0 | 15.6 | 100.0 |
| | GSSFD | f | 28 | 2 | 0 | 0 | 30 |
| | | % | 93.3 | 6.7 | 0.0 | 0.0 | 100.0 |
| | SECBG | f | 0 | 3 | 17 | 7 | 27 |
| | | % | 0.0 | 11.1 | 63.0 | 25.9 | 100.0 |
| | SECBW | f | 0 | 0 | 5 | 6 | 11 |
| | | % | 0.0 | 0.0 | 45.5 | 54.5 | 100.0 |
| Total | | f | 51 | 9 | 22 | 18 | 100 |
| | | % | 51.0 | 9.0 | 22.0 | 18.0 | 100.0 |

Source: Field data

3.2.2. Hearing difficulty

Table 6 below shows the responses of survey respondents on difficulty they experience with hearing, even if using a hearing aid. Among the thirty-two (32) JONAPWD respondents, twenty-five (25) respondents (78.1%) had no difficulty with hearing, four (4) of the respondents (12.5%)

had some difficulty, two (2) of the respondents (6.3%) had a lot of difficulty and only one (1) out of the respondents (3.1%) cannot do it at all. For the thirty (30) GSSFD respondents, fourteen (14) of the them (46.7%) had no difficulty with hearing, six (6) of them (20.0%) had some difficulty, four (4) of the respondents (13.3%) had a lot of difficulty and six (6) of the respondents (20.0%) cannot do it all. Among the twenty-seven (27) SECBG respondents, fifteen (15) of them (55.6%) had no difficulty with hearing, only one (1) out of the respondents (3.7%) had some difficulty, three (3) of the respondents (11.1%) had a lot of difficulty and eight (8) of the respondents (29.6%) cannot do it all. Also with eleven (11) SECBW respondents, five (5) of the respondents (45.5%) had no difficulty with hearing, two (2) of the respondents (18.2%) had a lot of difficulties and four (4) of the respondents (36.4%) cannot do it all. In all, 59% had no difficulty, 11% had some difficulty, 11% had a lot of difficulty while 19% cannot do it all.

Table 6: Responses of survey respondents on difficulty experienced with hearing, even if using a hearing aid

Using a hearing aid

| | | | Responses | | | | Total |
|------------------------------|---------|---|-------------------|----------------------|--------------------------|---------------------|-------|
| | | | No, no difficulty | Yes, some difficulty | Yes, a lot of difficulty | Cannot do it at all | |
| Institutions/ Association | JONAPWD | f | 25 | 4 | 2 | 1 | 32 |
| | | % | 78.1 | 12.5 | 6.3 | 3.1 | 100.0 |
| | GSSFD | f | 14 | 6 | 4 | 6 | 30 |
| | | % | 46.7 | 20.0 | 13.3 | 20.0 | 100.0 |
| | SECBG | f | 15 | 1 | 3 | 8 | 27 |
| | | % | 55.6 | 3.7 | 11.1 | 29.6 | 100.0 |
| | SECBW | f | 5 | 0 | 2 | 4 | 11 |
| | | % | 45.5 | 0.0 | 18.2 | 36.4 | 100.0 |
| Total | | f | 59 | 11 | 11 | 19 | 100 |
| | | % | 59.0 | 11.0 | 11.0 | 19.0 | 100.0 |

Source Field data

3.2.3. Walking or climbing difficulty:

In Table 7 are the responses of survey respondents on difficulty they experience with walking or climbing steps. Out of the thirty-two (32) JONAPWD respondents, twelve (12) of them (37.5%)

had no difficulty, eight (8) of the respondents (25.0%) had some difficulty, one (1) of the respondents (3.1%) had a lot of difficulty and two (2) of the respondents (6.2%) cannot do it at all. Out of the thirty (30) GSSFD respondents, twenty-six (26) of them (86.7%) had no difficulty, two (2) of the respondents (6.7 %) had some difficulty, only one (1) of the respondents (3.3%) had a lot of difficulty and another one (1) (3.3%) cannot do it all. With SECBG, only one (1) of the respondents (3.7%) had no difficulty, seven (7) of the respondents (25.9%) had some difficulty and nineteen (19) of the respondents (70.4%) had a lot of difficulty. Also with SECBW, five (5) of the respondents (45.5%) had no difficulty, four (4) of the respondents (36.4%) had some difficulty and two (2) of the respondents (18.2%) had a lot of difficulty. In all, 44% had no difficulty, 21% had some difficulty, 30% had a lot of difficulty while 5% cannot do it all.

Table 7: Responses of survey respondents on difficulty experienced with walking/ climbing steps

Steps

| | | | Responses | | | | Total |
|------------------------------|---------|---|-------------------|----------------------|--------------------------|---------------------|-------|
| | | | No, no difficulty | Yes, some difficulty | Yes, a lot of difficulty | Cannot do it at all | |
| Institutions/ Association | JONAPWD | f | 12 | 8 | 8 | 4 | 32 |
| | | % | 37.5 | 25.0 | 25.0 | 12.5 | 100.0 |
| | GSSFD | f | 26 | 2 | 1 | 1 | 30 |
| | | % | 86.7 | 6.7 | 3.3 | 3.3 | 100.0 |
| | SECBG | f | 1 | 7 | 19 | 0 | 27 |
| | | % | 3.7 | 25.9 | 70.4 | 0.0 | 100.0 |
| | SECBW | f | 5 | 4 | 2 | 0 | 11 |
| | | % | 45.5 | 36.4 | 18.2 | 0.0 | 100.0 |
| Total | | f | 44 | 21 | 30 | 5 | 100 |
| | | % | 44.0 | 21.0 | 30.0 | 5.0 | 100.0 |

Source: Field Data

3.2.4. Remembering or concentration difficulty

The responses on difficulty survey respondents had with remembering and concentration are presented in Table 8. Out of the thirty-two (32) JONAPWD respondents, nineteen (19) of them

(59.4%) had no difficulty, ten (10) of the respondents (31.3%) had some difficulty, one (1) of the respondents (3.1%) had a lot of difficulty and two (2) of the respondents (6.2%) cannot do it at all. Out of the thirty (30) GSSFD respondents, five (5) of the respondents (16.7%) had no difficulty, twenty-two (22) of the respondents (77.3 %) had some difficulty, only one (1) of the respondents (3.3%) had a lot of difficulty and two (2) of the respondents (6.7%) cannot do it all. With SECBG, fifteen (15) of the respondents (55.6%) had no difficulty, six (6) of the respondents (22.2%) had some difficulty and another six (6) of the respondents (22.2%) had a lot of difficulty. Also with SECBW, five (5) of the respondents (45.5%) had no difficulty, three (3) of the respondents (27.3%) had some difficulty and another three (3) of the respondents (18.2%) had a lot of difficulty. In all, 44% had no difficulty, 41% had some difficulty, 11% had a lot of difficulty while 4% cannot do it all.

Table 8: Responses of survey respondents on difficulty had with remembering and concentration

| | | | Responses | | | | Total |
|------------------------------|---------|---|-------------------|----------------------|--------------------------|---------------------|-------|
| | | | No, no difficulty | Yes, some difficulty | Yes, a lot of difficulty | Cannot do it at all | |
| Institutions/ Association | JONAPWD | f | 19 | 10 | 1 | 2 | 32 |
| | | % | 59.4 | 31.3 | 3.1 | 6.3 | 100.0 |
| | GSSFD | f | 5 | 22 | 1 | 2 | 30 |
| | | % | 16.7 | 73.3 | 3.3 | 6.7 | 100.0 |
| | SECBG | f | 15 | 6 | 6 | 0 | 27 |
| | | % | 55.6 | 22.2 | 22.2 | 0.0 | 100.0 |
| | SECBW | f | 5 | 3 | 3 | 0 | 11 |
| | | % | 45.5 | 27.3 | 27.3 | 0.0 | 100.0 |
| Total | | f | 44 | 41 | 11 | 4 | 100 |
| | | % | 44.0 | 41.0 | 11.0 | 4.0 | 100.0 |

Source: Field Data

3.2.5. Washing or dressing difficulty:

Table 9 shows the responses of survey respondents on difficulty they experienced with washing all over or dressing. Among the thirty-two (32) JONAPWD respondents, twenty-two (22) of the respondents (68.8%) had no difficulty, five (5) of the respondents (15.6%) had some difficulty,

three (3) of the respondents (9.4%) had a lot of difficulty and two (2) out of the respondent (6.3%) cannot do it at all. For the thirty (30) GSSFD respondents, twenty-six (26) of the respondents (86.7%) had no difficulty, two (2) of the respondents (6.7%) had some difficulty, one (1) of the respondents (3.3%) had a lot of difficulty and one (1) of the respondents (3.3%) cannot do it all. From the twenty-seven (27) SECBG respondents, three (3) of the respondents (11.1%) had no difficulty, eight (8) out of the respondents (29.6%) had some difficulty, sixteen (16) of the respondents (59.3%) had a lot of difficulty and none of the respondents cannot do it all. Also with eleven (11) SECBW respondents, eight (8) of the respondents (72.7%) had no difficulty, three (3) of the respondents (27.3%) had a lot of difficulty and none of the respondents cannot do it all. In all, 59% had no difficulty, 15% had some difficulty, 23% had a lot of difficulty while 3% cannot do it all.

Table 9: Responses of survey respondents on difficulty experience with washing all over or dressing

Processing

| | | | Responses | | | | Total |
|------------------------------|---------|---|-------------------|----------------------|--------------------------|---------------------|-------|
| | | | No, no difficulty | Yes, some difficulty | Yes, a lot of difficulty | Cannot do it at all | |
| Institutions/ Association | JONAPWD | f | 22 | 5 | 3 | 2 | 32 |
| | | % | 68.8 | 15.6 | 9.4 | 6.3 | 100.0 |
| | GSSFD | f | 26 | 2 | 1 | 1 | 30 |
| | | % | 86.7 | 6.7 | 3.3 | 3.3 | 100.0 |
| | SECBG | f | 3 | 8 | 16 | 0 | 27 |
| | | % | 11.1 | 29.6 | 59.3 | 0.0 | 100.0 |
| | SECBW | f | 8 | 0 | 3 | 0 | 11 |
| | | % | 72.7 | 0.0 | 27.3 | 0.0 | 100.0 |
| Total | | f | 59 | 15 | 23 | 3 | 100 |
| | | % | 59.0 | 15.0 | 23.0 | 3.0 | 100.0 |

Source: Field Data

3.2.6. Communication difficulty

The responses of survey respondents on difficulty had with communication are presented in Table 10. Out of the thirty-two (32) JONAPWD respondents, twenty-eight (28) of them (87.5%) had no difficulty, three (3) of the respondents (9.4%) had some difficulty, one (1) of the respondents

(3.1%) had a lot of difficulty and none of the respondents cannot do it at all. For the thirty (30) GSSFD respondents, seventeen (17) of the respondents (56.7%) had no difficulty, eight (8) of the respondents (26.7%) had some difficulty, three (3) of the respondents (10.0%) had a lot of difficulty and two (2) of the respondents (6.6%) cannot do it all. From the twenty-seven (27) SECBG respondents, thirteen (13) of the respondents (48.1%) had no difficulty, while fourteen (14) out of the respondents (51.9%) had some difficulty. Also with eleven (11) SECBW respondents, ten (10) of the respondents (90.9%) had no difficulty, while one (1) of the respondents (9.1%) had a lot of difficulty. In all, 68% had no difficulty, 25% had some difficulty, 5% had a lot of difficulty while 2% cannot do it all.

Table 10: Responses of survey respondents on difficulty experienced with communication

| | | | Responses | | | | Total |
|------------------------------|---------|---|-------------------|----------------------|--------------------------|---------------------|-------|
| | | | No, no difficulty | Yes, some difficulty | Yes, a lot of difficulty | Cannot do it at all | |
| Institutions/ Association | JONAPWD | f | 28 | 3 | 1 | 0 | 32 |
| | | % | 87.5 | 9.4 | 3.1 | 0.0 | 100.0 |
| | GSSFD | f | 17 | 8 | 3 | 2 | 30 |
| | | % | 56.7 | 26.7 | 10.0 | 6.7 | 100.0 |
| | SECBG | f | 13 | 14 | 0 | 0 | 27 |
| | | % | 48.1 | 51.9 | 0.0 | 0.0 | 100.0 |
| | SECBW | f | 10 | 0 | 1 | 0 | 11 |
| | | % | 90.9 | 0.0 | 9.1 | 0.0 | 100.0 |
| Total | | f | 68 | 25 | 5 | 2 | 100 |
| | | % | 68.0 | 25.0 | 5.0 | 2.0 | 100.0 |

Source: Field Data

3.3. Knowledge about sexual reproductive health and rights

3.3.1. Understanding of survey respondents of the concept of gender:

Table 11 and Fig. 1 display frequencies and percentages of survey respondents that responded and those that did not respond to the understanding of the concept of gender. Out of JONAPWD, 31 (96.9%) of the respondents responded while only 1 (3.1%) did not respond. All the GSSFD

respondents responded. From SECBG, 16 (59.3%) of the respondents responded while 11 (40.7%) did not respond. Also all the SECBW respondents reported what they understand by the concept of gender. In general, 88% of the respondents responded while 12% did not respond.

Table 11: Distribution of Survey respondents that responded to awareness of the concept of gender

| | | | Responses | | total |
|-------------------------------|---------|---|-----------|-----------------|-------|
| | | | responded | did not respond | |
| Institutions/ Associations | JONAPWD | f | 31 | 1 | 32 |
| | | % | 96.9 | 3.1 | 100.0 |
| | GSSFD | f | 30 | 0 | 30 |
| | | % | 100.0 | 0.0 | 100.0 |
| | SECBG | f | 16 | 11 | 27 |
| | | % | 59.3 | 40.7 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 88 | 12 | 100 |
| | | % | 88.0 | 12.0 | 100.0 |

Source: Field Data

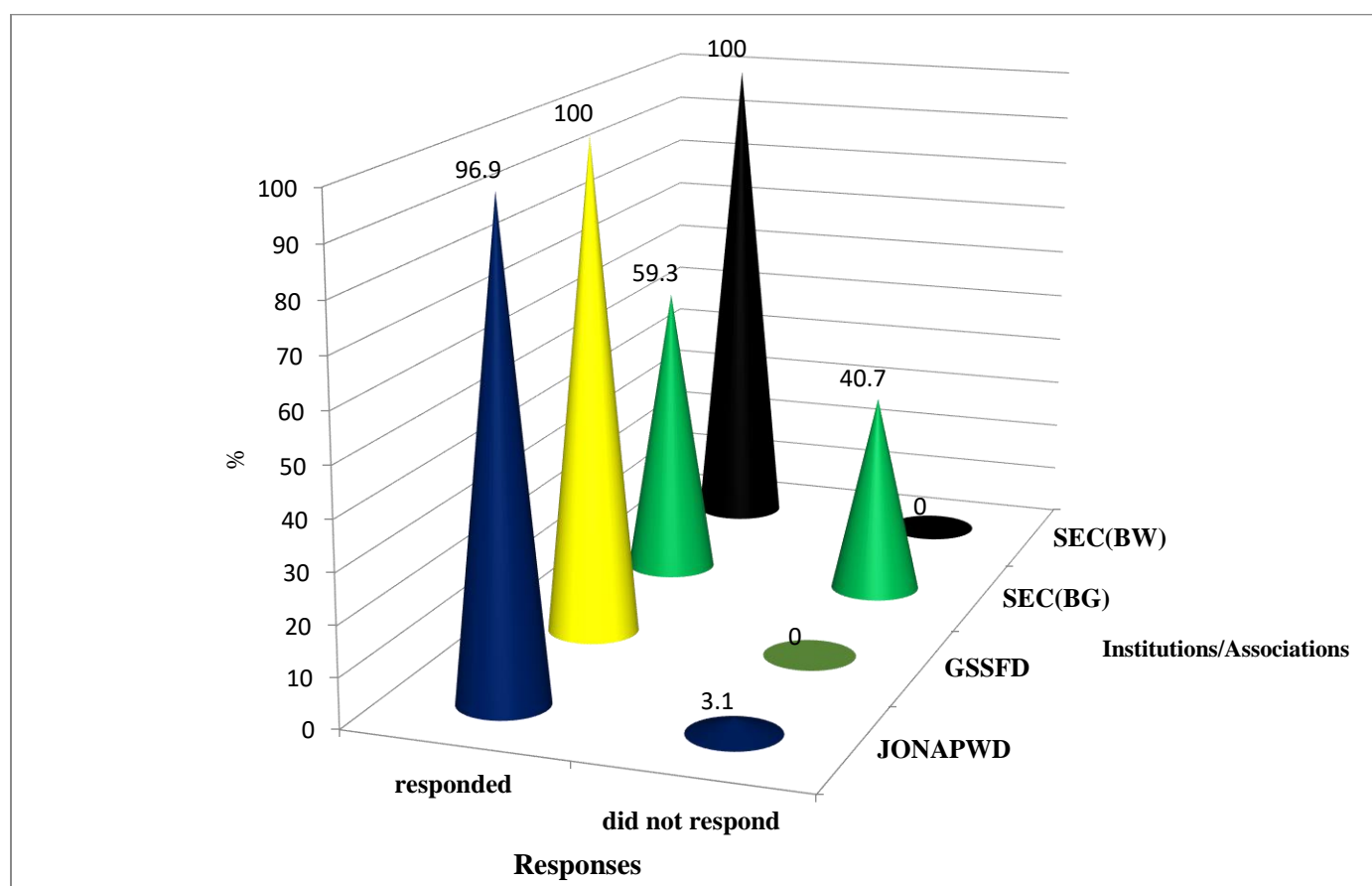


Fig.1: Survey respondents that responded to awareness of the concept of gender

Survey responses are presented as follow:

For JONAPWD, 31 out of the 32 respondents indicated as follows;

- *It means the difference between a man and woman (25.8%).*
- *It is the state of being male or female in relation to the social and cultural role (9.7%).*
- *Gender is the division of people into male and female category (64.5%).*

For GSSFD, all the 30 respondents indicated that,

- *It is what makes a girl different from a boy (100%).*

For SECBG, all the 27 respondents;

- *It is about male or female (81.5%).*
- *Things which differentiate a woman from a man (18.5%).*

For SECBW, all the 11 respondents,

- *It is about male and female activities (9.1%).*
- *Those things that show that one is a man or a woman e.g. women breastfeed their children (90.9%).*

3.3.2. Differences between sex and gender

FGD participants were asked their views on the differences between sex and gender. Their responses are presented as follow:

- i) Gender refers to differences between male and female
- ii) Men are stronger than women
- iii) Males are valued more than females
- iv) Males have different tasks from females

FGD participants expressed their perception of sex to include the following;

- i) Sex refers to differences between male and female
- ii) Sex refers to sexual intercourse
- iii) Physiological differences

“Sex is sexual intercourse while gender is discrimination; that is male or female. Sex is if a woman wants sexual intercourse and she is denied or a man wants it and he is denied” P7 FGD JONAPWD

“Gender is about man or woman in fact the white man and dictionary are confusing us with the meaning of sex and Gender. Sex is organ. Gender is either a man or a woman”. P1 FGD JONAPWD

“The difference is that men have sperm and women do not”. P8 FGD, Blind Women at Oji:

“Men do not have breast while female have breast”. P4 FGD, Blind Women at Oji:

“What is gender- Man is strong, man have bears, woman do not, Male have penis, Women have vagina”. P1 FGD, Blind Women at Oji:

“Man is strong, Woman bear children, Man do not. Men sew yam and Women do not”. P2 FGD, Blind Women at Oji:

“Family value male children and female are not valued”. P9 FGD, Blind Women at Oji:

“Men fend for their family, Males defend their families because women are weak, male demand for sex and women do not demand that. Male do climb palm trees while women do not do that” P10, FGD, Blind Women at Oji:

“What forms gender is what is in your body that makes you a man or a woman, example vagina, penis, breast, hair”. P6 FGD JONAPWD

3.3.3. Effects of people’s perception of sex/ gender on lifestyles of males and females

Information on respondents’ perception of effects of sex/ gender on lifestyles of males and females are presented as follow:

- i) Women are more home oriented than men
- ii) Men assume greater responsibilities at home than women.
- iii) Males endure painful experiences more than females
- iv) Females undertake domestic chores
- v) Females are more humble
- vi) Females are more restrained

“Men are stronger in bone than women”. P1 FGD JONAPWD

“Women are homelier than men. Men just go out and if they see drink they are ok but a woman cares for all”. P2 FGD JONAPWD

“Men carry more responsibility in the home than women”. P4 FGD JONAPWD

“Men have strong heart than women... A man can endure and cover pain of death till the right time to announce it but a woman will just shout it out” P8 FGD JONAPWD.

“Women take care of the house; cook for the family, bath kids and other domestic chores in the home” P10 FGD JONAPWD

“Men can urinate anywhere but a woman will look for a hidden place to urinate”. P5 FGD JONAPWD

3.3.4. Effects of people’s perception of sex/gender on health outcome

Data on effects of people’s perception of sex and gender on health outcomes were also obtained from FGD participants. They are presented below as follow:

- i) Men do not disclose their sickness as women
- ii) Menstrual flow provides therapeutic healing of infections for females
- iii) Infections manifest more in women than men
- iv) In old age women are healthier than men
- v) Life style affects health outcome for both genders

“A man can hide sickness in his body longer than a woman” P1 FGD JONAPWD.

“Infection manifests faster in a woman unlike in a man” P10 FGD JONAPWD

“Infection condemns an infected man faster than a woman because a woman menstruates unlike men that only discharges sperm”. P3 FGD JONAPWD

“As a woman our body is more open than men, so we should be careful with our environment; use clean pants and until you treat infection, menstruation or ovulation cannot cure infection”. P4 FGD JONAPWD

“Everything depends on lifestyle at younger age. Example: Drunkards gets weaker nerves and look older than their age; it does apply to women too. Generally aging depends on good care during youthful stage or bad care”. P5 FGD JONAPWD

“Nature contributes to health issues. Example: Some days ago, I overheard a discussion of a group of women about menopause making women sick due to no menstruation” P6 FGD JONAPWD

3.3.5. Reproduction:

All the 32 survey respondents at JONAPWD had heard about reproduction, 26 (86.7%) of the GSSFD respondents had heard while 4 (13.3%) did not hear, 24 (88.9%) of the SECBG respondents had heard while 3 (11.1%) did not hear and all the 11 SECBW had also heard about reproduction (see Table 12 and Fig. 2).

Table 12: Responses of the respondents about reproduction

| | | | Have you heard about reproduction | | Total |
|---------------------------|---------|---|-----------------------------------|------|-------|
| | | | Yes | No | |
| Institutions/Associations | JONAPWD | f | 32 | 0 | 32 |
| | | % | 100.0 | 0.0 | 100.0 |
| | GSSFD | f | 26 | 4 | 30 |
| | | % | 86.7 | 13.3 | 100.0 |
| | SECBG | f | 24 | 3 | 27 |
| | | % | 88.9 | 11.1 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 93 | 7 | 100 |
| | | % | 93.0 | 7.0 | 100.0 |

Source: Field data

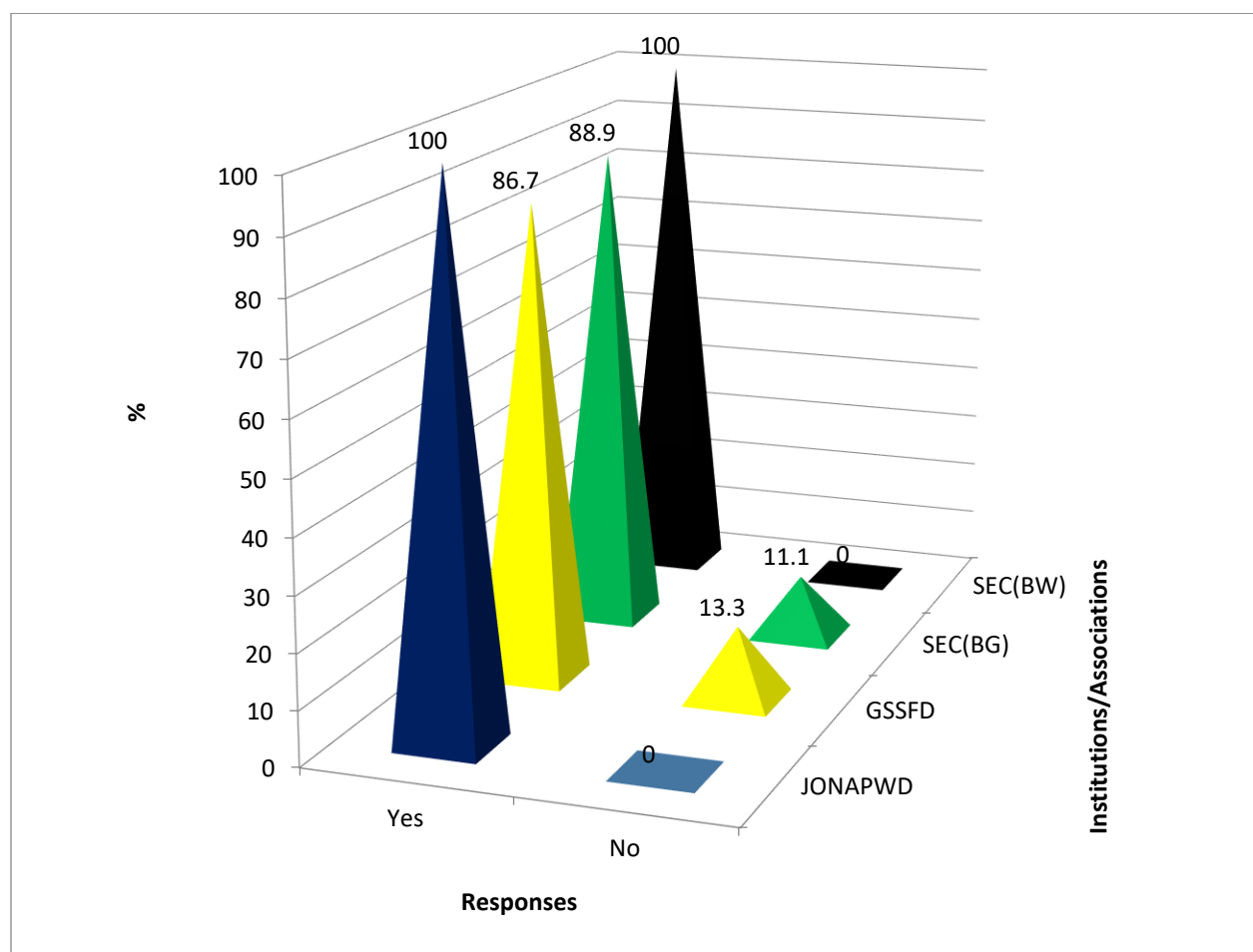


Fig. 2: Responses of the respondents about reproduction

The survey respondents that heard about the reproduction explained as presented below.

JONAPWD (all the 32 respondents)

- *It is a process of procreation by giving birth (34.4%).*
- *It is having children when you want to and number you desire (21.9%).*
- *Reproduction is the act of producing offspring through the means of coming together of the male and female to act as the parent producers (43.8).*

GSSFD (26 of the 30 respondents)

- *Reproduction is act of giving birth to younger ones (100%).*

SECBG (24 of the 27 respondents)

- *Child bearing (33.3%)*
- *To born child (25.0%)*
- *It is a process by which a woman gives birth their children (41.7%)*

SECBW (all the 11 respondents)

- *Having children or giving birth to younger ones (54.5)*
- *Reproduction is about child bearing (27.3%)*
- *It is the ability to get pregnant and give birth to a child (18.2%)*

3.3.6. Human rights

Out of the 32 JONAPWD survey respondents, 28(87.5%) had heard about human rights while 4(12.5%) did not hear, 28 (93.3%) of the GSSFD respondents had heard while 4(13.3%) did not hear, 17(63.0%) of the SECBG respondents had heard while 10(27.0%) did not hear and all the 11 SECBW had heard about human rights (see Table 13 and Fig. 3).

Table 13: Responses of survey respondents about human rights

| | | | Have you heard of human rights? | | Total |
|-------------------------------|---------|---|---------------------------------|------|-------|
| | | | Yes | No | |
| Institutions/ Associations | JONAPWD | f | 28 | 4 | 32 |
| | | % | 87.5 | 12.5 | 100.0 |
| | GSSFD | f | 28 | 2 | 30 |
| | | % | 93.3 | 6.7 | 100.0 |
| | SECBG | f | 17 | 10 | 27 |
| | | % | 63.0 | 37.0 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 84 | 16 | 100 |
| | | % | 84.0 | 16.0 | 100.0 |

Source: Field data

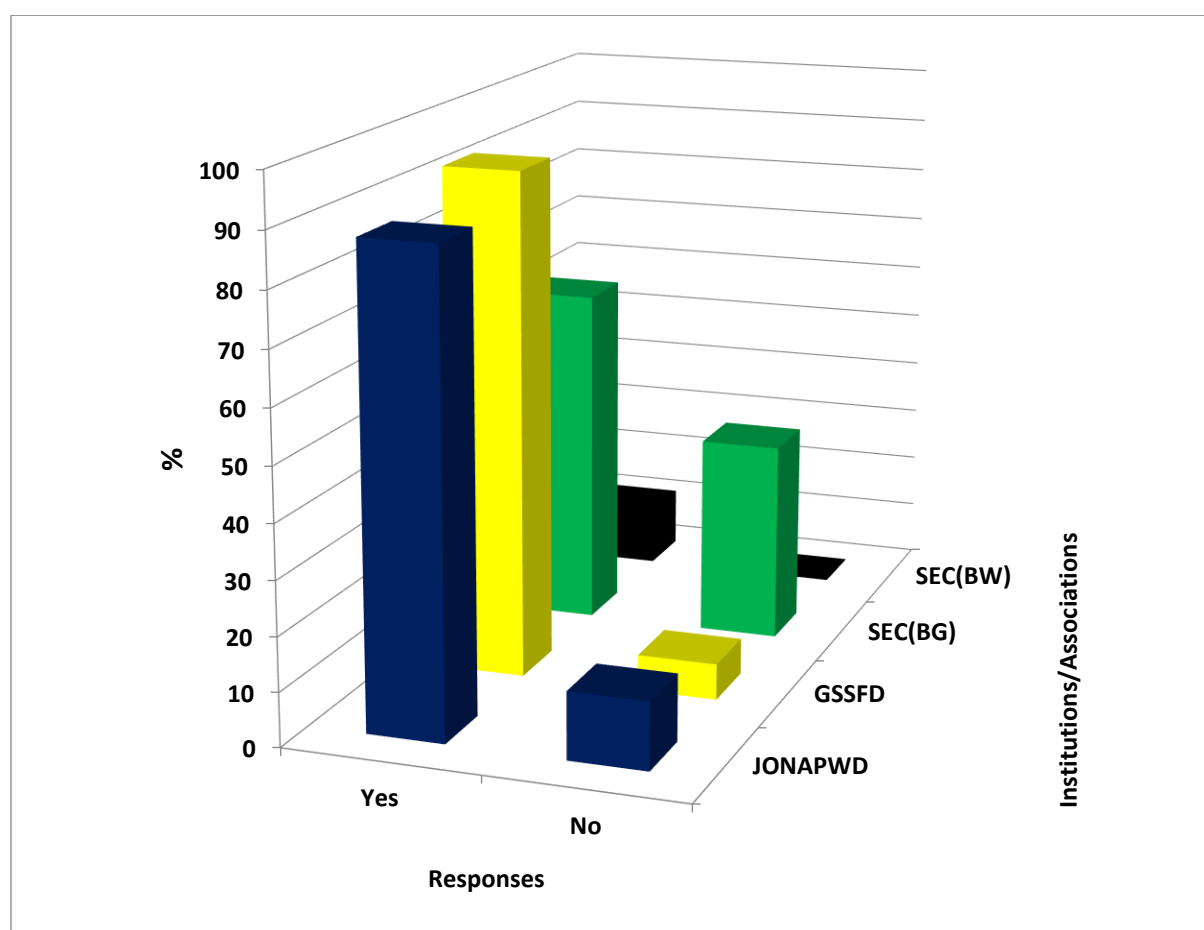


Fig. 3: Responses of survey respondents about human rights

Presented below are what survey respondents explained as human rights.

JONAPWD (28 of the 32 respondents)

- *A right someone has as a person or as human in a society (64.3%).*
- *It is right to do what you want (14.3%).*
- *It is the right I have, like right to life, right to associate, right to vote etc. (10.7%).*
- *It is a right which is believed to belong to every person (7.1%).*
- *Human rights are the basic (legal) rights of human which should be guaranteed (3.6%)*

GSSFD (28 of the 30 respondents)

- *Right of a person as a citizen of a country (100%).*

SECBG (17 of the 27 respondents)

- *My right to do something (52.9%)*
- *It means right human being has to his or herself (35.3%)*
- *People that fight for the poor (5.9%)*
- *It means right someone has as a citizen. (5.9%)*

SECBW (all the 11 respondents)

- *People that care for the poor (9.1%).*
- *It is the power one has as a human being (54.5%).*
- *It is the power we have as citizen e.g. right to live (27.3%).*
- *A right one has to do a legal thing in his society (9.1%).*

Data on perceptions of FGD participants about human rights were obtained and they include the following:

- i) Right to freedom of speech, freedom of worship and to vote
- ii) Liberty to do what one wants in the community
- iii) Freedom of movement
- iv) Right to seek justice
- v) Right to worship

'It is your right to talk, go to church, vote, speak, go where you want to go'. P1 FGD JONAPWD:

Right to say your mind without looking at any body's face, freedom of worship, having boldness P2 FGD JONAPWD:

It is right to sleep when you want to, do what you want, it is eating of yam or any food you like. P9 FGD JONAPWD:

'Human right: The right any individual has in a society. We have right to get immunities in our society or community. We have right to ride, fetch water, participate in anything in the village.' P9 FGD JONAPWD:

'Human Right-is the freedom man has as a human being, e.g. freedom of movement, rights to marry to any tribe, like right to go to court to report to any case'. Participant 10 FGD, Blind Women at Oji:

'Human right is the right to get back your land when someone takes it from you, right to work, right to worship, it is my right to go to any place I like'. P6 FGD, Blind Women at Oji

Data were obtained from FGD participants at JONAPWD on examples of violations of human rights that affect women. They are presented as follow:

- i) Right of husbands to control and sanction their wives
- ii) Denial of right to education
- iii) Denial of sexual freedom
- iv) Denial of right to inheritance of property in the family

"In a family a woman can receive beating from her husband for not cooking on time. A man can come out and say 'I am' the head of this home; so, a woman must take permission from her husband to go out. Example: My aunty asked for permission from her husband to attend a wake-keep but the man hindered her from attending". P7 FGD JONAPWD:

"... A female child can be denied schooling due to limited fund while the family will send the male child to school even in the midst of limited fund. P5 FGD JONAPWD:

In marriage a man cheats but a woman can't and even family (extended family) supports the man but if a woman tries it, she is gone. P5 FGD JONAPWD:

Human Right is at different levels, National, state and Local area. A man can force his wife over sex and be supported by kinsmen except she goes to court. It's only court that supports a woman in rape cases. Example in Enugu-Ezike ... If a woman cheats; she gets mad unlike men that can cheat and go free from the custom P1 FGD JONAPWD:

“... a man can keep late night and the woman rushes to open door but in her case she dares not keep late night because even neighbors will support the man. P10 FGD JONAPWD:

In the family women are more industrious than men and still are denied right to inherit husbands' wealth, and they are also limited at their fathers' families during inheritance sharing. P6 FGD JONAPWD:

3.3.7. Good health:

Out of the 32 JONAPWD survey respondents, 30(93.8%) had heard about good health while 2(6.2%) did not hear, 25 (83.3%) of the GSSFD respondents had heard while 5(16.7%) did not hear, 25(92.6%) of the SECBG respondents had heard while 2(7.4%) did not hear and all the 11 SECBW had heard about good health (see Table 14 and Fig. 4).

Table 14: Response of survey respondents on whether they have heard about the definition of good health

good health

| | | | Have you heard of the definition of good health | | Total |
|-------------------------------|-------------|---|---|------|-------|
| | | | Yes | No | |
| Institutions/ Associations | JONAPW D | f | 30 | 2 | 32 |
| | | % | 93.8 | 6.3 | 100.0 |
| | GSSFD | f | 25 | 5 | 30 |
| | | % | 83.3 | 16.7 | 100.0 |
| | SECBG | f | 25 | 2 | 27 |
| | | % | 92.6 | 7.4 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 91 | 9 | 100 |
| | | % | 91.0 | 9.0 | 100.0 |

Source: Field data

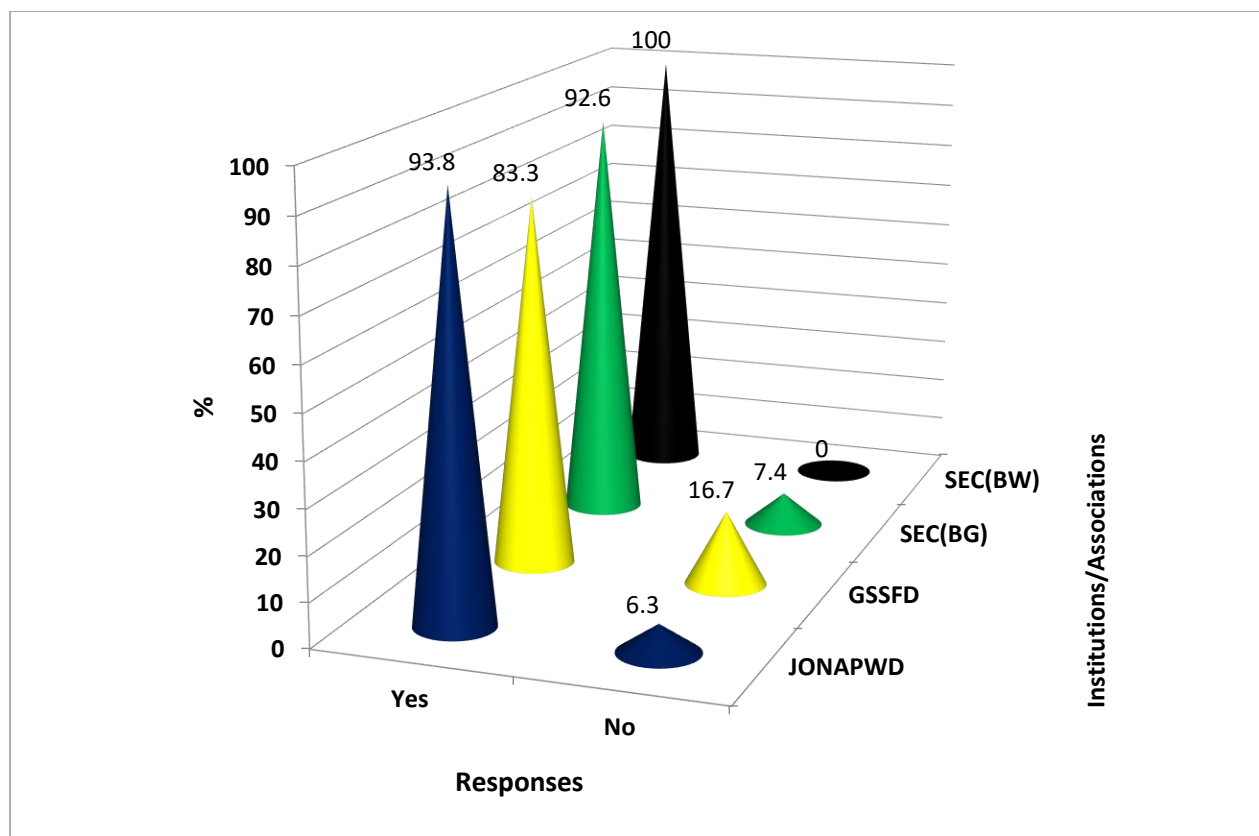


Fig. 4: Responses of survey respondents that have heard about the definition of good health

The respondents in their view explained the definition of good health as:

JONAPWD (30 of the 32 respondents)

- *It means someone living healthy, without sickness (60.0%)*
- *It is a state of being healthy (23.3%)*
- *Good health is a state of complete physically, mental and social well-being (16.7%)*

GSSF (25 of the 30 respondents)

- *Good health is a state of somebody living in good health or good condition (92.0%).*
- *very healthy, no sickness (8.0%)*

SECBG (25 of the 27 respondents)

- *No sickness (52.0%)*
- *when one is healthy (20.0%)*

- *Being healthy all the time (12.0%)*
- *When one does not have health problems and is not disturbed emotionally (16.0%)*

SECBW (all the 11 respondents)

- *When people are healthy (9.1%)*
- *When one is not sick and is not disturbed by emotional problems (90.9%)*

FGD participants also provided responses on their understanding of good health. These are indicated as follow:

- i) No sickness/ infection, and feeling well
- ii) Physical, social and emotional well being
- iii) Ability to carry on regular activities/work
- iv) Eating good food
- v) When one is living in a good Environment.

It's when one is not suffering from any disease.'. P10 FGD, Blind Women at Oji:

It is living without sickness and feeling well P2 FGD JONAPWD:

At least good health is to wake up strong; you are not in the hospital, no serious illness P5 FGD JONAPWD:

State of being healthy P3 FGD, Blind Women at Oji.

Working hard and eating good food. P6 FGD, Blind Women at Oji:

When one is living in a good Environment. **P10** FGD, Blind Women at Oji:

Data on factors that contribute to good health were also obtained from FGD participants. They include the following;

- i) Being able to give birth to healthy children
- ii) Good child spacing

iii) Knowledge of appropriate method of family planning

iv) Seeking adequate health care during pregnancy

v) Couples to bear children when they desire

vi) Intending couples going for screening before marriage

vii) Couples being happy

“It is all about being fit, not having any infection that will disable you from having children”. P1 FGD JONAPWD:

“As a woman, you should take good care of yourself, your body, by not getting pregnant immediately after child birth, give yourself a gap.” P3 FGD JONAPWD

“As a woman, during labour go to hospital for proper care during child delivery”. P9 FGD JONAPWD

“To reproduce young ones, when male and female agree to reproduce”. P9 FGD, Blind Women at Oji

“Having good health, when a man and his wife meet to have sex”. P5 FGD, Blind Women at Oji

“When a man wants to marry, they will go for blood genotype to avoid AA, SS, e.tc.” P7 FGD, Blind Women at Oji

3.3.8. Reproductive health:

Out of the JONAPWD survey respondents, 15(46.9%) had heard about reproductive health while 17(53.1%) did not hear, 25 (83.3%) of the GSSFD respondents had heard while 5(16.7%) did not hear, 6(22.2%) of the SECBG respondents had heard while 21(77.8%) did not hear and all the 11 SECBW had heard about reproductive health (see Table 15 and Fig. 5).

Table 15: Response of the respondents about reproductive health

| | | | Have you heard of reproductive health before | | Total |
|-------------------------------|---------|---|--|------|-------|
| | | | Yes | No | |
| Institutions/ Associations | JONAPWD | f | 15 | 17 | 32 |
| | | % | 46.9 | 53.1 | 100.0 |
| | GSSFD | f | 25 | 5 | 30 |
| | | % | 83.3 | 16.7 | 100.0 |
| | SECBG | f | 6 | 21 | 27 |
| | | % | 22.2 | 77.8 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 57 | 43 | 100 |
| | | % | 57.0 | 43.0 | 100.0 |

Source: Field data

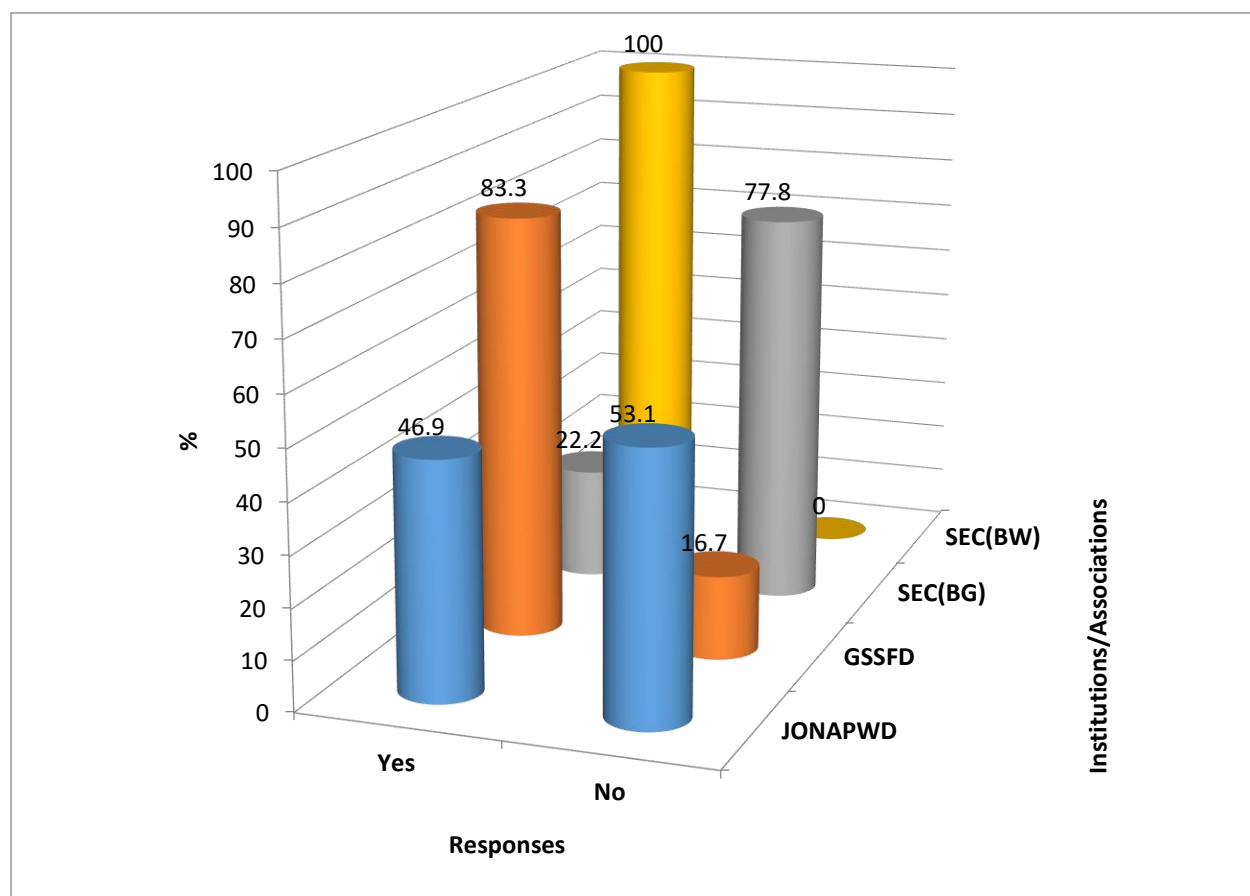


Fig. 5: Response of the respondents about reproductive health

Survey respondents that heard about the reproductive health explained as the concept as presented below.

JONAPWD (15 of the 32 respondents)

- *It is when a woman gives birth without any form of sickness (being healthy during and after child birth) (100%)*

GSSFD (25 of the 30 respondents)

- *Reproductive health is when reproductive organs are in good condition (100%)*

SECBG (6 of the 27 respondents)

- Eating good food, fruit, going to hospital (33.3%)
- Good health for reproduction (66.7%)

SECBW (all the 11 respondents)

- *Good health after birth and also during pregnancy (9.1%)*
- *They are those things that promote good reproductive health (27.3%)*
- *These are the things girls and women should be doing to avoid reproductive problems e.g. information (18.2%)*
- *It means when a woman gives birth safely and safe for future reproduction (27.3)*
- *Knowing about reproductive health e.g. sex education (18.2%)*

Data were obtained from FGD participants on their understanding of reproductive health. Their responses are presented below.

i) Being able to give birth to healthy children

ii) Good child spacing

iii) Knowledge of appropriate method of family planning

iv) Seeking adequate health care during pregnancy

v) Couples to bear children when they desire

vi) Intending couples going for screening before marriage

“It is all about being fit, not having any infection that will disable you from having children”. P1 FGD JONAPWD:

As a woman, during labour go to hospital for proper care during child delivery. P9 FGD JONAPWD

“To reproduce young ones, when male and female agree to reproduce” P9 FGD, Blind Women at Oji.

“When a man wants to marry, they will go for blood genotype to avoid AA, SS, e.tc”. P9 FGD, Blind Women at Oji

FGD participants from JONAPWD also provided responses on their understanding of indicators of reproductive health. They include the following;

i) Ability to conceive and deliver a healthy baby

ii) Exercising during pregnancy

iii) Seeking good medical care during pregnancy

“It is when a woman gets married and conceives immediately, gives birth at 9th month to a healthy baby and she is healthy after the delivery” P8 FGD JONAPWD

“It is engaging in an exercise during pregnancy”. P4 FGD JONAPWD

“...If you see a woman during pregnancy and she is having issues, it is because she doesn't attend good hospital”. P5 FGD JONAPWD

3.3.9. Reproductive health of girls/women:

Table 16 and Fig. 6 display frequencies and percentages of survey respondents that responded and those that did not respond to the understanding of the reproductive health of girls/women. Out of JONAPWD, 28 (87.5%) of the respondents responded while only 4 (12.5%) did not respond. All the GSSFD respondents responded. From SECBG, 23 (85.2%) of the respondents responded while only 4 (14.8%) did not respond. Also all the SECBW respondents responded on what they understand by the reproductive health of girls/women. In general, 92% of the respondents responded while 8% did not respond.

Table 16: Responses on the understanding of the reproductive health of girls/women

| | | | Response | | Total |
|-------------------------------|---------|---|-----------|-----------------|-------|
| | | | responded | Did not respond | |
| Institutions/ Associations | JONAPWD | f | 28 | 4 | 32 |
| | | % | 87.5 | 12.5 | 100.0 |
| | GSSFD | f | 30 | 0 | 30 |
| | | % | 100.0 | 0.0 | 100.0 |
| | SECBG | f | 23 | 4 | 27 |
| | | % | 85.2 | 14.8 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 92 | 8 | 100 |
| | | % | 92.0 | 8.0 | 100.0 |

Source: Field data

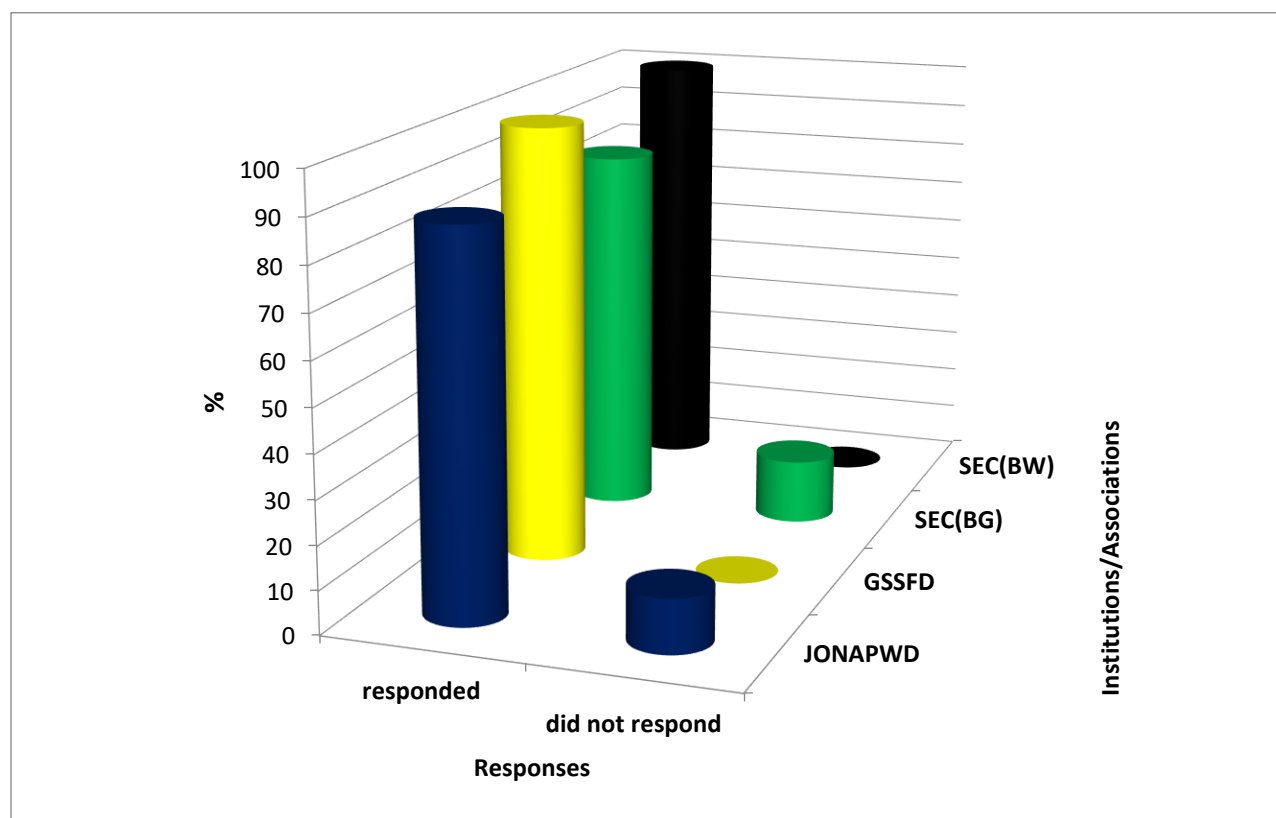


Fig. 6: Responses on the understanding of the reproductive health of girls/women

The respondents in their view explained the reproductive health of girls/women as follow:

For JONAPWD (28 of the 32 respondents)

- *It is the right girls/women have to say when they want to give birth and how many children they want (60.7%)*
- *It is a girl or a woman getting pregnant and bearing children as at when due (39.3%)*

For GSSFSD (all the 30 respondents)

- *Is when the reproductive organs are in good condition and able to bear children (100%)*

For SECBG (23 of the 27 respondents)

- *A girl or woman being healthy (30.4%)*
- *Girls and women to keep themselves neat (13.0%)*
- *Good health for girls or women (21.7%)*
- *Being healthy to have a child (8.7%)*
- *To avoid unwanted pregnancy (4.3%)*
- *Girls and women should keep their bodies in good condition so as to avoid contracting diseases e.g. avoiding sex and taking pills (8.7%)*
- *Girls should not marry or reproduce before they attain the age of 18 years (13.0%)*

SECBW (all the 11 respondents)

- *Getting right information about reproductive health before reproduction (63.6%)*
- *The state of health of a woman before accepting to be pregnant or not (18.2%)*
- *The right to have safe sex and not be raped (18.2%)*

3.3.10. Reproductive rights:

Out of the JONAPWD survey respondents, 11(34.4%) had heard about reproductive rights while 21(65.6%) did not hear, 27(90.0%) of the GSSFSD respondents had heard while 3(10.0%) did not

hear, 8(29.6%) of the SECBG respondents had heard while 19(70.4%) did not hear and all the 11 SECBW had heard about reproductive health (see Table 17 and Fig. 7).

Table 17: Responses of survey respondents about reproductive rights

| | | | Have you heard of reproductive rights? | | Total |
|-------------------------------|---------|---|--|------|-------|
| | | | Yes | No | |
| Institutions/ Associations | JONAPWD | f | 11 | 21 | 32 |
| | | % | 34.4 | 65.6 | 100.0 |
| | GSSFD | f | 27 | 3 | 30 |
| | | % | 90.0 | 10.0 | 100.0 |
| | SECBG | f | 8 | 19 | 27 |
| | | % | 29.6 | 70.4 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 57 | 43 | 100 |
| | | % | 57.0 | 43.0 | 100.0 |

Source: Field data

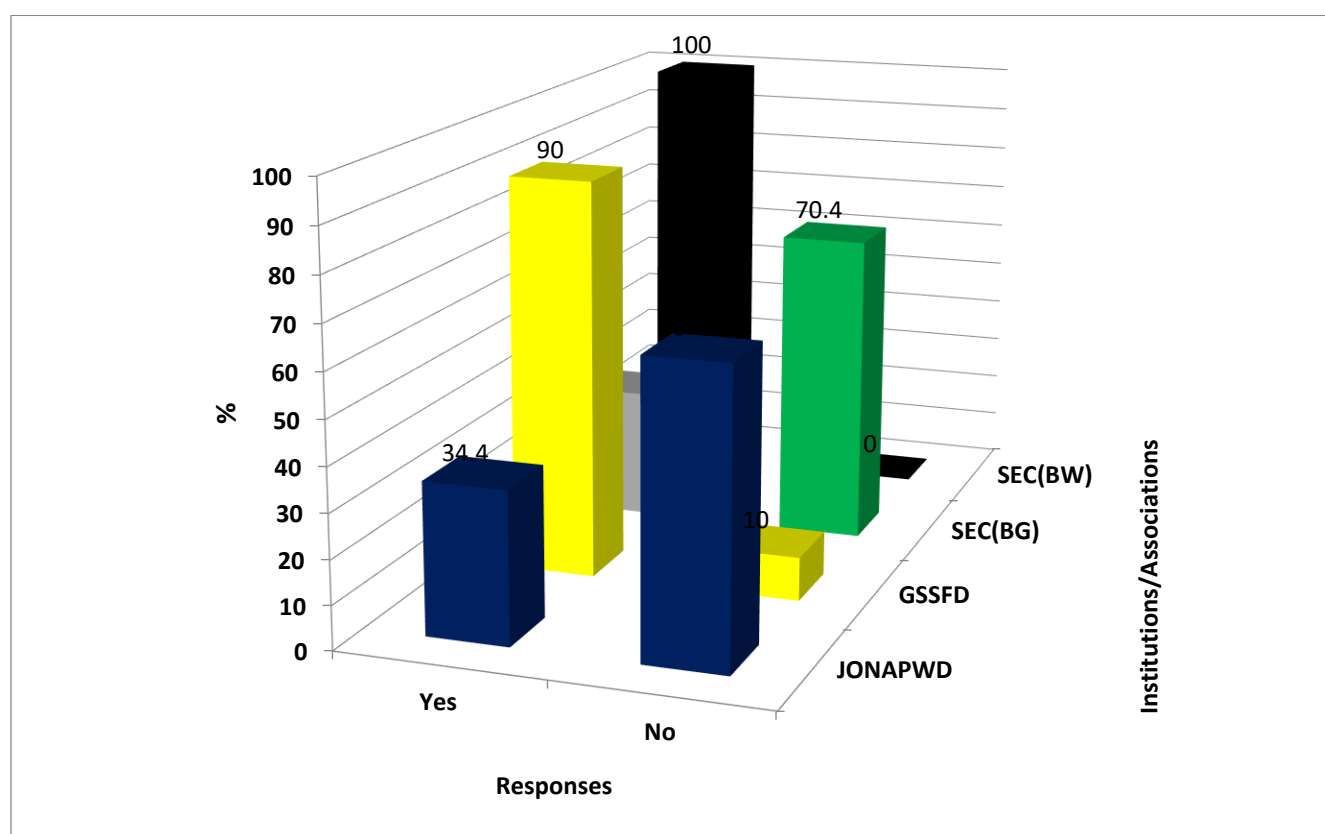


Fig. 7: Responses of the respondents about reproductive rights

Survey respondents that heard about the reproductive rights explained as presented below.

JONAPWD (11 of the 32 respondents)

- *It is a process for someone to decide when to give birth (27.3%)*
- *The right I have as a person to give birth (27.3%)*
- *The right you have as a person to determine or decide how many children you want and when you want them (9.1%)*
- *An individual's right to plan a family, terminate pregnancy, use contraceptives, learn about sex education (9.1%)*
- *Reproductive rights could mean the rights of an individual to reproduce at will (27.3%)*

GSSFD (27 of the 30 respondents)

- *Right individual has to continue to have a child (63.0%)*
- *Right over her reproductive organs (14.8%)*
- *Right of a person to know how many children she wants to have (22.2%)*

SECBG (8 of the 27 respondents)

- *A person right to reproduce or have a child (50.0%)*
- *It is a woman's right to determine how many issues she will get (25.0%)*
- *Power to decide when to reproduce and also the numbers to reproduce (25.0%)*

SECBW (all the 11 respondents)

- *When to get pregnant (9.1%)*
- *This means not reproducing when one is not of age (18 years) (27.3%)*
- *This is where girls or women decide whether to marry or not and also the number of children (9.1%)*
- *This is the power to determine the number of children to produce and when to produce them (54.5%)*

Data were also obtained from FGD participants on what they think constitute reproductive rights. These are indicated below and include some of the ideas expressed by the survey respondents.

- i) Right to have as many children as one desires
- ii) Right to decide when to have children
- iii) Right to procreate
- iv) A woman's right to receive health care during pregnancy and before

"Reproductive right is ability to have as many children as you want in Nigeria and can take care of them". P2 FGD JONAPWD

"It is right to conceive when you want. A couple can choose to space their child bearing according to seasons" P9 FGD JONAPWD

"Reproductive Right is a woman having right to have children as she wants. Example she can choose Caesarian section (C.S). like Actress Mercy Johnson did". P1 FGD JONAPWD

"Everyone has the right to produce young ones" P4 FGD, Blind Women at Oji

"When a female marries a man, she has the right to say the number of children she will have" P5 FGD, Blind Women at Oji:

"Everyone has the right to go to the hospital/ antenatal when she is pregnant". P7 FGD, Blind Women at Oji

3.3.11. Reproductive health and rights issues awareness

Table 18 and Fig. 8 display frequencies and percentages of survey respondents that responded and those that did not respond to the awareness of reproductive health and right issues. Out of JONAPWD, 26 (81.3%) of the respondents responded while only 6 (18.7%) did not respond. All the GSSFD respondents responded. From SECBG, 20 (74.1%) of the respondents responded while only 7 (25.9%) did not respond. Also all the SECBW respondents responded to the awareness of reproductive health and right issues. In general, 87% of the respondents responded while 13% did not respond.

Table 18: Responses on the awareness of survey respondents on reproductive health and right issues

| | | | Response | | Total |
|-------------------------------|---------|---|-----------|-----------------|-------|
| | | | Responded | Did not respond | |
| Institutions/ Associations | JONAPWD | f | 26 | 6 | 32 |
| | | % | 81.3 | 18.8 | 100.0 |
| | GSSFD | f | 30 | 0 | 30 |
| | | % | 100.0 | 0.0 | 100.0 |
| | SECBG | f | 20 | 7 | 27 |
| | | % | 74.1 | 25.9 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 87 | 13 | 100 |
| | | % | 87.0 | 13.0 | 100.0 |

Source: Field data

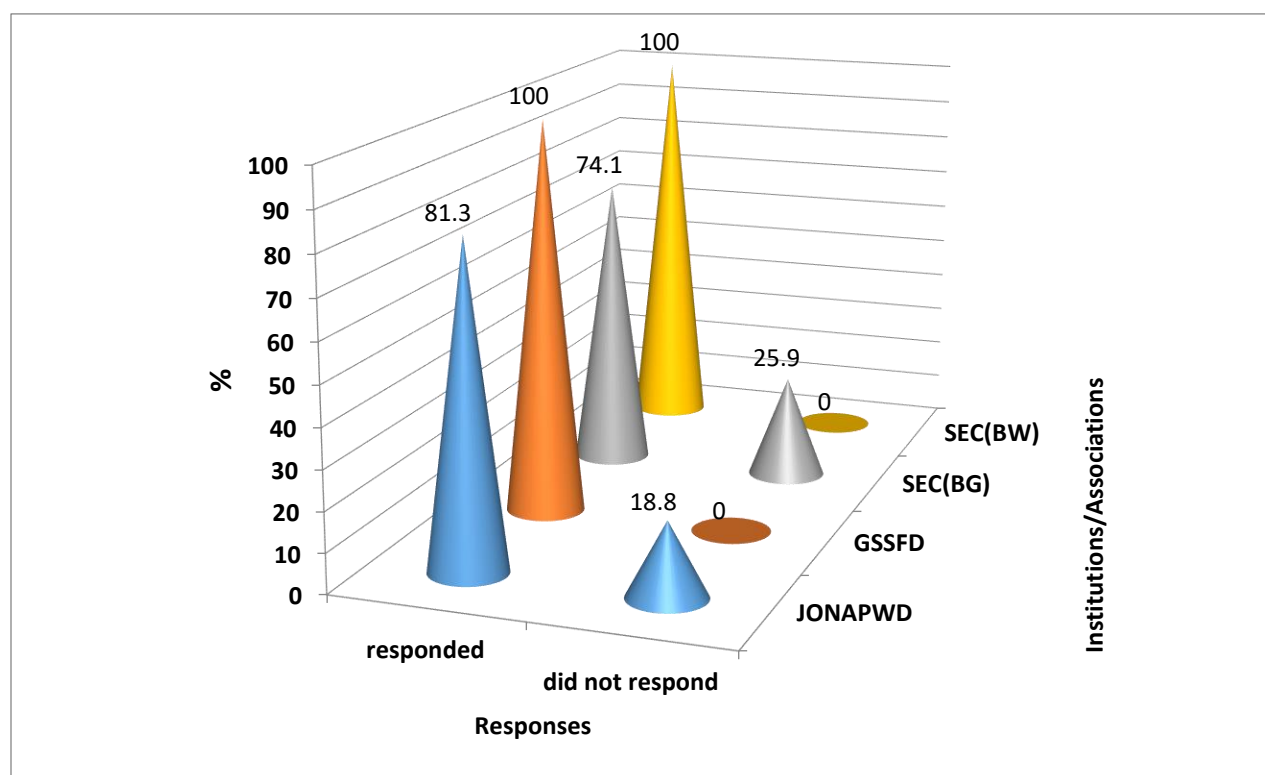


Fig. 8: Responses on the awareness of reproductive health and right issues

The survey respondents indicated their understanding of reproductive health and right issues as follow:

For JONAPWD (26 of the 32 respondents)

- *Right to have children, space the children for you to be healthy to train them and also to go to good hospital (11.5%)*
- *Bleeding during delivery; baby dying (7.7%)*
- *Rights to have sex when you want it and not to be forced to do it (38.5%)*
- *Female genital cutting; widows' inheritance; rape etc. (7.7%)*
- *Sexual and reproductive health; discrimination and violence (23.1%)*

GSSFD (all the 30 respondents)

- *Ability to give birth to number of children you want; right to say no when you are not fit to your husband (43.3%)*
- *Right to the family planning (3.3%)*
- *Right to have sex (53.3%)*

SECBG (20 of the 27 respondents)

- *Cleanliness; keeping your body clean (40.0%)*
- *No sickness; right of having children (15.0%)*
- *Contracting diseases; unwanted pregnancy; untimely death through abortion (15.0%)*
- *Getting right information about female health (15.0%)*
- *Avoid casual sex; men should not touch our private parts (15.0%)*

For SECBW (all the 11 respondents)

- *Right not to allow boys to touch our private parts (45.5%)*
- *Women and girls should desist from casual sex; get right information and avoid drugs that may affect us (27.3%)*
- *Unwanted pregnancy; contracting sexually transmitted diseases (18.2%)*

- *Right to sexuality; to spacing of children (9.1%)*

3.4. Concerns of girls and women with disabilities

3.4.1. Reproductive rights concern of girls and women with disabilities?

Information on Reproductive rights concern of girls and women with disabilities was obtained from FGD participants and are indicated below.

- i) They are vulnerable to sexual abuse on account of their disability
- ii) Right to refuse forced sex and report
- iii) Family members tend to regard women with disabilities as useless and are not concerned to protect them from unwanted pregnancy
- iv) Some people perceive that women with disability may not have sexual urges.

“Women with disability are vulnerable. Men take advantage of them especially in the villages because they wonder if they can perform. Example my cousin almost raped me at my tender age but I shouted and was rescued by my parents. P5 FGD JONAPWD

“Family sees disabled women as useless just being disabled not to talk of getting unwanted pregnancy”. P5 FGD JONAPWD

“Like me somebody approached me along the street saying: ‘Do you have sexual urge’? Then I started educating him, that disability doesn’t affect our sex organs. So also, another man came to me with the same issue...” P7 FGD JONAPWD

“Disabled women are mostly victims of rape but as an adult you will be shy to shout. One of my friends is being forced to take contraceptive drugs after sexual intercourse by her boyfriend to avoid pregnancy. P7 FGD JONAPWD

Our sport coach in Lagos likes using disabled women to have sex as a way of relaxing. In one occasion he tried raping one of us during checking of body weight but she was rescued by her helper. P5 FGD JONAPWD

“I have the right to say no, if he forces me, I will report him or even shout. P 3 FGD, Blind Women at Oji:

“Being disabled is not a guarantee to have sex with me forcefully. Disability is not a guarantee to have sex with me. It is not good to impregnate a disabled girl or woman that is not your wife”, P9 FGD, Blind Women at Oji

3.4.2. Concerns of women with disabilities about child bearing.

Key findings were obtained from FGD participants from JONAPWD about concerns of women with disabilities in relation to child bearing. They include the following;

- i) People think that women with disabilities cannot conceive

ii) Tendency of some women with disabilities to have children without seeking means of taking care of themselves and the babies and often resort to street begging.

“In human view, a disabled woman is useless and can’t conceive. Like my case; the father of my child wanted to marry me but my mother in-law to be refused saying I won’t bear children but when I got pregnant it was a surprise to them and I delivered it like any woman will but I had the child through cesarean session. In child birth there is no different between a woman with disability and a normal woman. They think since we are disabled, therefore we cannot have normal baby”. P5 FGD JONAPWD:

“Some of our women are not wise; they keep having babies without any hand work at the end they have babies and carry them to the street begging”. P5 FGD JONAPWD:

3.4.3. Cultural practices that affect girls and women’s reproductive rights

Findings about cultural practices that affect girls and women’s reproductive rights were obtained from FGD participants. They identified the following as cultural practices that affect girls and women’s reproductive rights.

- i) Difficulty in being accepted as suitable for marriage due to public perception that a woman with disability will not be able to undertake domestic chores
- ii) Exposure to female circumcision/female genital cutting
- iii) Discrimination against females with disability in choice of bride
- iv) PWDs are seen as useless and marginalized in access to education by parents
- v) Devaluation of people with disability
- vi) PWD are victims of Child marriage

“I was proposed to by a man but his mother refused saying I can’t go to farm, wash or take care of him. A man is coming presently but I asked him; has your family approved?” P7 FGD JONAPWD

“Female circumcision/female genital cutting”. P 3 FGD, Blind Women at Oji:

“In marriage, some females do not permit their sons and daughters to marry disabled ones”. P10 FGD, Blind Women at Oji:

‘When a child is disabled their patents do not allow them to go to school because those disabled people are seen as useless in their families’ P 9 FGD, Blind Women at Oji.

“When two disabled want to marry themselves their families will not agree because they are all disabled”. P 6 FGD, Blind Women at Oji:

“Disabled are not allowed to be given honour...”. P10 FGD, Blind Women at Oji:

3.4.4. Health problems that could result from inability of women and girls to maintain their reproductive rights?

Data on health problems that could result from inability of women and girls to maintain their reproductive rights were derived from responses of FGD participants. They include the following:

- i) Risk of contracting HIV
- ii) Sexually transmitted infection
- iii) High blood pressure
- iv) Underdeveloped pelvis

“People are scared of HIV to even take the test and they don’t know how to take care of themselves. HIV test is a must (compulsory) in General hospital but in private hospital it’s on consent”. P5 FGD JONAPWD

“It may be sickness, Infections, HIV AIDS, Infertility, STDs”. P 4 FGD, Blind Women at Oji

“High blood pressure” P 1 FGD, Blind Women at Oji.

“Narrow pelvis” P 4 FGD, Blind Women at Oji

3.5. Knowledge about Sexual Health and Rights

3.5.1. Sexual health:

Out of the 32 JONAPWD survey respondents, 14(43.8%) had heard about sexual health while 18(56.3%) did not hear, 17 (56.7%) of the GSSFD respondents had heard while 13(43.3%) did not hear, 10(37.0%) of the SECBG respondents had heard while 17(63.0%) did not hear and all the 11 SECBW had heard about sexual health (see Table 19 and Fig. 9).

Table 19: Responses of the respondents about sexual health

| | | | Have you heard about sexual health | | Total |
|-------------------------------|---------|---|------------------------------------|------|-------|
| | | | Yes | No | |
| Institutions/As sociations | JONAPWD | f | 14 | 18 | 32 |
| | | % | 43.8 | 56.3 | 100.0 |
| | GSSFD | f | 17 | 13 | 30 |
| | | % | 56.7 | 43.3 | 100.0 |
| | SECBG | f | 10 | 17 | 27 |
| | | % | 37.0 | 63.0 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 52 | 48 | 100 |
| | | % | 52.0 | 48.0 | 100.0 |

Source: Field data

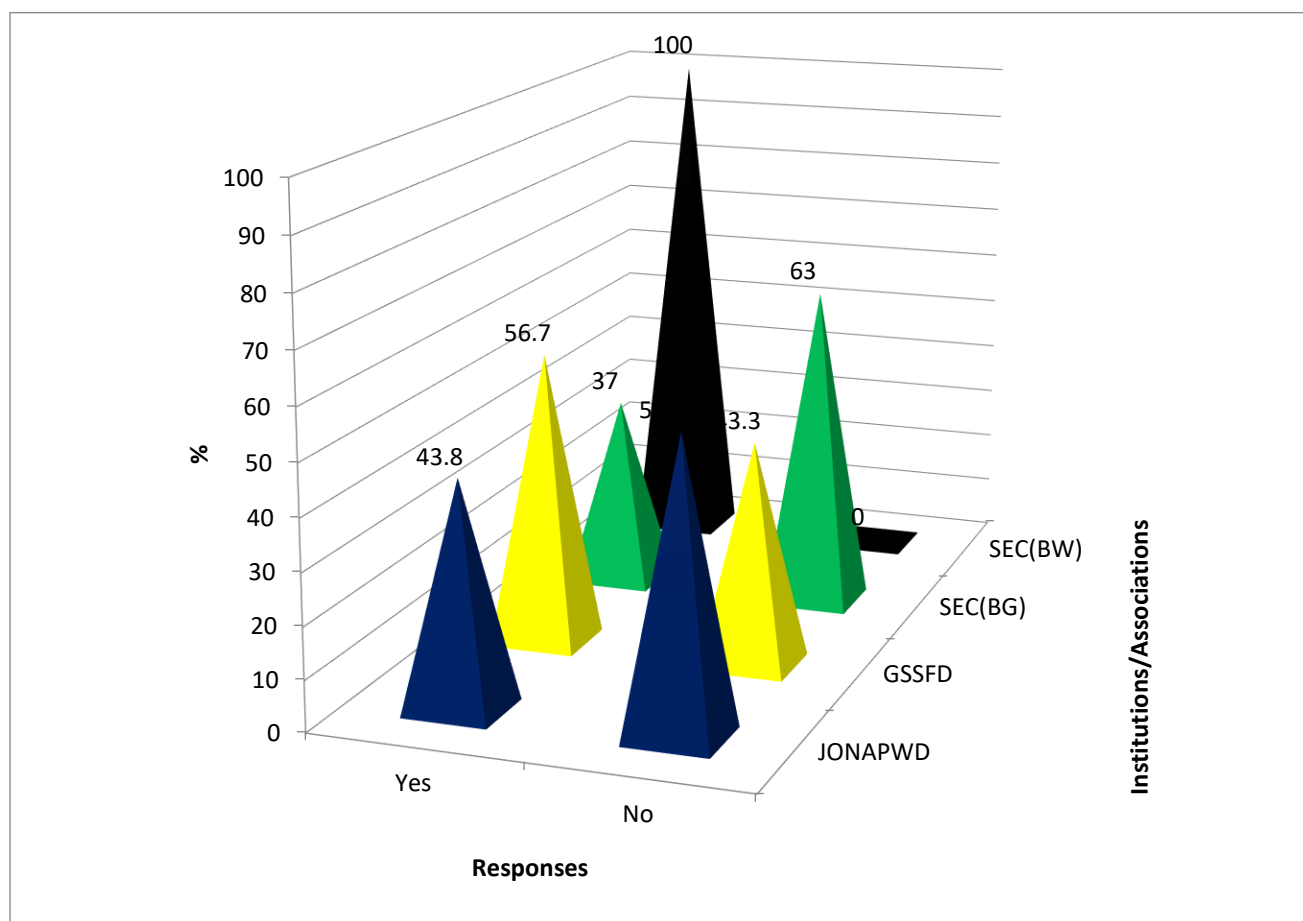


Fig. 9: Responses of survey respondents about sexual health

Presented below is what survey respondents explained as sexual health.

For JONAPWD (14 of the 32 respondents)

- *It means that as a woman that I am strong enough to have sexual intercourse with my partner (21.4%)*
- *I think it means being healthy during sexual intercourse (21.4%)*
- *It means when one is physically/mentally healthy for sex (42.9%)*
- *It is ability to embrace and enjoy our sexuality throughout our lives (14.3%)*

GSSFD (17 of the 30 respondents)

- *Sexual organs are in good condition (100%)*

SECBG (10 of the 27 respondents)

- *Being healthy before having sex (50.0%)*
- *A girl must be up to 18 years before getting pregnant (10.0%)*
- *What one has to do to avoid sexual problems (20.0%)*
- *Obtaining right information about sexual health (20.0%)*

SECBW (all the 11 respondents)

- *Girls should protect their bodies from boys or men to avoid contracting diseases (54.5%)*
- *We should not allow men to touch our private parts (18.2%)*
- *Keep away from boys to avoid unwanted pregnancy (9.1%)*
- *Embarking on sex educative programs (9.1%)*
- *Having sex in a healthy atmosphere (9.1%)*

Qualitative data were also obtained on FGD participants' understanding of sexual health. They include the following;

- i) A Couple's ability to have a healthy sexual relationship
- ii) A couple being able to have a satisfying sex and ability to achieve pregnancy
- iii) Having sex without pain
- iv) Not having infection while having sex
- v) Ability to have sexual urge
- vi) No sickness

"It is having healthy sexual intercourse with your husband. It is the ability to have intercourse with your husband as supposed". P7 FGD JONAPWD

"Sexual health is the ability to have sex without problem ... It is no manifestation of STD, you are all round ok after and during sex". P7 FGD JONAPWD

"It is the ability to satisfy your partner. Giving him or her what he / she wants in a woman or man by making sure your hormones are balanced to be able to conceive when the need arises". P10 FGD JONAPWD

"When the couple does not have any pain when having sex". P 3 FGD, Blind Women at Oji

“When a man or woman doesn’t have any infection having sexual contact”. P 3 FGD, Blind Women at Oji P 3 FGD, Blind Women at Oji

“When a man or woman do not have any sickness”; P6 FGD, Blind Women at Oji

FGD participants from JONAPWD provided their views on their understanding of indicators of sexual health. They are presented below as follow:

- i) A couple’s ability to have a satisfying sex
- ii) A woman having normal regular menstrual cycle

“It is having sexual urge and when you can satisfy your partner” P2 FGD JONAPWD

“It is menstruating normal” P8 FGD JONAPWD

3.5.2. Sexual rights:

Out of the JONAPWD survey respondents, 16(50.0%) had heard about sexual rights while 16(50.0%) also did not hear, 27 (90.0%) of the GSSFD respondents had heard while 3(10.0%) did not hear, 13(48.1%) of the SECBG respondents had heard while 14(51.9%) did not hear and all the 11 SECBW had heard about sexual rights (see Table 20 and Fig. 10).

Table 20: Responses of the respondents about sexual rights

| | | | Have you heard of sexual rights | | Total |
|---------------------------|---------|---|---------------------------------|------|-------|
| | | | Yes | No | |
| Institutions/Associations | JONAPWD | f | 16 | 16 | 32 |
| | | % | 50.0 | 50.0 | 100.0 |
| | GSSFD | f | 27 | 3 | 30 |
| | | % | 90.0 | 10.0 | 100.0 |
| | SECBG | f | 13 | 14 | 27 |
| | | % | 48.1 | 51.9 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 67 | 33 | 100 |
| | | % | 67.0 | 33.0 | 100.0 |

Source: Field data

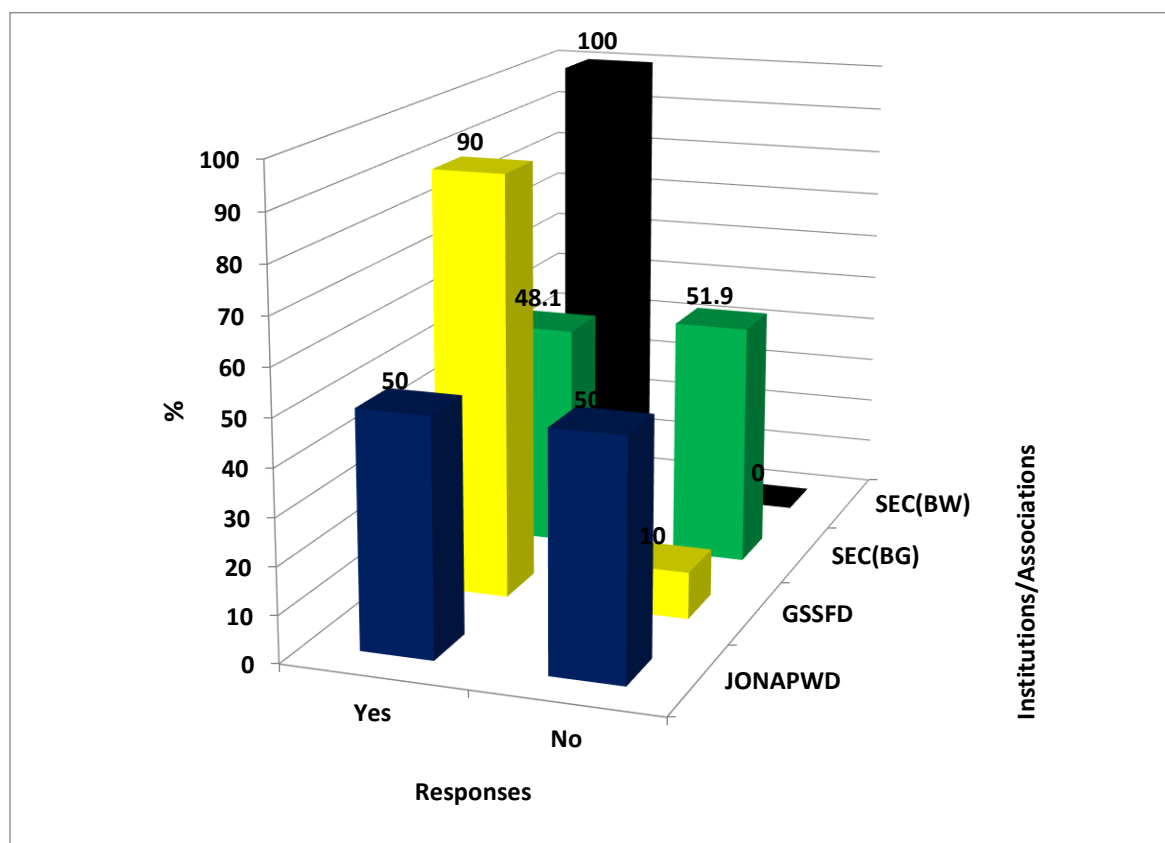


Fig. 10: Responses of survey respondents about sexual rights

Presented below is what the survey respondents explained as sexual rights.

For JONAPWD (16 of the 32 respondents)

- *The right to say I want or don't want to have sex (75.0%)*
- *It means rights to freedom over sexual activity and reproduction, in particular with reference to sexual orientation and access to contraception and health care (6.3%)*
- *Sexual rights entail the freedom to participate/engage in any sexual activity (18.8%)*

For GSSFD (27 of the 30 respondents)

- *Right an individual has on when to have sex or not (77.8%)*
- *Ability to have sex as you wish (22.2%)*

For SECBG (13 of the 27 respondents)

- *Right to have sex (46.2%)*

- *Right to say no to sex (15.4%)*
- *Right to sexual relationship (23.1%)*
- *This is power to refuse sex when we are not willing to do it (15.4%)*

SECBW (all the 11 respondents)

- *Right to have sex with somebody or not to have (45.5%)*
- *We should not encourage rape (18.2%)*
- *Women should not succumb to sex when they are not ready (9.1%)*
- *Those things someone should be able to know to avoid contracting sexual diseases (9.1%)*
- *It means right to have sex without being forced (18.2%)*

FGD respondents indicated that sexual rights refer to the following;

- i) Right a woman has to give consent to sex
- ii) Right of a woman to express sexual desire to her husband
- iii) Ability to refuse unwanted sex
- iv) Right to report sexual abuse

“It is a right a woman has to say no to sexual intercourse either in marriage or friendship relationship. You have right to report incidence of rape”. P1 FGD JONAPWD

“It is a right a woman has to express her sexual needs to her husband but in some society it is a taboo”. P7 FGD JONAPWD:

“Whenever I am not ready for that (sex) I have the right to say no”. P1 FGD, Blind Women at Oji

‘I can even report to elders that I don’t like such (sexual abuse)’. P7 FGD, Blind Women at Oji

“I have the right to say “I need sex to my husband or my sex partner ...” P10 FGD, Blind Women at Oji

Sex is not done forcefully, you have a right to reject another man’s request for sex, you have the right to say “no” to your husband during ovulation period to avoid unwanted pregnancy. P9 FGD, Blind Women at Oji

My right is when a man comes to me for sex, I have right to say no, if he insists or forces me I will go and report to elders about it. P5 FGD, Blind Women at Oji

3.5.3. Sexual abuse:

Out of the JONAPWD respondents, 31 (96.9%) had heard about sexual abuse while 1(3.1%) also did not hear, 19(63.3.0%) of the GSSFD respondents had heard while 11(36.7%) did not hear, 22(81.5%) of the SECBG respondents had heard while 5(18.5%) did not hear and all the 11 SECBW had heard about sexual abuse (see Table 20 and Fig. 11).

Table 21: Response of the respondents about sexual abuse

| | | | Have you heard of sexual abuse | | Total |
|-------------------------------|---------|---|--------------------------------|------|-------|
| | | | Yes | No | |
| Institutions/ Associations | JONAPWD | f | 31 | 1 | 32 |
| | | % | 96.9 | 3.1 | 100.0 |
| | GSSFD | f | 19 | 11 | 30 |
| | | % | 63.3 | 36.7 | 100.0 |
| | SECBG | f | 22 | 5 | 27 |
| | | % | 81.5 | 18.5 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 83 | 17 | 100 |
| | | % | 83.0 | 17.0 | 100.0 |

Source: Field data

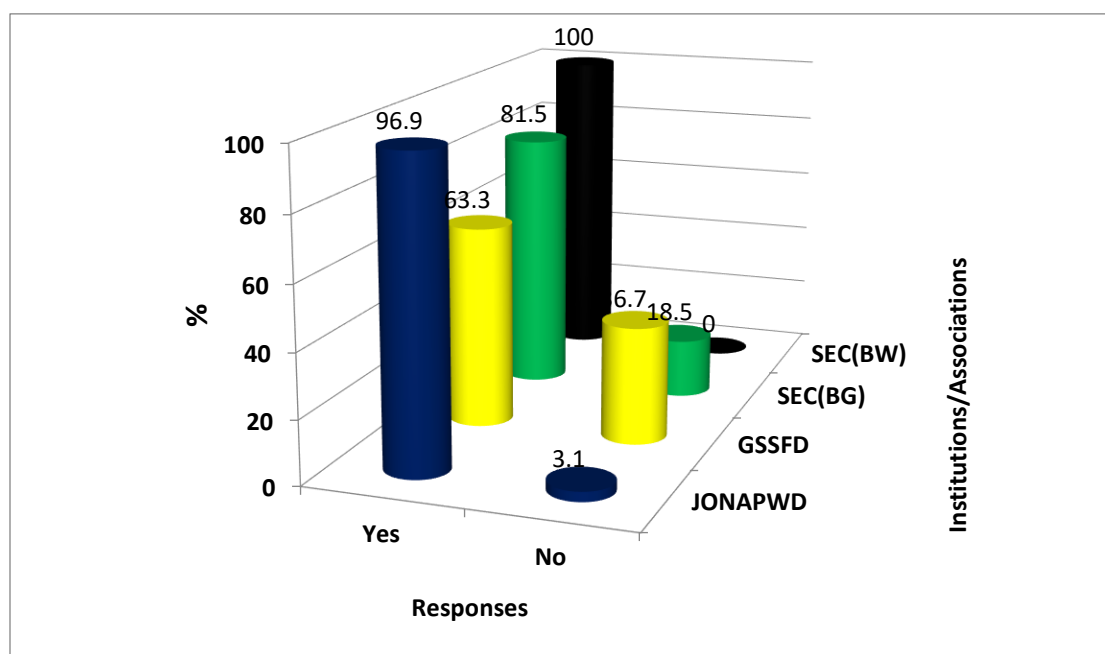


Fig. 11: Responses of survey respondents about sexual abuse

Presented below are perceptions of survey respondents concerning sexual abuse.

For JONAPWD (31 of the 32 respondents)

- *Rape is sexual abuse because if a boy/man rapes a girl/woman, the man has abused the girl/woman (16.1%)*
- *It is referred as molestation, usually undesired sexual behavior by one person upon another. It is often perpetrated using force or by taking advantage of another (9.7%)*
- *To have sexual intercourse with somebody with force (64.5%)*
- *Sexual abuse is an act whereby an adult takes advantage of the minor or an adult (9.7%)*

GSSFD (19 of the 30 respondents)

- *Being intimidated sexually (26.3%)*
- *when somebody has sex with you by force (73.7%)*

SECBG (22 of the 27 respondents)

- *Having unwanted sex/ forcing a girl/woman to have sex (68.2%)*
- *Raping (4.5%)*
- *Girl having sex all time (4.5%)*
- *When one abuses sex (4.5%)*
- *When one has sex wrongly (18.2%)*

SECBW (all the 11 respondents)

- *This is having forceful sexual relationship (72.7%)*
- *It means that some girls and women use their bodies for making money (9.1%)*
- *It means having somebody who is not up to 18 years into sexual activities (18.2%)*

3.5.4. Sexual violence:

Out of the JONAPWD respondents, 31 (96.9%) had heard about sexual violence while 1(3.1%) also did not hear, 19(63.3.0%) of the GSSFD respondents had heard while 11(36.7%) did not hear,

22(81.5%) of the SECBG respondents had heard while 5(18.5%) did not hear and all the 11 SECBW had heard about sexual abuse (see Table 21 and Fig. 12).

Table 22: Responses of the respondents about sexual violence

| | | | Have you heard of sexual violence | | Total |
|-------------------------------|---------|---|-----------------------------------|------|-------|
| | | | Yes | No | |
| Institutions/ Associations | JONAPWD | f | 28 | 4 | 32 |
| | | % | 87.5 | 12.5 | 100.0 |
| | GSSFD | f | 12 | 18 | 30 |
| | | % | 40.0 | 60.0 | 100.0 |
| | SECBG | f | 12 | 15 | 27 |
| | | % | 44.4 | 55.6 | 100.0 |
| | SECBW | f | 11 | 0 | 11 |
| | | % | 100.0 | 0.0 | 100.0 |
| Total | | f | 63 | 37 | 100 |
| | | % | 63.0 | 37.0 | 100.0 |

Source: Field data

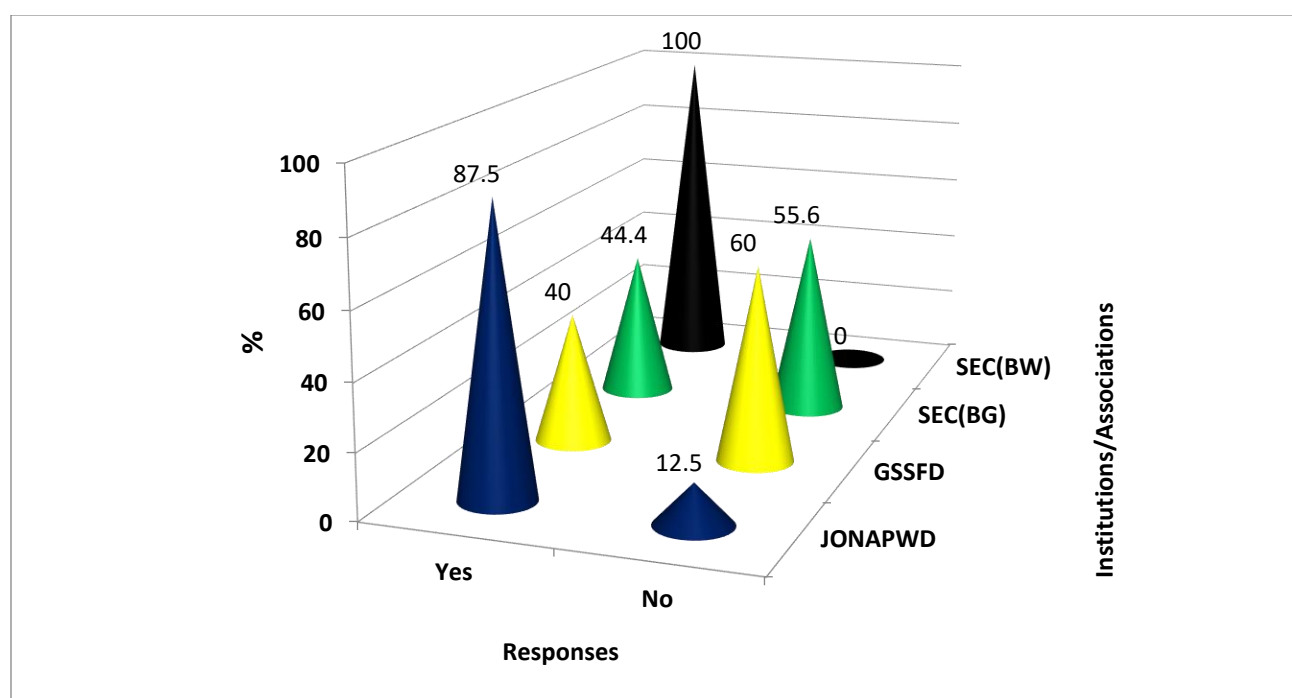


Fig. 12: Responses of survey respondents about sexual violence

Presented below is what the respondents explained as sexual violence.

For JONAPWD (28 of the 32 respondents)

- *Rape and beating of girls/women (67.9%)*
- *It is any sexual act or attempt to obtain act by violence or coercion (10.7%)*
- *Some men force their wives to have sex while they are not willing (21.4%)*

GSSFD (12 of the 30 respondents)

- *When sex right is harassed e.g. beating (58.3%)*
- *Use of force to have sexual intercourse with a girl (41.7%)*

SECBG (12 of the 27 respondents)

- *Having sex through violence (fighting) (75.0%)*
- *Forceful sex (25.0%)*

SECBW (all the 11 respondents)

- *It means when husband is beating his wife when she refuses having sex with him (18.2%)*
- *Having sex through fighting (63.6%)*
- *Having sex unwillingly (9.1%)*
- *Forcing someone through physical combat to have sex with him/her (9.1%)*

3.5.5. Problems girls and women with disabilities experience in maintaining their sexual right?

Data on problems girls and women with disabilities experience in maintaining their sexual right were obtained from FGD participants. They include the following;

- i) Due to poverty they resort to begging, which exposes them to risk of sexual abuse
- ii) Lack of job also exposes them to abuse by employers
- iii) They are victims of rape
- iv) They are misled through misinformation about sex

“Poverty is a great problem affecting us leading us to beg and at times we get abused. When men see you are jobless; they take advantage of you. Sexual abuse we usually have is rape.” P5 FGD JONAPWD

“Many societies do not allow girls to do their sexual health programs. When we were traveling some disabled girls were raped. Some of them were pregnant, though the pregnancy was naturally washed. Some of them were deceived by informing them that those who do not have sex before marriage find it difficult to keep their marriage.” P10 FGD, Blind Women at Oji

“No Sex before marriage causes fibroid. Some were misled by telling them that their vagina will close if they don’t have sex.” P 1 FGD, Blind Women at Oji:

3.5.6. Ongoing awareness programs on sexual and reproductive health rights (SRHR) for girls and women with disabilities:

Out of the JONAPWD respondents, 6 (18.8%) were aware of the programs while 26(81.2%) were not aware, 14(46.7.0%) of the GSSFD respondents were aware while 16(53.7%) were not aware, 5(18.5%) of the SECBG respondents were aware while 22(81.5%) were not aware and 10(90.9%) of the SECBW respondents were aware while only 1(8.1%) were not aware of the ongoing programs on sexual and reproductive health rights (SRHR) for girls and women with disabilities. In all 35% of the whole respondents were aware of any ongoing programs on sexual and reproductive health rights (SRHR) for girls and women with disabilities while 65% of them were not (see Table 23 and Fig. 13).

Table 23: Responses of survey respondents on awareness of ongoing programs on sexual and reproductive health rights (SRHR) for girls and women with disabilities

| | | | Are you aware of any ongoing awareness programs on sexual and reproductive health rights (SRHR) for girls and women with disabilities | | Total |
|-------------------------------|---------|---|---|------|-------|
| | | | Yes | No | |
| Institutions/ Associations | JONAPWD | f | 6 | 26 | 32 |
| | | % | 18.8 | 81.3 | 100.0 |
| | GSSFD | f | 14 | 16 | 30 |
| | | % | 46.7 | 53.3 | 100.0 |
| | SECBG | f | 5 | 22 | 27 |
| | | % | 18.5 | 81.5 | 100.0 |
| | SECBW | f | 10 | 1 | 11 |
| | | % | 90.9 | 9.1 | 100.0 |
| Total | | f | 35 | 65 | 100 |
| | | % | 35.0 | 65.0 | 100.0 |

Source: Field data

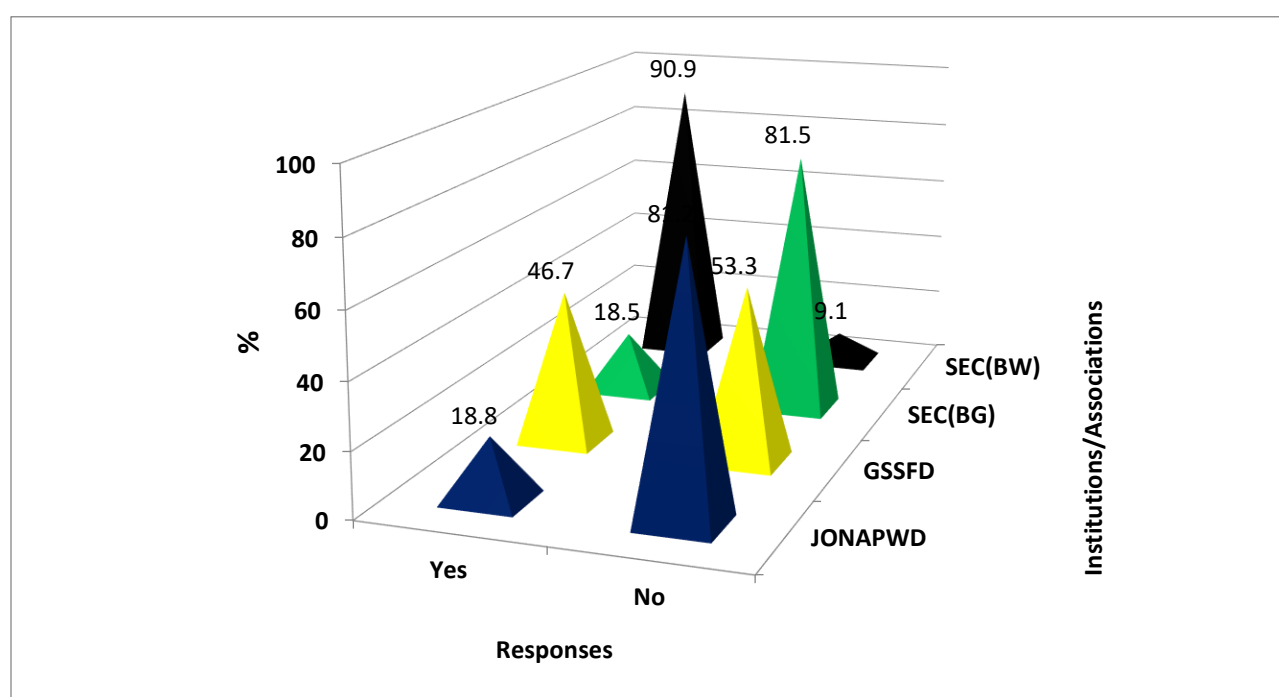


Fig.13: Responses of survey respondents on awareness of ongoing programs on sexual and reproductive health rights (SRHR) for girls and women with disabilities

3.5.7. Actions being taken to stop the cultural practices that prevent women and girls with disabilities from attaining the highest standard of sexual and reproductive health and rights?

Some FGD respondents indicated that actions are being taken at international, national and state levels to stop the cultural practices that prevent women and girls with disabilities from attaining the highest standard of sexual and reproductive health and rights? These actions include

- i) Discouraging female genital mutilation
- ii) Opposition of discrimination against people with disability
- iii) Campaign by people with disability for legislation against their discrimination
- iv) NGOs campaign for legislation against discrimination of people with disability

“...Disabled people and groups are trying to fight to pass the bill (right of disability) into law. Example is Hope for the handicapped Initiative (HHI), WINET etc.” P 10 FGD, Blind Women at Oji

3.5.8. Outcomes of such actions to stop the cultural practices that prevent women and girls with disabilities from attaining the highest standard of sexual and reproductive health and rights

None of the FGD participants at JONAPWD indicated awareness of such actions to stop the cultural practices that prevent women and girls with disabilities from attaining the highest standard of sexual and reproductive health and rights. But some participants in FGD with blind Women at Oji identified the following as outcomes of such actions;

- i) Bill opposing discrimination against the disabled signed by National Assembly.
- ii) Information on where to report cases of human rights violation against PWDs obtained

“Achievements: It has been signed (Bill opposing discrimination against the disabled) by National Assembly. WINET directed us where to report cases of human rights violation against PWDs. P10 FGD,

“PWDs are making efforts to get the knowledge of the house Assembly”. P9 FGD, Blind Women at Oji

“When they report a case the case must be treated” P 10 FGD, Blind Women at Oji

3.5.9. What should be done for women and girls with disabilities to attain the highest standard of sexual and reproductive health and rights by individuals

Responses from FGD participants on what should be done for women and girls with disabilities to attain the highest standard of sexual and reproductive health and rights by individuals are as follow;

- i) Education and awareness raising by providing women and girls appropriate information
- ii) Individually those with disability should endeavor to be independent
- iii) Cases of abuse or infringement of rights reported to be treated seriously
- iv) Efforts to create awareness about needs and rights of PWDs by women's groups, NGOs, Churches, and media and community members
- v) Provision of employment for PWDs
- vi) Government and parents to provide for special needs of PWDs
- vii) Groups of PWDs to make efforts to support each other.
- viii) The community Leaders should give PWDs financial support

"As an individual when they report cases, the case should be seriously treated". P1 FGD, Blind Women at Oji

"By creating awareness about the disabled needs and rights, by giving them jobs". P3 FGD, Blind Women at Oji

"Let the government take care of the disabled children, let the parents take care of the disabled children". P4 FGD, Blind Women at Oji

"Women groups should care for us, it is good to organize seminars like this (the one they are doing now) for the disabled girls and women. WINET We are happy for this". P9 FGD, Blind Women at Oji

"Social media can serve to counsel parents with disabled/ handicapped to come out and go to any length they want". P10 FGD, Blind Women at Oji

"Disabled groups – we have disabled group association that has helped us achieve the things we want. Communities- they will help the disabled to associate with others. In my village, my people do help me go out with them. Church groups – they help to tell" P1 FGD, Blind Women at Oji

"As an individual I should be independent. Not be a beggar". P1 FGD JONAPWD:

"Knowledge is important. Sometimes I buy books in terms of sex, marriage, my life generally; so reading books guides us on what to do and how to handle ourselves". P5 FGD JONAPWD:

Try to educate women with disabilities and women with disabilities should also be educating each other. P6 FGD JONAPWD:

4.0. Summary, Conclusion and recommendations

4. 1. Summary

The following key findings emerged from the study.

- Majority of survey respondents were not able to make a clear distinction between sex and gender. They indicated that gender refers to the differences between males and females and only a few linked gender to differences in roles ascribed to males and females. Although some FGD participants also said that sex and gender refer to differences between male and female, some pointed out that sex refers to sexual intercourse and physiological differences between males and females.
- Effects of people's perception of sex/ gender on lifestyles of males and females identified by FGD respondents are that women undertake domestic chores and activities that are more home oriented than men although men assume greater responsibilities/control at home than women, males endure painful experiences more than females, females are humbler, and are more restrained.
- Majority of the survey respondents understand that reproduction is a process of procreation, but only 21.9% of respondents from JONAPWD explained that reproduction also entails a couple having children when they want as well as the number they desire.
- A common explanation of human rights across the institutions is that it is the right an individual has as a person or citizen in a society. The dimensions identified include right to life, right to vote, right of association, legal rights and right to advocate for the poor. Dimensions of human rights identified by FGD participants are right to freedom of speech, freedom of worship, right to vote, liberty to do what one wants in the community, freedom of movement; right to seek justice.
- Majority of the survey respondents perceive good health as being without sickness, while FGD participants consider good health to include absence of sickness, being able to undertake their normal activities and eat good food.
- Survey respondents' understanding of reproductive health range from a woman being healthy during pregnancy and child birth, reproductive organs being in good condition, access to adequate information to avoid reproductive problems, and eating good food. On the other hand, FGD participants indicated that reproductive health includes being able to give birth to healthy children, good child spacing, knowledge of appropriate method of family planning, seeking adequate health care during pregnancy, couples to bear children when they desire, intending couples going for screening before marriage.
- FGD participants identified reproductive rights concern of girls and women with disabilities to include vulnerability to sexual abuse, need to be able to refuse forced sex and report, tendency for family members to regard women with disability as useless and are not concerned to protect them from unwanted pregnancy.

- Concerns of women with disability about child bearing provided by FGD participants are the perception that that women with disability cannot conceive, and the tendency of some women with disability to have children without seeking means of taking care of themselves and the babies, often resorting to street begging.
- Health problems that could result from inability of women and girls to maintain their reproductive rights reported by FGD participants include risk of contracting Human Immunodeficiency Virus (HIV), exposure to sexually transmitted infections and underdeveloped pelvis due to exposure to child marriages.
- On knowledge about sexual health and rights, survey respondents understand sexual health to imply that a woman is physically and /mentally healthy for sex, ability to enjoy sex, sexual organs being in good condition, access to correct information about sex and sexual problems, and that a girl must be up to 18 years before getting pregnant. FGD respondents' perception of sexual health include the ability of a couple to have a healthy sexual relationship, being able to have a satisfying sex and ability to achieve pregnancy, having sex without pain, not contracting infections while having sex.
- Survey respondents explained that sexual rights include the right to decide when to have sex or not, freedom over sexual activity and reproduction, in particular with reference to sexual orientation and access to contraception and health care, right to say no to sex when one is not willing to do it, right to refuse sexual violence, access to information on how to avoid contracting sexual diseases. FGD respondents indicated that sexual rights refer to right a woman has to give consent to sex, a woman's right to express sexual desire to her husband, ability to refuse unwanted sex, and right to report sexual abuse.
- Survey respondents perceive sexual abuse to include rape or any act or attempt to obtain it by violence or coercion, an adult taking advantage of a minor or an adult, sex trafficking, and sexual intimidation.
- FGD participants identified that due to poverty women with disabilities experience constraints in maintaining their sexual right because they resort to begging, which exposes them to risk of sexual abuse; lack of job also exposes them to abuse by employers, they are victims of rape, and are misled through misinformation about sex.
- Some FGD respondents indicated awareness of actions being taken at international, national and state levels to stop the cultural practices that prevent women and girls with disabilities from attaining the highest standard of sexual and reproductive health and rights. These actions include discouraging female genital mutilation; opposition of discrimination against people with disabilities, campaign by people with disabilities (PWD) for legislation against their discrimination, campaign by Non-Governmental organizations (NGOs) for legislation against discrimination of people with disability. Some FGD participants identified the following as outcomes of such actions;

Bill opposing discrimination against the disabled signed by National Assembly, information on where to report cases of human rights violation against PWDs obtained.

- Suggestions by FGD participants on what should be done for women and girls with disabilities to attain the highest standard of sexual and reproductive health and rights include providing women and girls appropriate information; that those with disability should endeavor to be independent; cases of abuse or infringement of rights reported should be treated seriously; efforts to be made to create awareness about needs and rights of PWDs by women's groups, NGOs, Churches, and media and community members; provision of employment for PWDs; government and parents to provide for special needs of PWDs; groups of PWDs to make efforts to support each other; and that community leaders should provide financial support for PWDs.

4.2. Conclusion

Majority of survey respondents were not able to make a clear distinction between sex and gender., although **they** realize that people's perception of sex/ gender influence lifestyles of males and females and specific activities they undertake. Majority of the survey respondents understand that reproduction is a process of procreation, but only few of them realize that reproduction also entails a couple having children when they want as well as the number they desire. Many respondents have a reasonable understanding of the concept of human rights, but not all have a clear understanding of all the key dimensions of human rights. Majority of the survey respondents do not link their perception of good health to the World health organization's (WHO) explanation that includes social and mental well-being. Although majority of the respondents do not have a clear understanding of the concepts of reproductive health and rights, it is instructive that some of them were able to articulate reproductive rights concern of girls and women with disabilities to include vulnerability to sexual abuse, inability to report sexual abuse/sexual violence they experience. Although some of the respondents have a fair understanding of sexual health and rights, the full dimensions of these concepts are not clearly understood. However, majority of the respondents have a reasonable understanding of the concepts of sexual abuse and sexual violence and were able to identify some constraints that contribute to their vulnerability.

4.3. Recommendations

Based on the conclusion of the study, the following recommendations are provided;

- There is need for concerted efforts to be made by government, women's groups, NGOs, Churches, and media and community members to ensure that women and girls with disabilities attain the highest standard of sexual and reproductive health and rights in the society. This will

entail provision of appropriate sensitization of the populace including PWDs about key issues related to SRHR to sensitize the populace about SRHR concerns of PWDs.

- On-going advocacy actions being taken to stop the cultural practices that prevent women and girls with disabilities from attaining the highest standard of sexual and reproductive health and rights should be intensified at National, state and local government levels.
- Since the vulnerability of girls and women with disabilities occur both at home by parents and relations and in the public sphere, government and policy makers should introduce sanctions to penalize infringement on the SRHR of PWDs and strategies to monitor the implementation of such sanctions
- Concerted efforts also need to be put in place to empower girls and women with disabilities to acquire education and skills that will enable them be employable, or engage in independent activities, which in turn will mitigate their vulnerabilities to sexual abuses and inability to attain their sexual reproductive and health rights.