Perception of the Sexuality of Women with Disabilities (WWD) by undergraduate students of the University of Calabar- Nigeria

Florence Banku Obi, Ph.D *University of Calabar* Nigeria.

Abstract

The study investigated the perception of the sexuality of women with disabilities by undergraduate students of the University of Calabar. Two departments of the Faculty of Education were sampled using the purposive sampling technique. Of the 44 students sampled from the two departments, 25were males while 19 were females; 26 were from the department of Vocational and special education while the other 18 were counseling students of the department of Educational Foundations. Questionnaires and interviews were used to gather data for the study. Data collated were analyzed using an independent t test and matrix ranking. The study revealed that most of the students perceived women with disabilities especially the physically impaired as asexual. Results also show that the perception of male and female students of the sexuality of women with disabilities is not significantly different. The study concludes by viewing women with disabilities as sexual being and advocate for a perceptual change of attitudes towards them.

Keywords: Perception; Sexuality; Women with disabilities.

Introduction

As far back as the 19th century Sigmund theorised that man is largely governed by sexual instincts which he called libidinal energy. In his write-up on the three essays on the theory of sexuality, Freud (1938) as cited by Obi (2002) contended that normal development in man involves the coursing of libidinal or sexual energy through a variety of earlier stages to a final stage which he called the genital stage. Essentially, Freud's theory summarized man to be made up of two basic instincts of which life instincts (hunger, thirst and sexual needs) is one. Explaining further he said that the sexual urge is the basic determinant of behaviour and that maladjustment in man arises from his inability to satisfy his sexual needs. Although later psychoanalytic theorists (Jung, 1969; Adler, 1969; Horney 1967; and Fromm, 1965 among others) disagreed with Freud's overemphasis on the sexual urge being the only determinant of man's behaviour, they however agreed that the fulfilment of the sexual urge in man is important for his social and emotional adjustment.

This acknowledgement of the importance of the libidinal energy means that sexual satisfaction is one of man's basic needs. Freud's theory is largely supported by Maslow's self actualization theory. According to Maslow (1962) man is continuously striving towards self actualization, yet for man to self actualize he must have sufficiently gratified his physiological needs which include sex, hunger and thirst. Maslow believed like Freud that inability to satisfy any of the basic needs results in ill health and inability to function appropriately in society which Freud sees as fixation. To drive home the need for the fulfilment of the basic needs, Maslow (1962:21) observed that "just as we need adequate amounts of vitamin C to remain healthy, so we need love

from others in sufficient quantities to function properly". Corroborating this assertion the National Council of Children with disabilities (NCCWD) noted that sex and love are as much a part of a person's life as air is to the lungs. What can be made out of this is that an individual with a satisfactory sex life is better adjusted than one with an unfulfilled, unhappy sex life.

Despite the importance of sexual satisfaction in a person's life, the establishment of sexual relationships for persons with disabilities especially women is a basic problem. This difficulty stems from the erroneous belief about the sexuality of persons with disabilities. Sexuality as seen by Davies (1996) includes a person's entire sense as a man or woman as reflected in his or her personality, behaviour and relationship with others. It is the satisfaction of ones self worth through the expression of sexual relationship with the opposite sex. How people feel about their sexuality affects their self esteem and influences all aspects of their lives including whether or not they reach their full potentials as human beings. Healthy sexuality is critical for human happiness and fulfilment. Sexuality is the result of the whole person's life situation. Many people see women with disabilities as asexual, defective and undesirable sexual partners. Some even argue that women with disabilities are not beautiful or attractive enough to attract the opposite sex. Others think that women with disabilities will not be able to satisfy their partners sexually and perform other sex- roles stereotypes because of their disability.

Sykes and Ozoji (1993) stated that disability in itself need not have more effect on the sexuality of persons with disabilities than it would for the non disabled. In Nigeria discussions on sex and sex-related issues are seen as taboo, it is even worse when it comes to the disabled persons. The disabled persons (especially the disabled woman) are not factored into such discussions because it is considered more or less as a double taboo and a sacrilege. People feel that the disabled women should not just think of sex. Women with disabilities like their counterparts have the right to establish social – sexual relationships with members of the opposite sex and they have the right to date and be dated (Kallianes & Rubenfeld, 1997; Davies 1996; and Brandenburg, 1998).

It is important to note that women with disabilities function in the same way regarding their sexuality as other women without disabilities. Writing on the rights of persons with disabilities, the NCCWD stated that persons with disabilities have every right to have sex, marry, reproduce and raise children; and that denying them these rights or confining them to fulfilling these rights with their kind could be a veiled form of racial cleansing and abuse of human and civil rights. Despite these shortcomings available records show that men with disabilities have however brighter opportunities of establishing sexual relationships with the opposite sex than are the women with disabilities (Davies, 1996). There are many men with disabilities who have wives, lovers and sex partners unlike women with disabilities. Davies narrated the experience of a young blind girl who lamented that sighted boys do not often ask blind girls for a date. This attitude the listening friend attributed to the peer pressure and shame of being seen with a blind girl. In as much as men with disabilities are noted to be experiencing the same problems observations have shown that theirs is to a lesser extent. This is because women are the more nurturing sex and perhaps more humane and self sacrificing in love relationships than are the men. This is why women are less hesitant to accept dates from men who are disabled.

The different treatment meted to both men and women with disabilities may be attributed to the privileged cultural and social position of men in a patriarchal society. Horney (1967:56) commenting on the seeming superiority of men over women as postulated by Freud stated that "our whole civilization is essentially masculine; its laws, religion, morality etc are all a creation of men". This explains why even on issues of

emotions such as sexual expression women are assigned to playing inactive roles despite the common believe that women's life is built upon emotional bonds. This led to Kallianes & Rubenfeld observations that there are double standards in the society when men and women are affected. The patriarchal society according to Kallianes and Rubenfeld (1997) has kept close control over women's sexuality; determining what sexual activity is socially acceptable and not acceptable. It is also for this reason that the feminist disabled women have taken up arms against the Disability Right Movement for not addressing gender issues particularly issues to do with the sexual and reproductive rights of women who are disabled.

Disabled women themselves seem to be very conscious now of their rights to experience and fulfil an important aspect of their sexuality and the inherent discrimination in the society. Discussing further the feelings of women who are disabled over their neglect, Waxman (1991:207) described a case of a disabled woman who felt that the Disability Right Movement was not addressing their fundamental needs with these words:

Disability Movement has not adequately addressed disabled women's sexuality as a political issue. Many of us find sexuality to be the area of our greatest oppression We are more concerned with being loved and finding sexual fulfilment than getting on a bus.

The society is more concerned with providing educational and other social services for the disabled than addressing issues of their sexuality. Even among special educators, issues of the sexuality of the disabled are hardly given any thought. In Nigeria, just like in many other African countries Non Governmental Organisations and Civil Rights Movement as well as women movements fighting against the oppression and marginalization of women hardly ever talk about sexual marginalization. This situation accounts for the absolute lack of information on sexuality education for the disabled persons especially for WWDs. For instance, women who are visually impaired do not have access to the volumes of printed sexual literature on STDs and HIV/AIDS despite the vulnerability of women to these diseases and virus. Even in today's world of sexual revolution women are yet to enjoy sexual freedom while those who dare to express their sexuality are labelled as deviants and sexually promiscuous (Kallianes & Rubenfeld, 1997). Ironically, these same persons expect and do get into sexual relationships themselves. This attitude has forced disabled women to suppress their sexuality and feel guilty whenever they express it. It is not strange to hear people ask questions or make comments like "How did that disabled woman become pregnant?" "Why should any normal man marry a disabled woman" These same people hardly make comments and ask questions like "Why is that disabled man married?" "Why should any woman marry a disabled man?" In Nigeria for instance, woman who accept to marry disabled men are described as God fearing, kind-hearted, courageous, virtuous and exhibiting the true biblical meaning of love, yet, these same people are quick to say that men who love, date or marry disabled women, are out of their senses. Even among special educators, medical practitioners, psychologists and other service providers, there are many who still hold the view that women who are disabled have no business getting into sexual relationships. Satisfactory establishment of sexual relationships will lead to a more stable personality and the development of a positive self concept and to a large extent the full realization of their self esteem.

The World Health Organisation has developed an International Classification of Impairments, Disabilities and Handicaps. Impairment refers to any loss or abnormality of psychological, physiological or anatomical structure or function. Disability, on the other hand, refers to 'any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being while handicap refers to 'a disadvantage for a given individual, resulting from an impairment or

a disability, that limits or prevents the fulfilment of a role that is normal (depending on age, sex, and social and cultural factors) for that individual, (WHO, 1976).

Further more, the WHO classified disability as the consequence of impairment in terms of functional performance and activity by an individual (Avoke, 2005). This definition is widely accepted though strongly criticized by disability activists as a definition imposed by 'professional' (non-disabled) individuals. Disability activists note the emphasis on normality and on the individual's deficits or deviation from normality as the cause of disability. Many disabled persons have challenged this notion of disability and asserted that the problem of disability lies not in the impairment of function and its effects on them, but more importantly, in the area of their relationship with normal people (Crawshaw, 1994). Hull (2004) insists that disability should be viewed as a physical, sensory, or mental impairment that makes the performance of every day task more difficult. He further notes that some disabilities may be temporal and others relatively minor and can be modified by corrective measures. In his view disabilities classified as severe, as for example a physically disability, may not represent a handicap if the barriers that impede effective movement are removed.

Chadwick (1994) suggests that disability should be seen as the loss or limitation of opportunities that prevents people who have impairments from taking part in the normal life of a community on an equal level with others due to physical and social barriers. This definition shifts focus to the social construction of disability as a dynamic and culturally determined interaction between a person's individual function and the social meaning and response imposed upon that function. Disability, then, is the result of disabling social, environmental and attitudinal barriers. Social change, in this context, is about the eradication of oppression experienced by people with impairments. The social construction of disability is critical to understanding the nature and extent of people's perception of the sexuality of persons with disabilities and in particular women with disabilities. It is against this background that this study intends to find out how the sexuality of women with disabilities is perceived by undergraduate students.

Research questions

The following research questions will guide the study.

- 1. Which category of women with disabilities will be more sexually affected?
- 2. Which category of women with disabilities will be more preferred for a sexual relationship?

Research hypotheses

- 1. The perception by male and female students of the sexuality of women with disabilities is not significantly different.
- 2. The perception of students of Special Education and Counselling towards the sexuality of women with disabilities is not significantly different.

Methodology

The survey research design was used for the study. The population for this study comprised all the students during the 2006/2007 academic session in the Departments of Educational Foundations, Guidance and Counselling; Vocational and Special Education of the University of Calabar and eleven women with disabilities.

Forty-four students made up the total sample from the two departments. Out of this number 18 were from Guidance and counselling in the Department of Educational Foundations and 26 from Vocational and Special Education Department. Of the 44 respondents 25 were males while 19 were females. The choice of the two departments was largely informed by the relatedness of these fields to the subject of the study. The researcher

explored how the respondents' perception is in consonance with their training as professionals. More so, it is the intention of the researcher to use the findings from this study as a basis for further researches in the area.

A simple hat and draw method of simple random sampling technique was used to select the Special Education students respondents while the convenience sampling method was employed with the Guidance and Counselling students as well as the WWDs respondents. To collect data for the study, a researcher-developed questionnaire and a semi structured interview instruments were used. The questionnaire had two sections: Section A sought background information of the respondents while section B was a 20 item four scale likert questionnaire. Copies of the questionnaire to the Special Education students and the interview with the WWDs were personally administered and conducted by the researcher while a student leader of the Department of Educational Foundations, Guidance and Counselling administered copies of the questionnaire to Guidance and Counselling students.

The data were coded and analyzed using the matrix ranking, percentages and an independent t-test.

Results

Research Hypotheses

The first hypothesis stated that the perception of male and female students will not be significantly different. The t-test was used to test this and the result is presented in table 1.

Table 1: t-test Perception by male and female students of the sexuality of WWD

-	•				·	
Group	N	Mean	SD	t-observed	t-critical	Result
Perception by males	25	62.44	7.61			
				.147	1.96	Not Significant
Perception by females	19	62.11	7.43			

df = 42; p<0.05

Result in table 1 show that the mean for males was 62.44 while that of the females was 62.11whereas the standard deviation for males and females was 7.61 and 7.43 respectively. Therefore, there is no significant difference between the perception of male and female students on the sexuality of women with disabilities.

Table 2: t-test Perception by Special Education and Counselling students of the of sexuality of WWD

Group	N	Mean	SD	t-observed	t-critical	Result
Special Education Students	26	61.00	7.30			
				-1.40	1.96	Not Significant
Counselling Students	18	64.17	7.45			

df = 42; p<0.05

Data in table 2 show that the mean for Special Education students is 61.00 with a standard deviation of 7.30 while the mean for students of Counselling is 64.17 with a standard deviation of 7.45. Data using Levene's Test for Equality of Variance shows the t- observed to be -1.403. The hypothesis which was tested at the level of 0.05 further shows that there is no significant difference in the perception of students of counselling and special education and the establishment of sexual relationship by women with disabilities.

Research Questions

The matrix ranking was used to answer the two research questions as shown in tables 3 and 4.

Table 3: The Most Sexually Affected Disabled Women

Department	Physically Impaired	Mildly Retarded	Visually Impaired	Hearing Impaired	
Special Education	11	9	4	2	
Counselling	10	5	3	-	
Position	21	14	7	2	
Ranking	1 st	$2^{\rm nd}$	$3^{\rm rd}$	4th	

Score Range = 1 most sexually affected women; 4 the least sexually affected women.

In response to question one, respondents ranked the physically impaired as being the most affected; they were followed by the mildly retarded, the visually impaired and the hearing impaired emerged as the least affected of the women as shown on table 3.

Table 4: The Most Sexually Preferred Disabled Women

Department	Physically Impaired	Mildly Retarded	Visually Impaired	Hearing Impaired
Special Education	-	2	6	18
Counselling	-	3	2	13
Position	-	5	8	31
Ranking	4th	3rd	2nd	1st

Score Range = 1 most sexually preferred women; 4 the least sexually preferred women.

In order to answer research question two, respondents were asked to indicate the category of women with disabilities they will prefer most for a sexual relationship. Result shows that 31 of the respondents indicated that they will prefer the hearing impaired, 8 preferred the visually impaired while 5 preferred the mentally retarded. None of the 44 respondent chose the physically handicapped for a sexual relationship.

From the interview conducted, women with disabilities feel lonely, discriminated and isolated concerning issues of sexual relationship with the opposite sex. The interview findings show that women with disabilities desire a sexual relationship and want to be loved and appreciated as women. One of the women remarked;

"Which woman does not want to be loved? Are you saying that we are not women any longer because of our disabilities? We also do have emotional feelings like every other person but unfortunately the society does not see us as lovable persons".

Verbatim report of a visually impaired woman.

Another woman had this to say;

My sister, I want to be loved. I want to marry, have children and a family I can call my own. If I am not to be sexually active how can I achieve this. Disability does not mean impotency.

Verbatim report of physically impaired woman

Asked if they have ever been approached for a relationship by the opposite sex one of them had this to say;

Yes men do come to me but none wants to marry me. Some hide to come but none wants anybody to know that he is my friend. For now I don't want anybody again except the one who is ready to marry me. If none is ready I will prefer to stay this way but sometimes I feel one will be serious for marriage or a relationship.

Verbatim report of a physically impaired woman.

On the perceived sexual incapability of the disabled, one of them had this to say;

I am married and have two children. If I am not sexually capable how come I have children? The so called able people just think we are useless in everything.

Verbatim report by a blind woman.

A physically disabled woman reacting to the same question said;

I am sexually active and have a relationship right now with some one who loves me. People should not think that my disability affects my ability to get into a sexual relationship. The man is not deaf like me and we are happy and planning to marry soon.

Verbatim report by a deaf woman

Discussion

The results on table one show that male and female students do not have different perception of the sexuality of WWD. Likewise the result on table two shows that the perception of students of Special Education and Counseling on the sexuality of WWD is not significantly different. One, however, would have expected a significant difference in the two hypotheses noting the works and sensitization of the feminist movements across the globe and in particular the agitation of equity and equality treatment in Nigeria. One would have thought that women who are agitating for equal treatment would have had a more positive perception of the sexuality of their fellow women. Also one expected that Special Education students should be more knowledgeable in disability issues hence their perception would have been different.

The perception of WWD as non sexual beings has indeed affected the society's perception of their need for intimacy and even marriage. Asch & Fine (1988) and Hannaford (1989) stated that WWD when compared to both men with disabilities and non-disabled women, are more likely not to marry, marry later and be divorced if they do get married. These researches showed that while 60% of non-disabled women and men

with disabilities are married, only 49% of women with disabilities get married. Fine & Asch, (1981) equally states that when disability occurs in later life, women with disabilities are more likely to be left alone than men. Also men are more likely to divorce their wives who become disabled, while relationships rarely break down if it is the man who becomes disabled. Of the 11 disabled women interviewed only two said they were married (their husbands are also disabled); three said they were having a fulfilled sexual relationship though not married while the rest were not into any relationship even though they would have loved to. When the WWD were further asked if their disabilities were affecting their sexuality and sexual roles, nine (9) of the women said they were not affected while two confirmed their disabilities were affecting them. Interestingly, the two who said they were so affected are the physically impaired which confirms respondents rating that the physically impaired were the most sexually affected.

Although, Asch & Fine (1988) report that only women with mental retardation are likely to get into relationship and marriage than men with the same disabilities, the result of the study showed that 14 of the 44 respondents said the mentally retarded were the most sexually affected group of disabled women and only 5 of the respondents preferred sexual relationship with WWD

The results of the study show that women with physical disability are considered the least active and preferred for a sexual relationship. This is in line with Skyes and Ozoji (1993) who stated that quite often the disabled are regarded as non-sexual adults. For the physical disabled this is so because sex is more associated with youthfulness and attractiveness and when it is not, it is often seen as 'seemly'.

The findings equally revealed that majority of the respondents 31 of the 44 respondents preferred sexual relationship with the hearing impaired while only two of the 44 respondents considered them the most affected sexually. The preference for the hearing impaired may be attributed to the fact that hearing impairment is not very visible to people. More so, sexuality hardly involves the use of language which is the major handicap of the hearing impaired.

Recommendation

Sexuality should not only be seen as being physical. Doing so is to ignore other aspects of sexuality such as touching, kissing, playing, affection, and emotions. Even with the paraplegic and quadriplegic people, a loss of sexual function does not mean a corresponding loss of sexuality. Although sexual function may be impaired for some categories of disabilities, it can like other functions be increased. It has to be realised that even if the usual sensation of orgasm is lost, phantom orgasm can be experienced elsewhere in the body. The physical and emotional aspects of sexuality despite the physical loss of function continue to be just as important for disabled people as for non disabled people. Sexual expressions are natural and important parts of human life hence WWD should not be denied such basic rights.

It is therefore necessary that attitudinal change on the sexuality of WWD should starts from special education professionals and Para-professionals. The teaching and inclusion of sexuality education for the handicapped into the school sexuality and reproductive health education curriculum would be a step in the right direction.

Cultural barriers that deny disabled women the expression of their sexuality should be removed. Just like men with disabilities are able to establish meaningful relationships with the opposite sex the women with disabilities should equally be encouraged to express their sexuality and establish relationships with members of the opposite sex. Safe sex education should also be taught to women with disabilities to enable them live a fulfilled life in the society.

Conclusion

Many women with disabilities find it difficult to establish meaningful sexual relationships to enable them fulfil their social sexual needs which are essential for the psychological and emotional adjustment of human beings. This setback could be attributed to misgivings about the sexuality of women with disabilities.

Women with Disabilities like their counterparts are sexual beings and should be seen as such. It is important for educators, and non – disabled persons to understand community attitudes towards the disabled and their sexuality. Sexual fulfilment need not be seen as the physical but also emotional and psychological fulfilment. Disabled women like disabled men should be loved and given the opportunity to also love.

References

- Adler, A. (1969). **The science of Living.** Garden City, N.Y: Doubleday Anchor.
- Asch, A., & Fine, M. (1988). Introduction: Beyond pedestals. In M. Fine & A. Asch (Eds.), **Women with disabilities: Essays in Psychology, culture, and politics.** Philadelphia, P.A: Temple University Press.
- Avoke, M. (2005). Disabilities and the beliefs systems in Ghana. In M. Avoke. **Rudiments of Special Education.** Winneba. Special Educational Books.
- Brandenburg, S. (1998). Sex Education, Who is Limited? Knowledge, Skills & feelings of both parties. Paper presented at the Conference on Sex Education for Children and Young People with Visual Impairment. Scottish Sensory Centre, March.
- Chadwick, A. (1994). For disabled people the body is the principal site of oppression, both in form and what is done to it. **Australian Disability Review.** Vol. 4, pp. 36-44
- Crawshaw, G. (1994). Is there an urgent need for the development of a social model of impairment? **Australian Disability Review**. **4**, 27-35.
- Davies, J. (1996). **Sexuality Education for Children with Visually Impairments** <u>www.tsbvi.edu/Education/</u>
 <u>Sexuality-education</u> htm
- Fine, M., & Asch, A. (1981). Disabled women: Sexism without the pedestal. **Journal of Sociology and Social Welfare, 8**(2), 233-248
- Fromm, E. (1965). **Escape from feedom**. New York. Avon
- Hannaford, S. (1989). Women, disability and society. **Interface**, June, 10-12
- Horney, K. (1967). Feminine Psychology. New York: Norton
- Hull, Kent (2004). Microsoft Encarta Encyclopaedia. Microsoft
- Jung, C. G. (1969). **The structure and dynamics of the psyche** (2nd ed.). Princeton, NJ: Princeton University Press.
- Kalliances, V. & Rubenfeld, P. (1997). Disabled Women & Reproductive Rights . **Journal of Disability & Society.** Vol.12 Number 2, April. Pp 203-221
- Maslow, A.H. 91962). Toward a Psychology of Being. New York: Van Nostrand.

- Obi, F.B. (2002). Family background and premarital sexuality among secondary school adolescents in Cross River State-Nigeria. Unpublished PhD Dissertation. University of Calabar
- Rannveig, T. (1990) The Double Discrimination of Women with Disabilities. Centre for Human Policy. Syracuse Univeristy.
- Skyes, K.C. and Ozoji, E.D. (1992). Teaching Blind and Low Vision Children. Zaria. Ahmadu Bello University Press Ltd.
- Waxman, B.F. (1991). It is time to politicize our sexual oppression, **Disability Rag**, March/April pp. 23-26
- World Health Organisation (1976). International classification disability: Disability Discrimination Act. London: HMSO.