# 11 Gender-based violence against women with disabilities

Prevalence and experience<sup>1</sup>

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# 11.1 Introduction<sup>1</sup>

This study aims to investigate the prevalence and experiences of gender-based violence against women with disabilities in Chinese communities. A mixedmethod study is applied by conducting a questionnaire survey with 80 women with disabilities to draw an overview of prevalence and nature of violence, survivors' coping strategies, and challenges in seeking help, as well as three in-depth interviews to outline the experience of partner violence against disabled women. According to the results of the survey, 30% of the respondents reported having experienced domestic violence, 34% have experienced sexual harassment, and four respondents indicated that they experienced sexual violence. A total of 66% of the respondents who experienced domestic violence reported that they did not seek help and 85% of the respondents who experienced sexual harassment did not seek help. For those who experienced sexual violence, none of them sought help. Findings from interviews echo the results from the questionnaire survey. Interviewees further shared their experience in terminating partner violence. Recommendations for policymakers and service providers are provided.

# 11.2 Background information

According to research and studies on gender-based violence against people with disabilities over the years, women with disabilities face a higher prevalence of domestic and interpersonal violence (Hughes et al. 2012; Krnjacki et al. 2016; Ruiz-Pérez et al. 2018). The World Health Organization (2017) defines violence against women as "any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life." Interpersonal violence,

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as a broad definition of violence against women with disabilities, implies all sorts of violence in the various relationship with family members, spouse, or even paid caregivers. However, this study mainly focuses on violence conducted by family members and intimate partners. The term "domestic violence" implies violence with family members. As for intimate partner violence, it means any acts by an intimate partner which cause harm physically, sexually, and psychologically (World Health Organization 2017).

In terms of partner violence, women with disabilities tend to experience more extended periods of abuse in various forms perpetrated by their spouses and live-in partners (Hasan et al. 2014; Ruiz-Pérez et al. 2018). Compared to women without disabilities, women with disabilities may experience hostile comments and humiliating behaviours targeting their disabilities, denial, or excessive use of medical devices/exercises or forced sexual activities in exchange for help (Nosek et al. 2001).

While caregiving stress is a significant factor contributing to high risk of partner violence against women with disabilities (Salwen et al. 2016), other contributing factors include low level of education, poverty and unemployment (Krnjacki et al. 2016), unmet needs of partners (e.g., needs for intimacy and sex), and dissatisfactory relationship (e.g., constant argument and conflicts) (Copel 2006; Salwen et al. 2016). Since women with disabilities depend on caregivers for daily living activities, they feel reluctant to escape and tend to stay in the abusive relationship (Nosek et al. 2001; Young et al. 1997). Disabled survivors suffer both physical consequences (such as bruising, unwanted pregnancy) and psychological consequences (such as depression, post-traumatic stress symptoms, and suicidal thoughts, etc.) which may, in turn, lead to challenges in school performance, social life, and daily activities (Bonomi et al. 2018).

Such an abusive relationship not only has impacts on their physical and psychological wellbeing but also influences their self-identity. Ogińska-Bulik (2016) points out that these traumatic experiences would twist the way they interpret the traumatic events and distort their beliefs and their relationship with others. Kearney (2001) describes the "shrinking of self" of battered women with disabilities in the sense that they tend to ignore the patterns of abuse and the escalated risks in the hope to maintain their intimate relationship and families to fulfil the role as "normal" women who fit social and cultural expectations.

Violence against women without disabilities is well documented in qualitative research, but the complicated situation and experience of intimate partner violence against women with disabilities are still under-researched, in particular, the relationship between disability and violence (Copel 2006; Krnjacki et al. 2016). Hegarty et al. (2013) raised the necessity of understanding the special needs of women with disabilities who experience violence since it determines what support from mainstream helping professionals is adequate. Research has indicated that Asian women are more vulnerable to physical and sexual violence (McFarlane et al. 2001). Nevertheless, domestic violence and its potential consequences in Chinese contexts require further research.

This article is based on a mixed-method study on gender-based violence against women with disabilities in Chinese communities. An online survey was first conducted to outline the prevalence and nature of violence, survivors' coping strategies, and challenges in seeking help. Biographical narrative enquiries were followed to explore how women with disabilities face and cope with intimate partner violence.

#### 11.3 Methodology

The study adopts an explanatory sequential mixed-method design suggested by Creswell (2014) in the hope of combining quantitative and qualitative approaches to gain comprehensive understanding of gender-based violence against women with disabilities. The quantitative survey aims to provide an overview of the landscape of gender-based violence against women with disabilities, while the in-depth interviews aim to provide detailed portraits of their lived experiences in different phases of violence. The preliminary quantitative survey provides information to formulate interview questions as well as assists in the selection of suitable participants for the qualitative study.

For the initial quantitative survey, 80 Chinese women with disabilities were recruited, and informed consent acquired, to complete a set of online questionnaires via social media platforms and the website of the Association of Women with Disabilities Hong Kong (AWDHK) during summer and autumn in 2018. The ethical approval of the study was obtained by the AWDHK. Such an online survey method has been commonly applied in social science research and intervention (Chan and Holosko 2016; Chan 2018). The questionnaire was developed based on a survey conducted by the Hong Kong Women's Coalition on Equal Opportunities in 2013 (HKWCEO 2013). The survey focuses on the disability-related and socio-demographic characteristics of women with disabilities, the nature and experience of violence, as well as their coping strategies. Data were analyzed by SPSS.

For the qualitative study, three in-depth interviews were conducted using a biographical narrative enquiry approach in which participants are active interpreters and reporters and share their genuine construction and interpretation of their stories (Kim 2016b). The ethical approval of the qualitative study was obtained by the Human Subjects Ethics Sub-committee of Hong Kong Polytechnic University and AWDHK. Participants were referred by AWDHK and its network partners in China.

Biographical narrative enquiry invites participants to share their stories during which researchers could understand their lived experience related to interpersonal violence and their perceptions of their life and prominent factors affecting their decisions of seeking help or not. Clandinin and Rosiek (2007) have highlighted that narrative enquiry not only focuses on the personal experience, but also on how the experience is being "constituted, shaped, expressed, and enacted" in social and cultural contexts. Narrative enquiry allows researchers to understand the experience and behaviours of individuals, how they face life challenges, and their solutions, as well as how they respond differently from time to time. Through storytelling, participants share their experiences, emotions, perceptions, and beliefs, and project their reality to researchers (Kim 2016a).

The interviews were conducted in Cantonese or Putonghua (Mandarin), audiotaped with permission from participants, and transcribed verbatim. The duration of the interview was approximately 2 hours. The narrative enquiry consists of two interview phases: 1) Narration Phase: participants have an opportunity to provide full extensive narration of their experience and life stories without interruption from the researchers. The researcher takes notes on the story and the participants' non-verbal expressions, and writes down observations; 2) Conversation Phase: an in-depth semi-structured interview with the researcher. The researcher co-constructs the experience with participants by using narrative questions (Kim 2016a). Transcripts were then analyzed and coded using thematic content analysis (Saldaña 2016). Some quotes were selected to translate into English and included in the article bearing in mind carefully the meaning of the quotes and the values they reflect in Chinese culture (Wong and Poon 2010).

# 11.4 Limitations

The study has its limitations in many ways. First, the online survey was limited to a small group of women with disabilities who can access the internet. They are more educated with higher technology literacy. Data from the online survey cannot illustrate the detailed picture of gender-based violence against women with disabilities. We can only see the findings as a preliminary outline of this topic concerning the Chinese community. Furthermore, the interviews were limited to partner violence against women with disabilities. These findings may not apply to other forms of interpersonal violence such as violence by parents, family members, and paid caregivers.

# 11.5 Results

# 11.5.1 Demographics of participants

Eighty women with disabilities participated in the online survey. Among the 80 respondents, about 34% are 21–30 years old; over 98% reported having received secondary education or above; 68% were living with family members at the time of the research; 96.25% have indicated that they have physical disabilities; 68% are wheelchair users while nearly 24% use walking aids (Table 11.1).

Three participants for the qualitative research were Penny, Hung, and Yan, respectively 60, 58, and 34 years old. All of them were physically disabled and were divorced by the time of the study. Penny and Hung have to raise their children by themselves. Yan lived in mainland China, and the other two lived

Background Characteristics	Frequency	%
Age		
18–20	3	3.75
21-30	27	33.75
31-40	26	32.5
41-50	15	18.75
51 and above	22	27.5
Type of Disability*		
Physical disability	77	96.25
Visual impairment	2 7	2.5
Hearing impairment	7	8.75
Mental illness	16	20
Use of Aids*		
Power wheelchair/wheelchair	55	68.75
Walking aids	19	23.75
Hearing aids	4	5
Do not need aids	23	28.75
Highest Education Level		
Primary education	1	1.25
Secondary education	37	46.25
Tertiary education and above	42	52.5
Monthly Income and Subsidies (USD)		
No income/subsidies	12	15
\$1,000 or below	16	20
\$1,001-\$2,000	15	18.75
\$2,000-\$3,000	10	12.5
\$3,001 or above	17	21.25
Living Environment		
Living in institution	2	2.5
Living with family	55	68.75
Living with friend	3	3.75
Living with caregiver	1	1.25
Living alone	19	23.75
N	80	

Table 11.1 Characteristics of the survey participants (N=80)

\*Participants can have multiple choices if applicable to their profile.

in Hong Kong at the time of research. Penny has heart problems since childhood and acquired physical disability and depression when she reached middle age. Both Hung and Yan are physically disabled and have used walking aids from a young age.

# 11.5.2 Overview of the prevalence of interpersonal violence among participants

Among 80 respondents in the online survey, 24 respondents (30%) reported having experienced domestic violence. Among the 24 respondents, over 80%

Frequency and Prevalence of Interpersonal Violence	Domestic Violence (N=24)		Sexual Hara (N=27)	ssment	Sexual Violence (N=4)	
	Frequency	%	Frequency	%	Frequency	%
1–3 times	4	17	9	33	2	50
4–6 times	4	17	12	12	0	0
7–9 times	2	2	2	2	1	25
10 times or more	14	58	3	3	1	25

Table 11.2 Frequency and prevalence of interpersonal violence

have experienced domestic violence at least once. Twenty-seven respondents (34%) reported having experienced sexual harassment, and four respondents indicated the experience of sexual violence. Among those respondents who reported sexual harassment, 45% of them experienced this at least once in their lifetime. Table 11.2 covers the prevalence of interpersonal violence among participants.

"Home" is the most common place where violence incidents take place according to the research. Out of the 24 participants who reported domestic violence, 96% indicated that violence took place at home; 2 among the 4 participants who reported sexual violence indicated that violence occurred at home.

In terms of perpetrators, 11 out of 24 (46%) who reported domestic violence were abused by their mothers, 9 (38%) reported being abused by their fathers, and 33% by other family members. For sexual violence, two out of the four respondents reported being abused by intimate partners and spouses and one by family members. The majority (70%) of participants who reported sexual harassment indicated being harassed by strangers.

Among the three interview participants, two informants reported having experienced domestic violence for over a decade. Penny reviewed her experience with her ex-husband and said, "I always felt threatened over the thirty years of our marriage. He wanted me to compromise by threatening me."

Both Hung and Yan have mobility impairments, and they shared their urges to search for a non-disabled partner. Yan said:

when I was 25 years old, I was in an urge to find a partner and get married as soon as possible. Because of the impairment with my leg, I felt insecure and anxious about intimate relationship and marriage. The social norm taught me that girls with disabilities like me should put all her efforts into searching for a partner. If I couldn't find a partner before I reached a specific age, I would become a "left-over" woman. The most important is that he needs to be a non-disabled person. I believe dating a non-disabled person can compensate for my flaws and disabilities on my body.

#### 11.5.3 Nature of interpersonal violence

Among the 24 respondents reporting domestic violence, over 90% experienced verbal violence. Over half of them experienced physical violence such as spanking and hitting. Among 27 respondents who reported sexual harassment, about 66% experienced physical harassment; over 50% were harassed by indecent jokes and abusive speeches related to sex. Over one third received sex-related comments. Among the four respondents who reported sexual violence, two experienced combined forms of sexual abuse from unwanted touching and forced oral sex to forced intercourse (Table 11.3).

Women with disabilities often find it challenging to identify their experience as violence for several reasons. Firstly, they have low awareness of interpersonal violence. They usually interpret the experience as disputes and fights that are common in ordinary families (Brownridge 2006). Copel (2006) attributes such lack of awareness to their low self-esteem, sense of shame for their disabilities, and devaluing themselves to be "deserved" for mistreatment. "I did not see it as a violence issue in the first incident. After numerous times of being dragged to the street corner and beaten, I realized it was violence when I saw my head bleeding," said Yan.

Secondly, their experience of violence often is closely connected to their disabilities. Disability-specific abuse can be restraining the use of needed medical equipment (e.g., wheelchairs) or essential communication aids, or withdrawing necessary help with daily chores (e.g., dressing, toileting, and bathing) (Nosek et al. 2001; Saxton et al. 2001). Yan shared:

Types of Interpersonal Violence	Frequency	%
Domestic Violence		
Prevalence	24/80	30
Verbal insult/threats	22/24	92
Physical violence	14/24	58
Surveillance/stalking	7/24	29
Prohibition of contacting others	6/24	25
Sexual Harassment		
Prevalence	27/80	
Harassing your body	18/27	66
Indecent or abusive speech or jokes	15/27	56
Allusions/comments related to sex	9/27	33
Acts of indecency or exposure in front of you	8/27	30
Sexual Violence	,	
Prevalence	4/80	
Harassing your body	2/4	50
Forced intercourse against your will	2/4	50
Forced oral sex	2/4	50

Table 11.3 Types of interpersonal violence

he said marrying me was a remarkable thing for me because no one would be willing to marry a disabled person like me. However, disability is part of me. If he looks down on me due to my disabilities and considers that I should be grateful for being married to him, I feel I am being demeaned in this relationship.

Both Hung and Penny shared how their ex-husbands mocked about their body shapes. Penny looked back to the old days when they were dating:

women are unfairly treated by men since they were born. He could do whatever he wanted as I had no choice. He raped me at his sister's empty home during a date. I did not know how to respond. I just forced him to be responsible and marry me. Since then, he forced me to cooperate in rough sex. He then started to complain that I couldn't satisfy him sexually...he said I was like a corpse in bed. He said he felt like necrophilia. These words were very hurtful, but I couldn't tell my friends and family members.

Thirdly, due to their disabilities, they often depend on their ex-spouses to work and handle their financial matters. Yan made and sold handicrafts at home, and her ex-husband was the breadwinner. Penny was financially dependent on her ex-husband, who was a businessman. But in many cases, they needed to help their ex-husbands with their financial issues. Besides not paying off their debts, they also both reported that their ex-spouses withdrew their bank savings without their consent. Such a situation may be attributed to their trust in their ex-spouses but is also due to their physical disabilities since they depended on their spouses to visit banks and monitor their accounts. Hung said:

Since 1989, he started to borrow money from me and everyone. We used to have a joint bank account to save money to pay for our taxes. I have a habit of saving money as it is part of my personality. However, he was a big spender and left nothing by the end of the month...but in 2000, he asked for my tax records for loans. At that time, I realized that our joint bank account had no money left.

Penny depended on her ex-husband to manage her bank savings as long as he brought cash home for her daily living. While he no longer did so, she took the effort to check her bank account and was shocked because her account had only a few cents left in it.

Another commonly identified form of violence by the interviewees is social isolation. Penny shared how she was confined at home after major surgery on her leg. Her ex-husband unwelcomed her children, siblings, or friends to visit her. She was also not allowed to leave home and was dependent on the guard in the community to purchase food and daily supplies. She further shared, "I started to use Facebook and add new friends. When he found out my

Facebook, he accused me of searching for compensated dating." Both Penny and Hung found out that their ex-husbands tried to create tension between them and their children. At first, they thought it was a parenting issue, but soon they found out that their ex-husbands' intention was to create disagreements between them and the children.

My ex-husband thought that his son would bring him luck. When I asked my son to do his homework, he came to tear off his homework paper and said, "my son doesn't need to learn, he just needs to bring me luck." In the beginning, I thought he had his own parenting style, but I realized that he intentionally did so to spoil our son to create a sense of competition between mom and dad. He always described me as a tough commander who ruled the family and offered no room for negotiation. He always warned my children saying that "your mother is hiding a lot of money and one day, she will leave us."

Penny no longer contacted her youngest son after she had a big fight with her ex-husband. After the fight, her son followed his father's instructions to slap her in public. Penny realized that her younger son had much misunderstanding about her and she could hardly rebuild their relationship.

In general, the three interviewees reported a pattern of mixed forms of violence. Hung shared how violence escalated from time to time:

he used to asked me for money and argued with me. After several times, he started to shout at me and called me names. When he found that these tactics did not work, he would throw and tear things at home. I got so scared, so I gave him money again. Then, he started to be violent to my children. Sometimes he made them in between of our arguments and would scold them if they did not support him.

# 11.5.4 Challenges in seeking help and escaping abusive relationships

According to the online survey, 66% of the respondents who experienced domestic violence reported that they did not seek help, and 85% of the respondents who experienced sexual harassment did not seek help. For those who experienced sexual violence, none of them sought help. The majority explained that they "did not know how to respond" and were "forced to accept" what happened. Some of them even "pretended as if nothing happened." Very few of them chose to express their fear and anger. They were reluctant to seek help from significant others, helping professionals, or police. Table 11.4 covers an overview of their responses. The main reasons for not seeking help include that they thought "seeking help is useless," they "did not want to make it more complicated," "did not want others to know," and they "worried that it would affect the current relationship" (see Table 11.5).

Response to Interpersonal Violence	Domestic Violence (N=24)		Sexиa (N=4)	l Violence	Sexual Harassment (N=27)		
	%	Frequency	%	Frequency	%	Frequency	
Forced to accept	46	11	100	4	41	11	
Do not know how to respond	38	9	25	2	37	10	
Pretend nothing happened	25	6	50	2	37	10	
Stare with anger	17	4	0	0	7	2	
Escape	8	2	25	1	11	3	
Scream	4	1	0	0	7	2	
Fight back	13	3	0	0	0	0	
Tell family and friends	8	2	0	0	19	5	
Seek help from organizations	17	4	0	0	4	1	
Call police	8	2	0	0	0	0	

Table 11.4 Response to interpersonal violence

Table 11.5 Reasons for not seeking help

Reasons for Not Seeking Help	Domestic Violence (N=24)		Sexual Violence (N=4)		Sexual Harassment (N=27)	
	%	Frequency	%	Frequency	%	Frequency
Seeking help is useless	38	9	50	2	33	9
Do not want to make it more complicated	21	5	25	1	30	8
Do not want others to know	33	8	25	1	30	8
Feel shameful	8	2	75	3	26	7
Worry will affect relationship	29	7	50	2	1	5
Worry others will blame me	21	5	25	1	19	5
Abuser/predator escape	0	0	0	0	19	5
Do not know how to seek help	8	2	25	1	15	4
Afraid of troubles	13	3	25	1	15	4
Uncertain if it should be defined as violence	17	4	25	1	11	3
Worry abuser will be harmful to me	13	3	25	1	4	1
Worry that people will not believe me	21	5	25	1	4	1
I already seek help	17	4	0	0	11	3

All interviewees' experiences on violence basically can fit into the model of "Cycle of Violence," a commonly used framework describing abusive patterns in heterosexual relationships (Fisher and Lab 2010). The model contains three main phases: 1) Tension-building phase: stress (e.g., a tough day at work, personal issues, etc.) creates constant discord, impatience, and anger in relationship; 2) Acute battering phase: as tension in the relationship explodes, abusers conduct verbal, physical, or psychological violence to the other to gain the power to control the relationship; 3) "Honeymoon" phase: both parties make apologies for reconciliation, but they tend to deny the severity and occurrence of violence instead of solving problems and tensions in the relationship. For instance, Hung described financial issues as the trigger of their tension and how she tried to give him money to calm the tension. She shared:

I thought as long as I helped him to pay the debt this time, he may finally stop making the same mistake and affect our children and me. I just hoped he would change for the family. I did not think of divorce because I wanted a happy family. I granted an opportunity for us to get rid of the debts together. However, he could hardly stop for a few months, and a similar argument happened again and again.

Yan identified how she noticed the pattern: "once he felt upset, he would beat me... Every time after beating me, he would apologise and bought me new dresses. No matter how I felt, I was forced to have sex with him as reconciliation."

The interviewees shared how they tried to sacrifice for the marriage and family by rationalizing their experiences as part of the social norms in Chinese communities. Their gender role as wives and mothers is socially constructed as a sacrificing one in the family. For women with disabilities, they have to work even harder to earn recognition as a wife/ mother in the family. Hung recalled:

I knew that my mother-in-law was not happy that her son married a disabled person. I had no idea how to be a daughter-in-law nor gaining acceptance from my mother-in-law. However, my mother taught me to be obedient and hard-working on the housework. I never gave myself any time to relax.

Hung continued:

my mother repeatedly told me that I had to bear the hardness for my children. I had to suck it up as traditionally, women had to suffer and bear the pain to keep the family as a whole. I must accept it as part of motherhood. She walked through the path by accepting it. Penny's narrative echoed Hung's:

my mother warned me that there were no better options in such an unpleasant marriage. She simply said, "never mention the word [divorce] with me..." I thought of the senior family members and two young children, so I decided not to talk to anyone. It is so common that men are tempered and swear with anger. But he acted so "normal" in our social gatherings. What can I say? I am the only person who knows I'm not happy in the marriage.

All interviewees shared their unpleasant experiences in seeking help. They rarely earn the recognition of their sufferings from significant others, if not getting blamed. Penny shared with her sisters her intention to divorce after her son's wedding: "my sisters strongly disagreed. They asked me not to make a scene after these many years of marriage. Moreover, my son just got married, how would my daughter-in-law and her family see me? They said I was too capricious." Yan recalled her experience in seeking help from her parents:

I hate them for all of my life. I called them when I was beaten half to death. They refused to come and see me. They said that I was now over 18 years old, this was my family issues which had nothing to do with them. I felt so hopeless. I had no one to turn to.

The interviewees not only sought help from significant others but also approached formal support such as social workers, lawyers, and the police. Hung approached social workers for help, but she recalled why she withdrew at the end:

the social worker said if my ex-husband was violent, I could apply for a safe house. However, since my elder child reached the age of 15, I could only bring my youngest child with me. I didn't want to separate from him, so I decided not to go.

Yan also described the re-traumatizing experience of seeking help from the police:

there was a time I called the police for help. When police arrived, they were not helpful and blamed me for doing something wrong as if I deserved it. Since then, my ex-husband became more violent as he knew that the police would not take care of these issues. I lived in fear and tension at home.

Interviewees also shared their feelings of helplessness, despair, depression, and anxiety. Although their experiences of violence were from decades ago, both Hung and Penny still required psychiatrist counselling and medication.

Their situation echoes Walker's concept of "learned helplessness" and "battered woman syndrome," which describe the psychology of battered women being chained in the cycle of violence (Fisher and Lab 2010). According to the "learned helplessness" theory, battered women tend to learn to give up making any efforts to escape from abusive relationships since repetitive, abusive experience has presented a distorted reality that they have no opportunities to escape. However, the interviewees consistently reflected on the situation and explored ways out. Hung described, "I was so disappointed. There was no more love in our marital relationship. I just couldn't bear it anymore. I was determined to end this relationship."

# 11.5.5 Getting out of the abusive relationship

Although quantitative data did not provide details on how respondents sought to get out of the abusive relationship, the interviews have provided detailed descriptions of how they navigate for more recognition and support from others and their hopes for a new life. Yan shared:

in the beginning, I thought I was wrong, but I no longer felt that way later. I just felt I couldn't continue living my life this way. During my childhood, my mother got beaten by my father, and they still stuck together all of their lives. However, I didn't want to live my life like her. I had no more feelings of hope for him. I just thought I should leave if I didn't want to live my life this way.

All interviewees shared that the turning point in their abusive relationship was the recognition of the severity and consequences of such a relationship. Hung described the sudden drop in her son's academic performance as a wake-up call:

I was not a tough person, but I was forced to be tough to protect my two children. My elder child was a top student in school. He always got the highest score in mathematics, but he failed that year. I was so surprised to find out that he was under great stress and anxiety. It turned out that he had to see a psychiatrist.

Yan echoes how her ex-husband finally became aware of the consequence of such an abusive relationship. She said:

I started to doubt my life, thinking why I was living in hell. I had no more feelings for him. All I wanted is to leave, but he didn't want to divorce. One day, he beat me again, and I accidentally cut his hand by waving a knife to protect myself. He called the police, and this time, the police convinced him to divorce. The parents of my ex-husband worried that similar situation would occur again. Therefore, he agreed to divorce. All interviewees shared their experience in seeking help and support from others to escape from or terminate the relationship. Penny's social worker provided her with a legitimate reason for divorce: "when I found that I had no more money, my social worker said you could apply for Comprehensive Social Security Assistance (CSSA) Scheme, but you need to divorce. I was so relieved as I could finally terminate this marriage and get help to live independently." Hung shared her experience in getting help from her sister and friends:

my sister came to pick us up at my home at midnight. My ex-husband didn't dare to open his door to face my sister. I asked my children's opinion as I explained, "once we step out of the door, we will never return." My children supported my decision to follow my sister. She provided a bedroom at her home as a temporary shelter. Also, I had a friend, who was a parent of my children's schoolmate, to help me to pack up our stuff from my home.

Penny explained that although her sisters did not support her decision to divorce, she had a group of friends who sympathized with the situation. Although she felt disappointed about the dispute with her sisters, she decided to take her sisters' opinions less seriously.

In general, their narratives fit in Kearney's (2001) "4 stages to step out of abusive relationship": stage 1, "this is what I wanted": women usually choose to see early violence as self-sacrifices for their loving relationship; stage 2, "the more I do, the worse I am": women realize their self-sacrifices and temporary solutions are no longer useful to pacify the constant tension in the relationship; stage 3, "I've had enough": women reach a turning point when they find it challenging to tolerate violence in the decayed intimacy; stage 4, "I have found myself": women rebuild a life with new life goals, new homes, and new relationships with others. Despite facing grief and traumatic feelings from past relationships, they often identify significant personal growth with better self-efficacy.

# 11.6 Discussion

As shown, women with disabilities faced all sorts of violence for long durations. Such violence is strongly correlated to their disabilities and gender. They have been taught to be dependent on others to navigate their daily lives and were rarely aware that they have a choice to reject unequal abusive relationships. Triggers of the violence can be caregiving stress, financial issues, as well as unsatisfactory interpersonal relationships. A core issue here is their belief that they could only count on their significant others although they were the perpetrators. According to the questionnaire, they tend not to take any actions to fight against violence due to lack of planning and awareness. According to our interviewees' sharing, they faced challenges in reporting violence in fear that they would not be treated seriously by their significant others and helping professionals. "Blaming the victim" also has made them less willing to denounce the violence.

Social discourses on disability and gender have a significant impact on women with disabilities in terms of their self-esteem and beliefs on their roles in a relationship. Since women with disabilities are strongly stereotyped as "damaged goods," they are mistreated by their significant others, and as a result, they see themselves as less worthwhile and powerless in a relationship (Ballan and Freyer 2012). For example, Hung was taught by her mother that she had to work harder at home to earn the acceptance of her mother-in-law. She was frustrated that giving birth to two children and helping her husband's debts did not gain approval from her mother-in-law.

Goldstein and Johnson (1997) point out that partners of people with disabilities are also being stigmatized due to their association with disabilities. According to Yan, her ex-husband considered himself as "kind enough" to marry her despite her disability and thought that she should be grateful. Wisseman (2000) has also reported the myth among people that anyone willing to be a partner of a woman with disabilities is kind-hearted and even a "saint." For this reason, women with disabilities have been discouraged from complaining or will be seen as being "too capricious" if they do, as described by Penny. Such biases affected how Yan found seeking help from police a retraumatizing experience as she got blamed by the police. In sum, women with disabilities tend to feel they are less valuable and powerful in marriage. They usually do not know how to navigate the power relationship with their partners and find it very challenging to deal with domestic violence.

One of the core factors behind women with disabilities' vulnerability for interpersonal violence is that the social structure has hindered their opportunities to be physically and financially independent. Yoshida et al. (2011) found that low household incomes have strong correlation with interpersonal violence for two main reasons. Firstly, women with disabilities are financially dependent on their spouse and family members. Secondly, lack of social support and resources lead to poverty among families of people with disabilities. For example, the government provides limited allowance for caregivers. Our online survey has revealed that the majority of respondents completed secondary education and may earn a reasonable income. However, according to our interviews, despite the fact that they were able to earn enough money for living, they still considered their ex-husbands as the core breadwinners. Besides financial dependence, the interviewees shared their expectations of having a non-disabled spouse and getting support for daily activities. Penny depended on her ex-husband to visit the bank. Yan considered herself a housewife and spent most of her time at home. Hung decided to withdraw from the disabled community because of her marriage. Social isolation is also the main barrier for them to engage with society and others.

Our online survey has shown that very few women with disabilities sought help to fight against interpersonal violence, but our interviews demonstrated more agency. Women with disabilities constantly face a lot of discouragements and challenges when they seek help from significant others. However, rejection and blame from others did not stop the interviewees from seeking acceptance and support from others. Hung did not leave the apartment until her sister came to assist her departure and, most importantly, offering her bedroom as a temporary shelter. Penny and Yan did not have much support from their families, but they valued the emotional and practical support from their friends. They reported a lack of support from helping professionals and agencies. Penny's social worker suggested she apply for social security allowance when she was in need. Hung decided not to go to the safety house not only because she could not bring her teenage child with her, but also because she lacked information about the services. Yan considered that police could not handle violent incidents against people with disabilities.

#### 11.7 Implications

The findings of this research provide some insights for policymakers and service providers. Firstly, it is essential to further develop research and collect statistics and data related to interpersonal violence against women with disabilities. Such information will facilitate strategic planning and policymaking to build support networks for battered women with disabilities.

Secondly, it is essential to promote the independence of women with disabilities. To be more specific, a barrier-free social environment is critical so that they can engage with society. Policymakers should also provide support to family members of women with disabilities.

Thirdly, it is important to raise awareness of individuals with disabilities, their family members, and friends as well as helping professionals. This article has illustrated the power of informal support networks as the resources for help among women with disabilities. For service providers and helping professionals, it is vital to enhance their capacity to address violence against women with disabilities.

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