Gender-based violence against persons with visual impairment and their coping strategies in Kumasi metropolis, Ghana

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ABSTRACT

Gender-based violence has profound effect on persons with disability; especially the visually impaired, as records showed that such victims barely report gender-based violence to the police. Persons with visual impairment who suffer from gender-based violence are at risk of sexual transmitted infection and psychological distress. The study was conducted to find out the type and perpetrators of gender-based violence experienced by visually impaired persons, the coping strategies adopted by visually impaired persons who experienced gender-based violence, the roles of police in handling gender-based violence against the visually impaired and effects of gender-based violence on persons with visual impairment. The study selected 15 visually impaired person respondents. Snowballing sampling was employed in the study. Interview guide was the main tool used to collect qualitative data from the respondents. Thematic approach was used to analyze the results. The study found that visually impaired persons experience physical, psychological and sexual violence in marital unions within the study area. It was concluded that most perpetrators of gender-based violence were mostly relatives and husbands of victims. It was concluded that gender-based violence has effects on visually impaired women and that visually impaired women who are battered were at greater risk for suicide attempts, injury, lack of love and trust in marriages and marital break down, genital injuries, unwanted pregnancy and abortion. It was however suggested that gender-based violence could be curbed if there were counselors and therapists to educate couple on its effects, implementation of laws and punishment for perpetrators of gender-based violence.

Keywords: Ghana, gender, visually impaired persons, violence

INTRODUCTION

Gender-based violence is a world-wide phenomenon and derives its root from the time society started differentiating roles between women and men. On the basis of the nature of the roles, society started to perceive men’s roles as being superior to those of women and as such the status of men was given a superior position that resulted in power imbalances and consequently abuse (Campbell, 2013). This phenomenon cuts across class, age, race, religious and national classifications (UNICEF, 2014). Article 1 of the UN Declaration on the Elimination of Violence against Women (DEVW), proclaimed by the UN General Assembly in its resolution 48/104 of 20 December 1993, defines the term “violence against women” as any act of gender-based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women (UNICEF, 2014). In Europe, violence towards women was a common aspect of marriage since medieval times (Ellis, 2010). Up until the nineteenth century, there were no laws in the United Kingdom prohibiting a man from physically abusing his wife (Bergen, 2006). In most African cultures, gender-based violence is often socially condoned, therefore, making it more frightening (Akiba, 2012). Also, the inequality existing between women and men fostered by culture has perpetuated gender-based violence against persons with disability including the visually impaired individuals, and this reflection of culture in the law has made it inadequate in offering protection to women as victims in many African countries. The situation is not different in Ghana. Although Ghana has demonstrated commitment and political will to deal with gender-based violence at various levels through the Domestic Violence Act, gender-based violence remains a major constraint and leading cause of marital instability in Ghana (Wingood, 2007). However despite many efforts been made to protect victims of gender-based violence and police having made some reforms in responding to gender-based violence, the number of gender-based violence has continued to escalate especially against persons with visual impairment (Domestic Violence and Victims Support Unit [DOVVSU], 2017). Reports from DOVVSU (2017) indicates that victims of gender-based violence against visually impaired persons has increased

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between the periods of 2010 to 2016 in the Ashanti Region. Then again, despite many efforts in eliminating gender-based violence at the international, regional and national level, the problem continues to escalate. Many perpetrators of gender-based violence against persons with visual impairment have continued to avoid justice owing to the fact that few cases are not being taken to court. Chuulu et al. (2011) points out that whereas many cases of gender-based violence are reported to the victim support unit, very few of them are prosecuted. For example, a review on the statistics at the DOVVSU (2012) records indicate that out of the total forty three (43) cases reported in 2010 only one (1) was taken to court, representing about two percent while 18 cases representing forty two percent were withdrawn, 24 cases representing fifty six percent were still under investigation. Gender-based violence has profound effects on persons with disability especially the visually impaired, as records showed that such victims barely report gender-based violence to the police. Research has shown that persons with visual impairment who suffer from gender-based violence are more likely to do so in the hands of their relatives and closer one (Dunkle, 2013). Persons with visual impairment are victims of gender-based violence, because their only option of freedom is when they are with close relatives who feel pity for them and most of them fear to report the individual who perpetrates such acts against them (Campbell, 2013). This shows that gender-based violence can easily results in mistrust if not properly handle. The major problem associated with gender-based violence is that persons with visual impairment who suffers from any form of violence is seen to be associated with cultural norms and practices which make them the weaker and more vulnerable (Decker, 2009). Gender-based violence against visually impaired persons in the Kumasi metropolis, Ghana has several health implications on victims. It can lead to reproductive health problems for women as well as physical injury. This study therefore seeks to find answers to gender-based violence against visually impaired persons in the Kumasi and their experiences in relation to gender-based violence.

**Objectives of the Study**

This study sought to examine gender-based violence against persons with visual impairment in the Kumasi Metropolis, Ghana. However, this study specifically sought to:

1. Identify the perpetrators of gender-based violence and the types of violence perpetrated against persons with visual impairment.
2. Explore the coping strategies persons with visual impairment adopt in dealing with gender-based violence.
3. Find out the roles of the police and law enforcement agencies in fighting against gender-based violence.
4. Investigate the effects gender-based violence has on persons with visual impairment.

**Literature Review**

There is no universally accepted definition of gender-based violence. Some human rights activists prefer a broad-based definition that includes “structural violence” such as poverty, and unequal access to health and education. Others have argued for a more limited definition in order not to lose the actual descriptive power of the term. In any case, the need to develop specific operational definitions has been acknowledged so that research and monitoring can become more specific and have greater cross-cultural application (WHO, 2005). The United Nations Declaration on the Elimination of Violence against Women (1993) defines violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life (UN, 1993). Gender-based violence is in most cases violence perpetrated by men against women. Women can also be violent, but their actions account for a small percentage of gender-based violence. Gender-based violence against women is often a cycle of abuse that manifests itself in many forms throughout their lives (UNICEF, 1999). These include physical violence, sexual violence and psychological violence.

Physical violence is defined as the intentional use of physical force with the potential to cause death, disability, injury, or harm (Economic and Social Council [ECOSOC], 1990). Physical violence includes but is not limited to scratching, pushing, shoving, throwing, grabbing, biting, choking, poking, hair pulling, slapping, punching, hitting, burning, use of weapon such as knives, guns and other objects, use of one body size against another and also includes coercing other people to commit any of the above acts (ECOSOC, 1990). A growing body of research confirms the prevalence of physical violence in all parts of the globe, including the estimates of 20 to 50 percent of women from country to country haven experienced physical violence (ECOSOC, 1990). Statistics are grim no matter where in the world one looks (UNICEF, 1999). The United States National Violence against Women survey shows that every year 1.5 million women are assaulted by intimate partners (U.S Bureau of Justice Statistics, 2006). Research has shown that domestic violence is often manifested not only in physical violence but sexual violence as well. According to Frieze (1983) physical violence is often associated with sexual violence.

Sexual violence is the use of physical force to compel a person to engage in a sexual act against his or her will whether or not the act is completed (ECOSOC, 1990). Sexual violence includes an attempted or completed sexual act involving a person who is unable to understand the nature of the condition of the act as to whether decline participation or to communicate unwillingness to engage in sexual act because of illness, disability, or the influence of alcohol or other drugs and also include abusive sexual contact such as intentionally touching directly or through the clothing of genitalia, anus, groin, breast, inner thigh or buttocks of any person against his or her will (ECOSOC, 1990). Surveys in many countries reveal that approximately 10 to 15 percent of women report being forced to have sex with their intimate partner (UNICEF, 1999). A study in Ghana indicated that 2 in 10 women, their first experience of sexual intercourse was by force by an unknown person, 2 in 5
women were harassed or coerced when they refused their partners sex, 3 in 10 women were forced by their male partners to have sex, 1 in 5 women had experienced force sex by a man, 7% of women had been forced to touch a man’s private parts, 6% had been threatened by a school teacher or principal that schooling would be problematic for them if they do not have sex with them, 4% of women had been threatened with demands for sex before being offered a job or having a favor done, 15% of women surveyed had been circumcised (Cusack et al., 1999).

Psychological abuse includes behavior that is intended to intimidate and persecute, and takes the form of threats of abandonment or abuse, confinement to the home, surveillance, threats to take away custody of the children, destruction of objects, isolation, verbal aggression and constant humiliation (UNICEF, 2000). A close correlation between domestic violence and suicide has been established based on studies in the United States, Fiji, Papua New Guinea, Peru, India, Bangladesh and Sri Lanka. Suicide is 12 times as likely to have been attempted by women who have been abused than women who have not been abused. In the United States, 35 to 40 percent of battered women attempt suicide (UNICEF, 1999). A study in Ghana indicated that both psychological and economic abuse were high in the country. 20 percent of women interviewed had been prevented from seeing their family and friends by their male partner and 33 percent have been prevented from speaking to other men whilst 10 percent of the women had earnings taken away from them, 8 percent of women were prohibited from going to work, selling or making money (WiLDAF, 2007).

Several factors have been identified in an attempt to explain the reasons for gender-based violence as it cuts across countries, race and culture. The most popular ones are the social factors, the feminist explanation and cycles of violence developed by (Natarajan, 2007). The theory of social factors argues that irrespective of gender differences, gender-based violence is likely to occur. In general, Clifton (1982), for example, identified that some writers stress inducing factors such as unemployment as a leading cause to violence and has observed that an increase in violence in recent times is as a result high unemployment which can lead to stress. Stress can lead to an increase in alcohol consumption and thus, it is argued that the higher incidents of gender-based violence committed against persons with visual impairment is as a result of drunkenness (Roy, 1982). On the other hand, feminists also argue that male dominance in a society coupled with some stress and the cycle of violence is more likely to result in gender-based violence. Men abuse women in other to maintain their dominance and control in a patriarchal society compared to egalitarian societies. Comparing the Norwegian cultural system with the Ghanaian cultural system, one is more likely to gather evidence of violence in the Ghanaian home than in the egalitarians in Scandinavia nations. The system in these areas encourages women to be treated as equal to men whilst providing protection for such abusive situations should they arise (Natarajan, 2007).

Gender-based violence has wide ranging and sometimes long-term effects on victims and marital stability. The effects can be both physical and psychological and can have impact directly on victims as well as any child who witness gender-based violence been perpetrated by their parents. The physical health effects of gender-based violence are varied, but victims are known to suffer physical and mental problems as a result of gender-based violence. Battering is the single major cause of injury to women, more significantly than rapes, or muggings (O’Reilly, 1983). Victims may experience physical injury (lacerations, bruises, broken, head injuries, internal bleeding), chronic pelvic pain, abdominal and gastrointestinal complaints, frequent vaginal and urinary tract infections, sexually transmitted diseases, and HIV (Jones & Horan, 1997). There is evidence of recent efforts to raise the population’s awareness of prevention and to empower the victims with resources from institutions. There is also some agreement that many women who experience gender-based violence from their intimate partners are able to end the conjugal relationship, despite facing many obstacles. In this sense, they are strong enough to overcome traumatic situations by accessing internal and external resources that allows them to be free from gender-based violence (Ellsberg, 2006).

However, as indicated in a study conducted by Barnett (2000), the most common fact is that women do not react in a radical and clear-cut manner from the first episodes of gender-based violence and tend to bear the situation for a variable time which is often significantly long. Some authors, such as Barnett (2000), stress the importance of coping strategies used by women who experience gender-based violence. These coping strategies would be included within the concept of coping, which is defined as cognitive and/or behavioral efforts made to handle specific external/internal issues that generate stress (Clifton, 1982). It is possible to make a distinction between strategy, as a method of coping that is contingent upon the situation, and style, as a set of coping strategies associated with various scenarios. Akiba (2012) states that coping styles are usually classified into: problem-focused, emotion-focused and problem assessment-focused. The first style refers to efforts aimed at modifying or eliminating the stress source by finding a solution. This behavior tends to have more positive effects on relationships. The second style refers to efforts aimed at regulating the emotions derived from the situation; however, this style gives worse results. The third style is aimed at modifying the initial assessment of the situation, which tends to reassess the problem. According to Creswell (2013) strategies that facilitate an approach to the problem, a search for a solution, or the modification of the situation would be considered positive. On the other hand, passive or avoidance coping strategies that are rigidly conformed hinder the resolution of the problem, thus resulting in dysfunctional strategies. Berg (2004) reported that the phenomenon of physical, verbal, and psychological violence experienced by the visually impaired persons has been frequently faced with a passive attitude toward the perpetrators, tolerating the abuse situation and hoping the problem would positively be solved by itself as time went by. This attitude would pose great difficulties to eradicate the cycle of gender-based violence. With respect to the selection of specific coping responses, it is relevant to
consider the degree of controllability that the stressful event has. It has been shown that “the perceived controllability of the stressful event affects the type of strategy used and its effectiveness to reduce the degree of stress (Burns & Grove, 1993). In this line, previous studies by Bernard and Bernard (2012) have identified a predominance of avoidance coping responses related to the perception of not being able to manage the situation that had created discomfort, since there was a multiplicity of variables that were beyond the control capacity of the individuals. The resources used by women can range from the search for social support to strategies to maintain an "inner balance". Within this wide range of possibilities, it seems important to point out the perception of social support, which has been highlighted by several authors (Johnson & Turner, 2003). Several studies have shown that the impact of social support is beneficial in gender-based violence situations (Given, 2008). However, only few studies have assessed the relationship between social support and the vulnerability of victims, despite the fact that several studies have pointed out that participation in social life decreases as abuse increases (Creswell, 2013). Social support can be defined as a set of expressive or instrumental provisions perceived or received to be provided by a community, social networks, and trusted individuals, both in daily life and crisis situations (Neuman, 2013).

According to Punch (2013), some authors have indicated the existence of two dimensions that shape social support: structural social support and functional social support. The first relates to the social network, that is, the amount of social relations that an individual has at a given time. The second can be defined as the perception of support available that an individual has. This type of support is the beliefs about the extent to which individuals are loved, cared, and protected by those who are part of their social networks. In addition, functional social support consists of other types of support that can be divided into: emotional, informational, instrumental, affective, and positive social interaction. A qualitative study conducted by Richie (2000), found that women who seek help to solve the problem of conjugal violence usually turn to individuals who are close to them. On the other hand, women who do not have a strong social network prefer to make use of health services. Another study conducted by Rossi et al. (2013) found that the feeling of loneliness is one of the main symptoms exhibited by victims of gender-based violence resulting from conjugal conflicts. The feeling of loneliness and isolation from people who were close to them, usually associated with the controlling behavior of the intimate partner, contributes to the perception of the victims that they have few individuals to turn to. The assessment of the coping strategies used by victims of gender-based violence is of great interest due to the following reasons: It explains how women live during the violent situations, providing data about their subjective experiences; it provides information about the target of the efforts made to manage the situation and, in this regard, indicates which strategies were appropriate or inappropriate to bring about positive change. It can help professionals elaborate performance targets. Studies addressing coping strategies and the resources used by abused women are still scarce and insufficient. This fact is shocking given the greater importance of these studies during the occurrence of the problem and its outcomes.

**Theoretical Framework**

In this article, the behavioral theory and the resource theory will be utilized. Behavioral theories draw on the work of behavior analysts. Applied behavior analysis uses the basic principles of learning theory to change behavior. Behavioral theories of gender-based violence focus on the use of functional assessment with the goal of reducing episodes of violence to zero rates (Shorey et al., 2008). This program leads to behavior therapy. Often by identifying the antecedents and consequences of violent action, the abusers can be taught self-control (Bonem et al., 2008). Recently more focus has been placed on prevention and a behavioral prevention theory (Bell et al., 2008). Resource theory was suggested by William Goode (1971). Women who are most dependent on the spouse for economic wellbeing (e.g. homemakers/housewives, women with handicaps, the unemployed) are the primary caregiver to their children, fear the increased financial burden if they leave their marriage. Dependency means that they have fewer options and few resources to help them cope with or change their spouse's behavior (Kalmuss & Strauss, 1990). Couples that share power equally experience lower incidence of conflict, and when conflict does arise, are less likely to resort to violence. If one spouse desires control and power in the relationship, the spouse may resort to abuse (Kurz, 1989). This may include coercion and threats, intimidation, emotional abuse, economic abuse, isolation, making light of the situation and blaming the spouse, using children (threatening to take them away), and behaving as "master of the castle".

However, the power and control wheel was also used as theoretical foundation for this study. The power and control wheel has its root from Duluth Model or Domestic Abuse Intervention Project. The power and control wheel was developed to reduce domestic violence against women. In this study, the power and control wheel focuses on the use of functional assessment of economic resource power with the goal of empowering visually impaired persons to reduce the episodes of violence to zero rates (Shorey et al., 2008). This program leads to behavior therapy that seeks to empower women and creates gender parity in society. Often by identifying the antecedents and consequences of violent action, the abusers can be taught self-control (Bonem et al., 2008). Recently more focus has been placed on prevention and a behavioral prevention theory through self-empowerment (Bell et al., 2008).

**Conceptual Framework**

The conceptual framework outlines some effects of gender-based violence which includes physical, psychological and economic effects. Victims of gender-based violence suffer from physical effects such as injury, psychological effects such as depression, anxiety, stress, trauma, mental disorders. It also has economic effects since victims have to spend money on treatment of any complications that results from gender-based violence.
The proposed solutions to minimize gender-based violence include: Law enforcement policies, educational programs, and advocacy. There should be laws to punish perpetrators of gender-based violence in order to serve as a deterrent for their actions. People should be educated on the effects of gender-based violence in marital union and to encourage couples to resist from gender-based violence. There should also be social advocacy for victims of gender-based violence. Victims of gender-based violence may not know that their rights are being violated. Hence, social activists could advocate for their rights in marriages to reduce gender-based violence.

Forms of gender-based violence against persons with visual impairment include: body touching, sexual assault, sexual abuse, and verbal abuse. With all these forms, victims cope by associating with close family members. Some may also report to the police or report to family members. The most devastating aspect of gender-based violence against persons with visual impairment is that most of them keep such violence as secret to themselves without informing others which can lead to emotional and psychological distress to victims.

MATERIALS AND METHODS

This study adopted the case study design to provide intensive empirical data. This particular research design was employed because it allowed a researcher to carry out the study in its natural real-life settings using non-probability technique, thus the external validity of the study. This study adopted a qualitative approach where data were collected through the use of an interview guide. The qualitative approach was employed for the collection, analysis, and presentation of data. The phenomenon on hand was interpreted in terms of the meanings the research participants brought. Primary and secondary sources of information and ideas were the main sources of data for the study. Non-probability sampling method was utilized for the research. Specifically, this study adopted the snowballing sampling technique. It was convenient to use than other sampling techniques in regard to target population of the study.

The snowballing sampling was used in the selection of the sampling units because it ensured that the researcher can contact the needed respondents. A sample size of 15 respondents were selected for the study. They included 10 females and 5 males who were visually impaired. This sample size was selected due to resource constraints and limited number of persons with visual impairment. Data or information for the study was collected mainly through informal interview. It was important and useful to utilize informal interview because it helped the researcher to gain in-depth answers from the respondents on the subject matter. Data collected from the field were analyzed with the aid of qualitative data analysis software called NVivo. The data were transcribed and imported into the software. All data on the objectives were analyzed using qualitative approach. Thematic and content approaches were used to analyze the data. High level of confidentiality and anonymity were respected. This study was devoid of the names of the prospective respondents. Informed consent was obtained through verbal approval. Ethical approval was also sought from the Department of Sociology and Social Work, of the Kwame Nkrumah University of Science and Technology.

RESULTS

This study was conducted to examine gender-based violence against persons with visual impairment, identify the perpetrators of gender-based violence and the types of violence perpetrated against persons with visual impairment, explore the coping strategies visually impaired persons adopt in dealing with gender-based violence, find out the roles of the police and law enforcement agencies on gender-based violence and investigate the effects of gender-based violence on persons with visual impairment.

Perpetrators of gender-based violence and the types of violence against persons with visual impairment

This study sought to examine the perpetrators of gender-based violence and the types of violence against persons with visual impairment. The findings of the study revealed that majority of the respondents have experienced gender-based violence. The responses from the field showed that people who are visually impaired are often not treated well. In view of this some of the respondents noted that they experienced gender-based violence in the past and these forms of gender-based violence experienced by persons with visual impairment were categorized into physical, psychological, and sexual. The respondents argued that at one point or another, persons with visual impairment were faced with physical gender-based violence. One respondent argued: “The people around me as I was young used to hold me without caring about my body parts. They touch my body parts all in the name of helping me. But as a person without sight, I have no choice but to keep quiet.”
The study found that most victims agreed to the fact that as visually impaired persons, people around them touch or hold their body parts which they felt it was some form of abuse and violation. Respondents felt that unnecessary touching and holding of body parts of visually impaired persons against their will was one common type of gender-based violence experienced by persons with visual impairment. This finding of the study concur with the views of Natarajan (2007) asserting that gender-based violence was mostly in the form of physical violence where victims experience beating, kicking and use of weapons on the victims.

The study further found that one type of gender-based violence experienced by persons with visual impairment was psychological abuse. Respondents noted that they experience emotional and psychological gender-based violence in their respective homes and communities. One respondent noted: "It is not easy being visually impaired. I have to cope with all the insults from children and adults. I received insults from people who I think know me better and would not abuse me emotionally. But what can I do, since I am visually impaired and cannot do most things on my own, I rely on them and cope with the insults." The finding of the study asseverated the views of Wisner (2009) that persons with visual impairment experience psychological abuse. Equally, Hilberman and Munson (2007) noted that persons with visual impairment demonstrate significant behavioral and/or emotional problems, including psychosomatic disorders, stuttering, anxiety and fears, sleep disruption, excessive crying and school problems. Persons with visual impairment were psychologically abused persons in more urban cities among people who make their livelihood through begging for arms (Hilberman & Munson, 2007). Visually impaired boys who witness abuse of their mothers by their fathers are more likely to inflict severe violence as adults. Data suggest that visually impaired girls who witness maternal abuse may tolerate abuse as adults more than girls who do not (Hotaling & Sugarman, 2016).

Findings further revealed that persons with visual impairment experience all forms of sexual abuse. Respondents argued that they were experiencing gender-based violence in the form of sexual abuse. One respondent recounted her experiences: "When my parents gave me to marriage to the young man, he agreed not to abuse me sexually. I remember my mother talking to him about sexual abuse and warning him that if he does so, they will come and take me back, but as years go by, my partner gradually started asking for sex against my will. I complained to my parents and they assured me that they had spoken with my husband and he promised to change, but never did. So, I had to ask for separation."

With regards to the perpetrators of gender-based violence, it was revealed that majority of the respondents indicated that they people who abused them were mostly individuals they knew. It was only in few cases that respondents experienced gender-based violence in the hands of strangers. One respondent noted: "The person who abused me was my husband. He had always insisted on anything he set his mind on. He was difficult to please. Hence, I think some of us experience all the abuse from people close to us." In the views of Siemieniuk et al. (2010), gender-based violence is a complex problem and there are many forms of abuse that victims experience under cases of gender-based violence. To begin with, violence may take place within very different societal contexts and different forms, and the degree to which it is sanctioned by a community will naturally influence the kind of strategy needed. Considering the interconnections between the factors responsible for gender-based violence, dynamics of power, culture and economics strategies and interventions should be designed within a comprehensive and integrated framework in cases of unwanted sexual, touching of victims’ sexual parts, rape and sexual abuse (Garner & Clemmer, 2006).

Coping strategies of visually impaired persons who experience gender-based violence.

This study sought to explore the coping mechanisms adopted by visually impaired persons who experience gender-based violence. The study revealed that visually impaired women and girls experience gender-based violence the most, visually impaired men and boys, particularly adolescent boys and girls, also experience gender-based violence through the traditional practice of sexual exploitation of adolescent males. Respondents therefore noted that they had to cope in many ways. One respondent, a 29-year old woman with experience of physical violence as one aspect of gender-based violence stated how she copes with gender-based violence; "He'd take my wheelchair and put it in a box. When I wake up, I would scream and ask where are you? And I would realize that he did take the wheelchair because he doesn't want me to go [out]. I'd stay on the bed until he comes back...he just wanted to punish me to stay in the house." "My husband would force me to have sex all the time. When I tell him that I am tired today he would... force me. I would just sleep even though he would be on top of me. It was painful. It happened all the time." "In 2001 when he was punching me, he twisted [my hand]. I couldn’t push my wheelchair [for nine months]. I had to use one hand because my hand was sore".

The study further found that pertinent to the coping strategies, victims have to suppress their feeling regarding gender-based violence. Along these lines, the vulnerabilities for visually impaired women and those with physical incapacity that keeps her physically getting away from a savage circumstance are diverse when contrasted with a lady with a hearing inability. One respondent argued, "I tried reporting once but the issue is who will take you to the police station? Those who may have the capacity to physically get away from the damaging circumstance are those who have people they trust. Reporting to the police does not field any positive results."

This study took a cue from Nosek et al. (2001) contending in light of the consistent encroachments on the body by individuals from the family community and parental figures, ladies with visual impairment may disassociate themselves from bad people in order to cope with gender-based violence.

Roles of the police and law enforcement agencies on gender-based violence

The study enquired from respondents how the police helps to provide support for victims of gender-based violence. Majority
of the respondents asserted that the police play significant roles in issues of gender-based violence. In their views most of the respondents noted that the police could help arrest perpetrators, punished offenders, and conduct proper investigation on suspicions of gender-based violence cases in the community. One respondent noted: “The police played important role when I reported to them about my cases. They assisted me in arresting the offender and imprisoned the perpetrator. I strongly believe the police always stand by the constitution to punish any offender.”

One of the respondents noted something different. According to that particular respondent’s view, police are not very supportive to victims of gender-based violence. The respondent noted; “These police, they sometimes ignore the issues without arresting the person who committed the violence. Some of them only peruse cases that gives them a lot of money and looking at we visually impaired, we do not have money. It is only God who protects and fights for us not the police.”

Effects of gender-based violence on victims with visual impairment

This study sought to examine the effects gender-based violence has on persons with visual impairment. The findings of the study showed that most of the respondents agreed that gender-based violence put women at risk during pregnancy (abortion) in marital unions, few respondents disagreed that gender-based violence can put women at risk during pregnancy (abortion). One respondent noted: “I have heard of incidence where a visually impaired person was made to abort a pregnancy because she was raped and got pregnant. One of my friends said she heard of one visually impaired lady who was impregnated by a relative and had to commit abortion.”

The study also found that most of the respondents argued that gender-based violence can lead to marital divorce. One of the respondents indicated that; “I had to divorce my husband because of sexual abuse. I tried coping with the abuse but over time, I became tired of his sexual demands and had to seek for divorce. I cannot actually tell, whether he abused me because I am visually impaired but what I know that it was because of the sexual abuse that I sought for the divorce.” This implied that marital divorce can be attributed to gender-based violence in the study area since most of the respondents stated that one effect of gender-based violence is that divorce in marriages. The finding of the study takes a cue from the views of Hilberman and Munson (2007) that marital union which suffers from violence easily breaks down. It also confirms the views of Wisner (2009) that there is increasing divorce in recent times due to gender-based violence in marriages.

CONCLUSION

The findings of the study adequately satisfied its objectives. In the first place, the study concluded that respondents within the study area experience physical, psychological and sexual violence in marital unions. It was concluded that most perpetrators of gender-based violence were mostly relatives and victim’s husbands. The study found that gender-based violence has many effects on visually impaired persons and it was revealed that gender-based violence leads to divorce in marriages. It was also concluded that gender-based violence has effects of battering against visually impaired women and this had a greater risk for suicide attempts, injury, lack of love and trust in marriages and marital break down, genital injuries, unwanted pregnancy and abortion.

It was however suggested that gender-based violence could be curb if there were counselors and therapists to educate couple on its effects and effective implementation of laws and punishment for perpetrators of gender-based violence. It was concluded that gender-based violence in the study area could be reduced if there was gender equality, economic empowerment of visually impaired women and respect and value for visually impaired persons’ right and dignity.

Recommendations

Based on the study findings, the researchers proposed the following recommendations;

The researchers recommended that visually impaired couples should be educated on how to live with each other and to understand each other’s differences to avoid gender-based violence.

The researchers again recommended that visually impaired couples should always attend counseling or should have marriage counselors and therapists who could help them deal with gender-based violence so as to avoid divorce.

The researchers then again recommended that severe punishment should be given to perpetrators of gender-based violence.

The researchers recommended that visually impaired women should be economically empowered to support themselves and to increase their strength in the community to avoid men’s continuous dominance over these women.

The researchers recommended that visually impaired men and women should be seen as equal and partners in marital relationship.

The researchers then again recommended that the police should give more education to the community members on the effects of gender-based violence against visually impaired persons and the necessary punishment associated with it for offenders.

REFERENCES


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