Experiences of Women with Disabilities (WWDs) in Marriage: Nurturance, Sexuality and Reproduction

Barbra Mapuranga
Zimbabwe Open University, Mashonaland East Region

Abstract

People with disabilities face many obstacles in their struggle for equality. Although men and women with disabilities are subject to discrimination because of their disabilities, women with disabilities are at a further disadvantage because of the combined discrimination based on gender and discrimination based on disability. This paper examines the lives of women with disabilities and explores the effects of this double discrimination. It demonstrates how women with disabilities have been neglected by the disability field and the feminist movement alike and reviews the existing literature on women with disabilities. The paper will also examine three major areas of life and how women with disabilities fare within these areas, compared to women without disabilities and men with disabilities. These areas of concern are the sphere of marriage, nurturance, sexuality and reproduction.

Keywords: disability, marriage, sexuality, nurturance, reproduction, gender.

1. Introduction

Generally women's roles as nurturers, mothers, wives, homemakers, and lovers are usually not seen as appropriate for women with disabilities. While the ability to acquire these roles is usually not regarded as the best measure of women's social success, examining the limitations women with disabilities face provides valuable insights into the challenges or hardships they encounter. This paper examines challenges faced by women with disabilities.

2. Overview

Several studies have shown that compared to both men with disabilities and non-disabled women, women with disabilities are more likely to never marry, marry later, and be divorced if they do get married (Asch & Fine, 1988; Hannaford, 1989; Simon, 1988). Comparison of divorce rates of women and men with disabilities seem to suggest that women with disabilities are more likely to be left alone than men (Fine & Asch, 1981) and when disability occurs after marriage men are much more likely to divorce their wives who become disabled, while the marriage rarely breaks down if it is the man who becomes disabled (Hannaford, 1989). Most of these findings came out as WWDS say it out in some writings where they narrate their experiences. For example, just five of the forty-five women in a study by Matthews (1983) were married and not even one gave an experience of marriage life.(Browne, Connors, & Stern, 1985). Asch and Fine (1988:15) report only women with intellectual disabilities are more likely to be married than men of the same disability.

Non-disabled women often feel trapped in unfulfilling or abusive relationships because they cannot imagine how they will survive economically on their own. Hannaford (1989) suggests that this may be even more true of women with disabilities who often have to put up with abusive or exploitative relationships because of their limited social and economical means or because the only other alternative may be a life in an institution. In addition, Asch and Fine (1988) report that women with disabilities may return to abusive relationships because it may be the only intimate relationship they ever had and they may judge it better to have a bad relationship than no relationship at all.

Most women may not see marriage as a preferred status and may not even consider the marriage roles as desirable. Similarly, women without disabilities are more likely than women with disabilities to have the possibilities to choose between traditional and nontraditional life-styles. Women with disabilities rarely have the same options and their access to even the most traditional female roles is very restricted.

3. Women with Disabilities in Motherhood Experiences.

Traditionally its the image of the mother as the sole caretaker and nurturer of her child. This is in the process of change though it is still the image society uses as its reference point. Since women with disabilities are seen as dependent and in need of being taken care of, it is difficult for many to imagine how a mother with a disability can fill the caring and nurturing mothering role (Shaull, Dowling, & Laden, 1985). The belief that women with disabilities cannot and should not bear and raise children has made it difficult for women with disabilities to find men who will accept them. They have also found it problematic to gain access to information and services related to their special needs (Finger, 1985; Women and Disability Awareness Project, 1989). Even when women with disabilities do become mothers they encounter many difficulties because the non-disabled world assumes that the disability makes them unfit to be mothers. Many lose custody of their children in divorce while
others may have their children removed from their care by social welfare agencies, solely on the grounds that they have a disability (Corbett, 1989). Not only have women with disabilities reported difficulties in becoming biological mothers and keeping custody of their own children, they have also encountered discrimination if they have attempted to adopt children or become foster mothers (Asch and Fine, 1988; Finger, 1985). If they manage to keep their children they may encounter further difficulties in dealing with early childhood programs that traditionally have neglected and ignored the needs of mothers with disabilities.

There are only scattered accounts of motherhood as experienced by women with disabilities. These accounts have mostly been written by women who have physical disabilities (Anderson, 1985; Hyler, 1985; LeMaistre, 1985; Roth, 1981), or based on interviews with this group of mothers (Shaul, Dowling, & Laden, 1985). Mothers with mental retardation have not been represented in this literature, and as a result these mothers are even more invisible than other mothers with disabilities and very little is known about their lives and struggles. The limited information available has been written by professionals who tend to discuss mothers with mental retardation in terms of the problems they pose for the social welfare services that encounter them (Budd & Greenspan, 1985; Shilling, et al., 1982; Whitman & Accardo, 1990). Few, if any, resources are available that present their own point of view and how they experience motherhood. One of the few resources available about this group of mothers found that 25% of them had had their children removed from their care (Whitman & Accardo, 1990).

Although society's fears that women with disabilities will produce defective children are for the most part groundless, because the vast majority of disabilities are not hereditary, these fears have resulted in severe discrimination against women with disabilities in general and women with mental retardation in particular. Around the turn of the century what was referred to as "feeble-mindedness" was considered a major threat to society. As reflected in the following quotation from 1908, it was generally believed that feeble-mindedness was hereditary: "No feeble-minded mother will ever have a child absolutely normal in every respect" (Johnson, as quoted in Wolfensberger, 1975: 38). More important, these women were thought to lack moral restraints concerning sexual activities and it was believed that as a consequence they would produce a large number of illegitimate and deficient children (Simmons, 1982). The preventative measures taken against this threat included large scale forced sterilization (Scheerenberger, 1987) and institutions for "feeble minded women of child-bearing age" were established, where women with mental retardation were segregated from society as well as from men with mental retardation. In 1960, 26 states still had sterilization laws and as late as 1980, 33 states still had laws that prohibited people with mental retardation from marrying (Scheerenberger, 1987). No group of women with disabilities has been as severely discriminated against in terms of their reproductive rights as women with mental retardation and some of the myths surrounding women with mental retardation, such as the myth of their uncontrollable sexuality, are unfortunately still very much alive today (Sank & Lafleche, 1981).

4. Sexual experiences of Women with Disabilities

It is widely documented that women with disabilities are typically seen as asexual (Asch & Fine, 1988; Finger, 1985; Matthews, 1983; Shaul, Dowling, & Laden, 1985; Waxman, 1989). This is true of society in general as well as of most professionals with whom women with disabilities come into contact. Because women with disabilities are seen as asexual they are not seen as in need of information about birth control or what is possible in terms of having a sex life and children. Some women with disabilities have criticized the disability rights movement for not addressing sexuality as a political issue similar to housing and transportation. For example, Waxman (1989:2), claims that many people with disabilities consider sexuality to be the area of greatest oppression: "We are more concerned with being loved and finding sexual fulfillment than getting on a bus.” Some authors have speculated about the pervasive stereotype of women with disabilities as asexual, for example Finger (1985), who suggests that at least part of this stereotyping stems from seeing people with disabilities as eternal children. Others (Shaul, Dowling, & Laden, 1985) have suggested that people without disabilities tend to view sex as an acrobatic activity which makes it difficult for them to imagine how people with physical impairments can be sexually active.

5. Sexual abuse

Sexual abuse of women and children with disabilities is an area that has received growing attention in recent years (Watson, 1984). Much of the literature in this area is based on studies which show that women with disabilities are at a much greater risk of being sexually abused than other women (Craine, et al., 1988; Musick, 1984; Senn, 1988). This is true in society in general, and within residential facilities in particular. One author reports that sexual assault and battering may be two or three times higher for women with disabilities than for other women (O'Toole, 1990). Others report that women in institutions are at a much greater risk of being sexually abused than other women with disabilities (Musick, 1984; Stefan, 1987).

It may seem like a contradiction that women with disabilities are not seen as sexual beings and at the same time they are at a much greater risk of being sexually abused. Those who have studied sexual abuse, for
example Cole (1984), have documented that sexual abuse has more to do with oppressive use of power than it has to do with sex. Based on their work with sex offenders, Longo and Gochenour (1981) report that sexual abuse is more related to issues of control and power than to sex. They claim that abusers look for and use vulnerability to create the opportunity to rape. This vulnerability is increased in people who are marginalized, dependent, and in need of affection. Thus, the more vulnerable and powerless people are, the more they are at risk of being sexually abused. Existing studies have demonstrated that women with disabilities are at a greater risk than any other group of women of being sexually abused. Yet, professionals within the human service system continue to ignore this widespread abuse. These chilling realities have led Asch and Fine (1988: 23) to wonder "...how many of these same women have been sterilized to keep the effects of rape from the public eye."

6. Disability and reproductive rights
The area of reproductive rights has been problematic for many women with disabilities and has been a source of tension between feminists with disabilities and the women's movement. Feminists with disabilities have criticized the reproductive rights movement for ignoring the forced sterilization of women with disabilities; for failing to address the denial of reproductive rights to women with disabilities; and for exploiting fears of disability when it argues for abortion (Fine & Asch, 1982; Finger, 1985). Many of those who struggle with the moral dilemma between disability rights and reproductive rights are feminists with disabilities who are pro-choice, but argue against selective abortion of "defective" fetuses (Asch, 1986; Saxton, 1987). They argue that the disability rights movement and the reproductive rights movement share a tradition of commitment to women's control over their lives and bodies. They see the battles of these two movements as intertwined; one movement should not try to further its cause at the cost of the other and women's equality with men should not be obtained by subverting the equality and potentiality of people with disabilities. The current trend of prenatal screening and abortion of fetuses identified as disabled has also been criticized, and feminists with disabilities challenge the assumptions about disabilities that underlie these practices (Asch, 1986; Saxton, 1987). They have demonstrated how oppressive attitudes against disability dominate the counseling given to pregnant women and have challenged the assumption that the world would be a better place without people born with disabilities (Saxton, 1987). While the vast majority of writings on the moral dilemma between disability rights and reproductive rights have argued that these are compatible rights, at least one author has taken a different standpoint. Davis (1987) argues that disability rights and reproductive rights are incompatible and that abortion is far from being a right. Instead, abortion underlines women's oppression and is counter-productive to women in general and to women with disabilities in particular.

7. Conclusion
Women with disabilities have historically been neglected by those concerned with issues of disability as well as the feminist movement. It is only within the past years that serious attempts have been made to identify and understand the forces shaping their lives. These attempts have mainly focused on understanding how being female and having a disability interacts and how women with disabilities view their experiences. This decade of writing has provided us with rich personal accounts as well as research-based information about the social situation of women with disabilities and a long awaited theoretical framework to understand and interpret their lives and experiences. Women with disabilities are one of the most vulnerable and marginalized groups in today's society. We need to develop a better understanding of their lives in order to remove the obstacles that still remain in their way to equality.

REFERENCES


