

EXPERIENCES OF PERSONS WITH DISABILITIES IN STARTING AND MAINTAINING SEXUAL RELATIONSHIPS IN AFRICAN UNIVERSITIES

Ephraim Lemmy Nuwagaba

Department of Adult and Community Education, Kyambogo University; P.O.Box 1, Kyambogo - Kampala, Uganda

Abstract. Despite discrimination, isolation and marginalization, many African University students with disabilities engage in sexual relationships. Some of these relationships involve only those with disability and others are between those with and those without disability. This paper discusses the opportunities, experiences, challenges and strategies that University students with hearing, physical and visual disabilities have to start and maintain sexual relationships at Kyambogo University, Uganda. Results show that their sexual behaviours are shaped by their perceptions, the environment and African culture and traditions rooted in African Ubuntu philosophy. The conclusion is that the university provided opportunities and challenges to their sexual relationships and that those with positive attitudes enjoy healthy sexual relationships and were also better able to deal with relationship pressures that might negatively affect their relationships.

Keywords: sexuality, disability, university students, university education, African philosophy

1. Introduction

This paper discusses the experiences of students with disability in starting and maintaining sexual relationships in African universities. It is based on a 2017 case study conducted at Kyambogo University, Uganda. The aim of the study was to understand the sexual relationship experiences of students with hearing, visual and physical disabilities. It also investigated the opportunities and challenges they faced as well as the strategies to address these challenges.

The paper starts with a background that provides the context of the study, followed by a description of methods of data collection and analysis. The findings are then presented and discussed in the context of the social and human rights models of disability as well as the African philosophy of Ubuntu. The study uses the broader

definition of sexuality which includes ‘feelings and activities connected with a person’s sexual desires (Hornby, 2010, p. 1354) because Wickenden, Nickson & Yoshida (2013, p. 1) warn against the narrow conceptualization of sexuality to mean the sex act itself. Only heterosexual relationships are discussed because many Ugandans are intolerant to Lesbian, Gay, Bisexual and Transgender people (LGBT) (Onyulo, 2017). The intolerance is affirmed by the fact that despite the 2014 court nullification of the Uganda 2013 Anti Homosexuality Act that had been passed by parliament, many Ugandans including the President and Speaker of Parliament are against LGBT (Landau, Verjee & Mortensen (2014); Mugabi, 2018) and want the homosexuality bill re-introduced (Butterworth, 2018).

The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) of 2006 affirms the right of persons with disabilities to education and the Community Based Rehabilitation Guidelines (CBR) (WHO, 2010b, p.

* Corresponding author: Ephraim Lemmy Nuwagaba

elnuwagaba@gmail.com

Published online at <http://IJDS.ub.ac.id/>

Copyright © 2018 PSLD UB Publishing. All Rights Reserved

45) assert that access to education can enhance persons with disabilities' full inclusion in society. In line with this, Kyambogo University strives to provide disability friendly higher education in Uganda. This is reflected in its mission that highlights equity (Kyambogo University, 2005) and disability related objectives that cover training of personnel in the areas of disability, disability research, promotion of awareness about disability and building partnership and collaboration with agencies involved in disability.

In order to fulfill these objectives, the University, among others, approved a disability policy in 2014. The policy provides for disability inclusion and equalization of opportunities (Kyambogo University, 2014, p. ii). As a result, the University endeavours to put in place environments and facilities that are accessible and supportive to learning for students with disability. It also encourages learners with and without disability to interact with each other in both academic and social activities as well as providing counseling, guidance, rehabilitation systems and services for persons with disability who numbered 112 out of 25000 students at Kyambogo at the time of the study. Their types of impairment were; physical impairment 27, hearing impairment 27, visual impairment 35, asthmatic 18, epileptic 3 others 2. Of these, 60 were male and 52 female. Regarding sponsorship, 58 of them paid their university expenses while 54 were financially supported by government. Existence of privately sponsored students is testimony that parents of disabled children appreciate, value and support education of their children.

The Community Based Rehabilitation Guidelines (WHO, 2010a, p. 5) emphasise that persons with disability like everyone else need to have relationships. They assert; "many people with disability are as sexually active as people without disabilities" (WHO, 2010b, p. 24) or have strong intentions to do so (Johoda & Pownall (2014, p. 431). The importance of sexuality of persons with disability is increasingly recognized and scholars such as Wickenden, Nickson & Yoshida (2013, p. 7) argue that sexuality is "interconnected with the broader notions of wellness, integration and inclusion". Understanding the experiences of students (including those with disabilities) may

allow universities to "effectively remove barriers to learning" (Reason & Rankin 2006, p. 26).

2. Methodology

The study employed case study approach within qualitative research tradition as it aimed at explaining participants' point of view (Bryman, 2008). Case studies can be in-depth and can investigate phenomenon in their real life context (Rule & Vaughn, 2011). Case studies also investigate multiplicity and uniqueness of phenomena and can use multiple sources of data (Simmons, 2009; and Punch, 2005 cited in Nuwagaba & Rule, 2015). Although Bryman (2008) criticises case studies for lack of generalisability, Rule & John (2011) argue that results of case studies can have analytical generalisability, thus making results applicable in conditions similar to those of the case studied.

Data was collected through in-depth interviews from 16 students with disabilities (four - hearing, four - physical, and eight -visual). Four of the eight students with visual impairment were totally blind while another four had low vision. The in-depth interviews were conducted by the support staff in charge of the Disability Resource Room either directly or through Sign Language interpretation. This was done because sex is a sensitive matter and it was felt that the support staff, whom they are used to would be the best person to collect the data.

The data was analysed using themes developed from the research questions. Open coding (Henning et al, 2004) was used to develop the codes and to group them into categories. Organisation and reorganization of codes and categories, which Henning et al (2004) explains as axial coding helped identify crosscutting issues or links and an overall impression. The researcher abided by the ethical guidelines of Uganda National Council of Science and Technology (2007, p. 42) on research on persons with disability. Informed consent was sought (Clement and Bigby, 2013 cited in Nuwagaba & Rule 2015) and anonymity and confidentiality respected (Manning, 2009 cited in Nuwagaba & Rule, 2015).

3. Results

Characteristics of respondents of the study

The findings of the study revealed that the respondents were enrolled largely on diploma, bachelors and masters degree programmes related to disability such as Community Based Rehabilitation and Special Needs Education. However, there were those on other programmes like Agribusiness Management and Development Studies. Seven of them were in year one, five in year two and four in year three. The ages of the respondents were as follows; 13 were between 20 – 25 years, two were between 26 - 30 years and one was over 30 years. Ten of the respondents were female and six were male. They belonged to a cross section of tribes such as Baganda, Bagishu, Banyankole, Bakiga, Ateso, Kakwa, Lango, Acholi, Kumam and Bafumbira. As for religion, fifteen were Christians (6 Catholics, 5 Anglicans, 3 Born again, 1 Pentecostal) and one was Moslem. All the respondents were residents in the university.

Opportunities persons with disability have to start and maintain sexual relationships

Findings revealed that those who acknowledged that there were opportunities for persons with disability to start and maintain sexual relationships at Kyambogo University were of the view that active participation in university activities enhanced students with disabilities' chances of getting into sexual relationships. They noted that participation in academic activities built their self esteem and helped create awareness about their potentials or abilities while participation in non-academic activities provided avenues to them to guide and counsel their peers and demystify sexual relationships and disability.

Inclusive lecture rooms, where students with and without disability have lectures together provided other opportunities. They enabled students with disabilities socialize and befriend each other and those without disabilities. In addition, engaging in sports activities and politics gave students with and those without disabilities opportunity to interact and were thus avenues for starting and maintaining sexual relationships. Opportunities also arose from maintaining dignity

and self respect. Persons without disability who knew Sign Language were able to communicate with the people with hearing impairment thus increasing their chances of successful relationships.

Availability of ICT provided immense opportunities to start and maintain relationships because it reduced distance caused by mobility challenges. Those with physical and visual impairments kept on talking with their lovers daily through calling and texting them messages to maintain close friendships. Those with hearing impairment and speech challenges used text messaging and WhatsApp.

However, the opportunities for relationships between persons with disability were high while those between persons with disability and those without were low.

Experiences of persons with disability who had or had not been in sexual relationships

Findings suggest that some persons with disability had been in good sexual relationships, others bad ones while others had not had any. More than half the respondents had relationships with fellow persons with disability. These included four students with hearing impairment and three with visual impairment. Another three had not been in sexual relationships. The experiences of persons with disability who had sexual relationships with fellow persons with disability were varied and influenced by their views regarding sexual relationships between persons with disability and those between them and persons without disability.

The first reason advanced by those who were positive about the sexual relationships between persons with disability was that it is normal to have such relationships. One argued; "persons with disability are very sweet sexually like those without disability". They noted that persons with disability understand each other better and can bear each other's situation, respect and not undermine each other. Such relationships are viewed as a kind of sharing of disability challenges. One student with visual impairment noted "... in most cases relationships among persons with disability end up in successful marriages since they know each other's problems." The view that when persons with disability marry each other, they cannot help

themselves effectively is challenged. Their view was that such relationships enable them to share ideas and learn from each other's experiences of disability.

The second reason for having relationship among persons with disabilities was that persons with disability believe that fellow persons with disability do not cheat, are faithful, give respect and support in their relationships. One female who had had a good relationship experience with a fellow person with disability described it thus;

It's the best in my life. He is so loving and caring, well made, smart, and responsible, maintains hygiene, so intelligent, for sure I am so proud of him. He supports me emotionally and socially. Am surely contented he can do for me everything that even those without disability cannot do.

In regard to persons with disability who had good sexual experiences with persons without disability, they attributed it to good sex, love, respect and the support persons without disability give to them. They added that in the end, it boosts their confidence. A person with hearing impairment (male) explained that the sexual relationship with a female without disability made him feel good. He noted; "It was sweeter than good delicious chicken. There is so much love. It raised my self esteem and built my confidence in dating girls without disabilities." Another (female) noted the person without disability whom she loved was good in bed, and added that such relationships promoted inclusiveness. Some indicated that they felt safe in relationships with persons without disability. One remarked;

Persons without disability are so caring, loving, and some do yearn to know how they can help in case of anything, for example how to push a wheelchair. They want to know things that persons with disability feel comfortable with and the environment or words favourable to persons with disability.

Although the majority of respondents were largely negative towards sexual relationships between persons with disability and those without disability, the few who were positive revealed that it is better to have persons without disability in

sexual relationships. One female remarked; "They are always empathetic and always love me the way I am, unlike persons with disability." A male respondent said; "It is very easy for persons with disability to make love to persons without disability because most female persons with disability are not sexually satisfying because they have low self esteem."

Those who were negative about sexual relationships among persons with disability blamed the severity and type of impairment; "I cannot go for a person with disability because of the severity of my impairment. I need a person without disability who can give me support in lifting me and pushing my wheel chair." Another argument was that having sexual relationships among themselves was problematic because both of them may fail to help one another. It was argued that a visually impaired person cannot help a physically impaired person to climb a bed to make love because he cannot see the bed and the physically disabled cannot lift her-self up because of the impairment. It was noted that there were no special beds for persons with disabilities in the university hostels.

Some respondents had negative attitudes towards relationships between persons with disability and those without disability and the reasons are many. There were arguments that persons with disability are not loved and are discriminated by those without disability because their bodies were considered not beautiful. The other reason is that it was believed that most females with disabilities are not interesting in bed. It was also revealed that persons without disability reject those with disability after having sex because of stigma.

Another view was that such relationships are not successful because persons without disability tend not to be proud of their girl/boyfriends with disability, arguing that they are not presentable. Others believed that discrimination does not make such relationships work. One negative attitude specific to females was that their vulnerability to rape reduced their chances of having relationships because no one wants to be in a relationship with someone they suspect could have been raped. It is believed that having sex with a person with disability cleanses men's infertility.

There were those who had not been in any relationships. Four respondents with physical impairments had not had a relationship possibly because their impairment is easily recognizable. Those with visual disabilities could not easily communicate with those having hearing impairment. Another reason was lack of privacy at campus - an environmental challenge.

There were those who had both bad and good experiences as explained; “the man treated me very well at the start but he disappointed me at the end. You may think that a man loves you, but he cannot love you forever.”

There were those who had bad experiences. One of the three people with hearing impairment who had bad experiences argued,

Persons without disability do not love you that much and cannot trust you. They cheat on you time and again and that is a disappointment. We do not get together perfectly due to disability. I cannot hear the sweet whispers which my friends inform me their boys say.

Another reason is negative attitudes towards sexual relationships and themselves. They mentioned having feelings of being marginalized, stigmatized by sexual partners due to impairments and ignorance about building good sexual relationships. One concluded “We are undermined by persons without disability. They disrespect us”. One lamented “For sure that was the worst experience in my life.”

There were those who had not been in any sexual relationships while at Kyambogo University. The reasons they gave included the need to focus on their educational goals and complexity of balancing study and sexual relationships. Specific to those with visual impairment was spending more time reading than others thus leaving little space for relationships. Other reasons were lack of confidence, lack of interest in sexual relationships, lack of trust for persons without disability, negative attitude towards self, untrustworthiness especially of boys only interested in sex and not relationships, fears especially of risks associated with sex such as HIV/AIDS and pregnancy, non-physical compatibilities due to impairments, low-levels of

knowledge about sexuality, vulnerability, discrimination and cheating. Generally, there is negativity towards sexual relationships between persons with disabilities and those without. Some respondents blamed strict family background that puts too much control on persons with disabilities’ actions which later makes them fear falling in love. Others confessed they were poor communicators and lacked guidance about relationships. There were those whose previous negative experiences and disappointments in relationships made them shun relationships. The males argued that relationships are expensive to maintain and that “girls are gold diggers” and yet generally persons with disability don’t have money. Females argued, “Kyambogo university guys are jumpy.”

Challenges persons with disability have to start and maintain sexual relationships and the strategies used to address them.

The challenges faced in starting and maintaining sexual relationships at Kyambogo University were described as discrimination, poor communication, limited confidence regarding sexual relationships, negative attitudes towards self and other people, lack of trust, belief that persons with disability perform below expectation, lack of time, lack of money, lack of assistive devices, being despised, limited social interaction with peers, ignorance about sexual relationships and cheating.

The unique challenge of those with hearing impairment was that many students do not know Sign Language. As for those with physical impairment, it was mobility limitations. One summed it up thus “As we reside in different halls, it is difficult to meet with our lovers whenever they need us.” Those with visual impairments have difficulty communicating their relationship intentions. One remarked “We can’t ogle at girls like normal guys. When a girl sees a boy ogling at her, she knows he is interested. We also have fears of being cheated on even in our presence as we don’t see.”

The strategies that were used to address the disability related challenges faced in starting and maintaining sexual relationships were identified as raising awareness about disability, enhancing communication, relating with the opposite sex in a friendly way, making partners happy (by giving

gifts, taking them out, being in close company, keeping friendship) being confident and monitoring the activities of their partners.

They noted that raising awareness was done collectively as students with disabilities through representatives on student and university leadership structures. In addition, working hard enhanced their competitiveness as explained; “I make sure that I read hard and perform well in class to disapprove the misconception that persons with disability cannot compete favorably with others.” They argued that social interaction among themselves and between them and those without disability helped raise awareness and improved their knowledge about sexual relationships. This was reflected in statements such as “I make friendship with peers, network with other professionals like counselors and actively participate in discussions concerning sexual relationships to gain more knowledge about sexual relationships.” Use of condoms was highlighted as a strategy which boosts sexual relationships because it reduces fears arising from the risks of pregnancy and contracting HIV. Another strategy was explained as respect to partners and open communication with each other. One said “We regularly visit each other despite mobility challenges”.

Persons with disability who maintained dignity and self respect attracted people towards them. They also used body language (affectionate and sexy touches) to the blind. They used Sign Language with those with hearing impairment. Eye contact was used to attract those who have hearing and physical impairment. Keeping sexual relationship confidential, regularly sharing ideas and exchanging gifts, dressing up better than those without disabilities and socializing with friends are other strategies.

They also learned from peers, relatives, socialization, biological drives, guidance and counseling, internet and mass media. One with physical impairment said “I use the advantage of internet where I research what a woman wants, how they prefer to be handled and how I can sexually satisfy a woman regardless of my disability.” Another internet user added;

Even though at first it was not simple to get a lover, I finally used knowledge I acquired from internet dating sites and got a girl. I am happy and in a good sexual relationship which has so far lasted three years. I have also used the information from the internet to guide a fellow student with disability on issues concerning starting and maintaining relationships.

Despite the above positive contributions, internet had negatively affected some of their relationships. This was because the images on the internet are of people who are more beautiful and better built physically than persons with disability. Because of that, persons with disability felt sorry and inadequate about themselves.

Those who learned from biological drives elaborated that it was through having sex which comes automatically as one matures. For example seeing a person of the opposite sex may make one attracted to him or her.

Others said that cultural, traditional, family and community ceremonies such as introductions, weddings and family fireplace meetings provided knowledge on sexuality that shaped their sexual relationships. Fireplace meetings taught them to stay away from cross generation sex.

One male recalled;

In 2012, I attended my elder brother's introduction ceremony in Masaka District. I learnt that for any man to be respected by his fiancée's side, he needs to have first paid bride price. Paying bride price blesses sexual relationships and makes them respected by society thus strengthening the bond between couples.

A female revealed that introduction ceremonies taught persons with disability the value of dowry.

I saw many baskets of presents and dowry brought to the family of the girl and wished it would be brought to mine as well. This has enabled me to stay away from sex before marriage and this will make my parents and community proud because virginity is culturally valued.

Another female remarked “Wedding ceremonies have helped me understand that it is not wise to have sexual relationships before being introduced because a man can cause harm to you since your relatives have not sanctioned your stay with him.” She added “It is a sign of respect to be introduced to family members of your intended marriage partner especially to ladies.” Interestingly, none of the students mentioned lecturers as sources of knowledge on sexual relationships.

In addition, none of the respondents explained having a relationship with connections to LGBT and as the political social-cultural environment is not in its favour, it is difficult to determine whether fear made them not to open up or they did not have such experiences.

4. Discussion

The characteristics of the study population comprised of diploma, graduate and post graduate studies. This suggests a comprehensive coverage of a wide range of views on experiences across the university student community. Their age range fits the age ranges in which people are known to be very sexually active (Johoda & Pownall 2014). The sex distribution suggests the responses reflect gender views while the different tribes reflect the cultural diversity in the university and country. Interestingly, religion did not feature as a source influence in their sexual behaviour.

The findings reveal that persons with disability (although to a limited extent) were able to interact, socialize and engage in healthy sexual relationships among each other and with persons without disabilities although there were negative attitudes towards relationships between them and the non-disabled. These relationships were described as good experiences. This is in agreement with Chickering and Reisser, 1993 cited in Liu (2013, p.17) who argue that “students interact and relate among themselves in both academic and social dimensions”. The good experiences related to having good sex, faithfulness, respect, caring, sharing and having reliable lovers. Relationships built their self esteem and created respect for and willingness to support each other. Those who had relationships among

themselves knew and understood each other’s disability related challenges and problems. However the severity of impairment was a constraint in sexual relationships among persons with disabilities and it made it difficult for them to help and support each other to engage in sex.

The study provides evidence that knowledge about sexuality influenced their behavior and shaped their experiences. This is in agreement with Travers, Tincani, Whitby, & Boutot (2014, p.232) who assert; “Sexuality is influenced by sexual knowledge, beliefs, attitudes, values, and behaviours of individuals.” They add that gender roles, thoughts and feelings influence sexuality and that having sexuality knowledge builds capacity for social interactions, dating, intimacy and safe sex and promote healthy plutonic and romantic sexual relationships (Travers, Tincani, Whitby, & Boutot, 2014), a view that this study confirmed.

However, to a greater extent, the favourable university policies on disability and sensitizations did not translate into good practice because there was evidence that discrimination, marginalization and negative attitudes towards persons with disability still existed at the university. Although Zembylas (2008) asserts that sensitizations can build self esteem of persons with disability and this confidence improves their relationships, the awareness programmes had not achieved much as persons with disability themselves still suffered from inferiority complex and feelings of not being presentable, a situation Ndlovu and Walton (2016) explains as individual deficit. Ineffective awareness programmes contributed to “persons with disabilities’ low levels of knowledge about their sexuality” which translates into their “exploitation and marginalization in society” (Travers, Tincani, Whitby, & Boutot (2014, p.232).

Those with bad experiences attributed them to poor communication, their girlfriends being money minded, discrimination, marginalization, lack of trust, stigmatization, non-compatibility due to impairments, negative self perception and lack of privacy among others. Perception is a critical factor in sexual relationship as suggested by NCASH, 1995, cited in Travers, Tincani, Whitby, & Boutot (2014, p.233) who asserts that “positive self perception about one’s own sexuality is critical to healthy sexual development”. The study reveals that the key issues in their views responsible for

positive attitudes such as caring, sharing with each other, support, enjoying sex, respect, trustworthiness and faithfulness and those responsible for negative attitudes such as marginalization, discrimination, lack of trust, cheating, exploitation, undermining, hypocrisy, untrustworthiness, low self-esteem, fear and stigmatisation were the same issues that came up while they were describing their experiences. This could be an indicator that their views shape their actions. It has been noted that discrimination does not only affect sexual relationships but also hinders “educational attainment and positive outcomes” (Reason & Rankin (2006, p. 7) thus creating the need to eliminate it. They further advocate for a non-discriminatory environment arguing that it is responsible for “enhanced social experiences and academic and intellectual development” (p.9).

The bad experiences due to negativity about their bodies is compounded by the internet media, a view shared by Cole & Cole (1993) cited in Richards, Miodrag and Watson (2006, p. 141) who confirm that “current cultural ideology bombards us with beautiful body images that are virtually impossible for someone with a physical disability to attain and that these images lower the self image and esteem of the persons with disability”.

Their experiences emanated from the opportunities that arose from participation in academic and social activities, inclusive classrooms and availability of ICT facilities. This is in line with arguments by Omede (2004) who affirms that ICT has changed how people relate socially and how they learn. Additionally, UNESCO (2006) confirms that ICT provides opportunities for social interaction through more convenient access to information and communication tools. Noteworthy is the fact that there were more opportunities for persons with disability only relationships compared to relationships between persons with disability and those without disability. Those with positive attitudes towards themselves and towards persons without disability had good experiences of sexual relationships.

However, they faced challenges and had developed strategies to address them. These included negative attitudes, lack of trust, limited finances, limited communication, lack of interest in sex, previous bad sexual experiences, fear of

pregnancy and HIV/AIDS, environmental challenges and non-compatibility due to severity of impairment. The reasons responsible for limiting relationships between persons with and those without disabilities included negative attitudes towards each other and low self esteem. Although it has been argued that “low self-esteem and feelings of being unattractive or undesirable might lead to risky sexual behavior” and that persons with disability engage into sex “because of their need for social acceptance and inclusion” (WHO, 2010b, p. 25), the results in this study are contrary as it limited their sexual relationships. This is because lack of confidence and feelings of being ugly are some of the reasons advanced by the respondents for not having relationships. WHO (2010b, p.25) confirm that persons with disability have “feelings of being unattractive or undesirable”.

The limitations caused by environmental challenges confirm what Hollomotz (2008) found out in Britain that “many residential group settings do not provide private space in which persons with disability can explore their sexual relationships in a safe and dignified manner.” Lack of privacy, he further argues, makes them have rushed and unsafe sex each time they get an opportunity of privacy. The challenges are largely economic, cultural, attitudinal, physical and social and these are known to limit their participation in education and other development (Kithome, 2004; Lwanga-Ntale, 2003).

Regarding environmental factors, Richards, Miodrag and Watson (2006, p. 141) confirm that mobility challenges make persons with disability to miss some societal activities and effects of some of these situations go beyond the activity. For example, the young men who do not participate fully in traditional marriage activities may view these challenges as inadequacies on their part because according to African cultures, “men are perceived as being in control of situations in their lives and as being self-sufficient” (Fasokun, Katahoire & Oduaran, 2005, p. 157) and thus inability can be constructed as a weakness.

Generally, these findings, especially the attitudinal ones, are in agreement with the arguments of Abimanyi-Ochom & Mannan, H. (2014) that societal and cultural negative attitudes still prevail despite favourable legislation on

disability. They affirm that “societal and cultural attitudes and perceptions have been indicated as the greatest obstacle to disability inclusion” (p.4).

Some of the strategies to address the challenges included use of knowledge generated informally from peers, relatives, socialization, internet and mass media as well as biological drives. Mass media has been identified by Richards, Miodrag & Watson (2006) as a key source of information about sexuality. Knowledge enhanced their capacity to cope which confirms Travers, Tincani, Whitby, & Boutot (2014, p.244) argument that “When the individual has capacity, opportunity and perception necessary for sexuality, then they are likely to achieve greater self determination and better quality of life”. The fact that formal education did not feature prominently as a source of information on sexuality conforms to the ideas of Cole and Cole 1993 cited in Johada & Pownall (2014) that sex-related knowledge “is gained through informal routes”.

Their experiences, challenges faced and support they received from persons with and without disability is a true reflection of the African philosophy of Ubuntu which emphasise togetherness and communalism. In this philosophy, “people are perceived as worthy beings” (Nafukho, Amutabi&Otunga (2005, p. 54) and communities “help one another all the time to cope with challenges they face in their daily lives” (Fasokun, Katahoire & Oduaran, 2005, p.151). The same philosophy emphasizes ‘shared collective humanness and responsibility’ (Opini, 2016; Chataika, et al. 2015; Mji et al. 2011) cited in Berghs (2017, p.1). it recognizes disability as a social construct and proposes social action to redress the marginalization, oppression and injustice towards persons with disability.

5. Conclusion

The study provides evidence that persons with disability had sexual relationships among themselves and with persons without disabilities. These relationships are shaped by their own attitudes, those of persons without disabilities, the environment in which they learned and lived. Although university policies on disability are in place and efforts are made to raise awareness about disability, there are still challenges in providing an

inclusive and safe environment for persons with disability to have sexual relationships. These policies have not yet eliminated the negative attitudes towards disability, a fact confirmed by Abimanyi-Ochom and Mannan (2014). While those with negative attitudes towards themselves, persons without disability and sexual relationships are likely not to start and maintain sexual relationships, those with positive attitudes do have healthy and fulfilling sexual relationships. This is in agreement with Travers, Tincani, Whitby, & Boutot (2014, p.244) who affirm that “capacity, opportunity and perception necessary for sexuality” can facilitate “greater self determination and better quality of life”. The study also confirms that persons with the necessary attitudes, knowledge and skills can overcome barriers (Nuwagaba, 2013).

References

- Abimanyi-Ochom, J. & Mannan, H. (2014). Uganda’s disability journey: Progress and challenges. *African Journal of Disability* 3(1), Art. #108, 6 pages. <http://dx.doi.org/10.4102/ajod.v3i1.108>
- Berghs, M. (2017). Practices and discourses of ubuntu: Implications for an African model of disability? *African Journal of Disability* 6, a292. <https://doi.org/10.4102/ajod.v6.292>
- Butterworth, B. (2018). Ugandan MPs want to reintroduce anti homosexuality law that could imprison gay people for life. *Pink news.co.uk*, <http://google.com> accessed 10th May 2018
- Bryman, A. (2008). *Social Research Methods*. New York: Oxford University Press.
- Fasokun, T., Katahoire, A. &Oduaran A. (2005). *The Psychology of Adult Learning in Africa*. Cape Town: UNESCO Institute of Education.
- Henning, E., Van Rensburg, W., &Smit, B. (2004). *Finding your way in qualitative research* Pretoria: van schaik.
- Hollomotz, A. (2008).May we please have sex tonight? – People with learning difficulties

pursuing privacy in residential group settings. *British Journal of Learning Disabilities*. p. 91-97.

Hornby, A.S. (Ed). (2010). *Oxford Advanced Learner's dictionary*. Oxford: Oxford University Press

Johoda, A. & Pownall J. (2014). *Sexual understanding, sources of information and social networks; the reports of young people with intellectual disabilities and their non-disabled peers*. *Journal of Intellectual disability Research* (2014). Vol 58 part 5, pp 430-441

Kithome, L. K. (2004). *An exploration of women's transformation through distance learning in Kenya*. PhD thesis, University of KwaZulu-Natal Pietermaritzburg.

Kyambogo University (2014). *Kyambogo University disability policy*. Kampala: Kyambogo University

Kyambogo University (2005). *Kyambogo University Prospectus 2005*. Kampala: Kyambogo University.

Landau, E., Verjee, Z., & Mortensen, A. (2014). *Uganda President: Homosexuals are 'disgusting'*. *CNN.com*. <http://www.edition.cnn.com/2014/02/24/world>; accessed 10th May 2018

Liu, C. (2013). *Academic and social adjustment among deaf and hard of hearing college students*. Taiwan; University of Kansas.

Lwanga-Ntale, C. (2003). *Chronic Poverty & Disability in Uganda*. Paper presented at the International Conference, *Staying Poor: Chronic Poverty and Development Policy*, Manchester, UK.

Mannan, H., 2014, 'Uganda's disability journey: Progress and challenges', *African Journal of Disability* 3(1), Art.#108, 6 pages. <http://dx.doi.org/10.4102/ajod.v3i1.108>

Mugabi, S.I. (2018). *Kadaga blasts European MPs over homosexuality*. nilepost.co.ug>2018/03/29> accessed 10th May 2018.

Nafukho, F., Amutabi, M. & Otunga, R. (2005). *Foundations of Adult Education in Africa*. Cape Town: UNESCO Institute of Education.

Ndlovu, S. & Walton, E. (2016). *Preparation of students with disabilities to graduate into professions in the South African context of higher learning: Obstacles and opportunities'*. *African Journal of Disability* 5(1), Art. #150, 8 pages. <http://dx.doi.org/10.4102/ajod.v5i1.150>

Nuwagaba & Rule (2015). *Navigating the ethical maze: ethical contestations in an African context*, *Disability & Society*, 30:2, 255-269,

Nuwagaba, E. L. (2013). *Ugandan case studies of adult learning practices of persons with disabilities regarding microfinance'*. PhD thesis, University of KwaZulu-Natal, Pietermaritzburg.

Omede, A. A. (2014). *Information and Communications Technologies in Special Needs Education: Challenges and Prospects*. *European Journal of Business and Management*, 6(39), 1. Retrieved March 4th 2018 from: www.iiste.org.

Onyulo, T. (2017). *Uganda's other refugee crisis: Discrimination forces many LGBT Ugandans to seek asylum*. <http://www.USAToday.com>>world 13th July 2017 accessed 10th May 2018

Reason, R.D. & Rankin, S.R. (2006). *College students' experiences and perceptions of harassment on campus: An exploration of gender differences*. *The College Student Affairs Journal Fall, 2006, vol 26 no. 1*

Richards, D., Miodrag, N. & Watson, S.L. (2006). *Sexuality and development disability: Obstacles to health sexuality through the lifespan*. *Developmental disabilities Bulletin* (2006). No.1 & 2, pp 137-155.

Rule, P., & John, V. (2011). *Your guide to case study research*. Pretoria: Van Schaik Publishers.

Travers, J., Tincani, M., Whitby, P.S. & Boutot, E.A (2014). *Alignment of Sexuality Education with Self Determination for People with Significant Disabilities: A Review of Research and Future Directions*. *Education and Training in*

Autism and Developmental Disabilities, 2014, 49(2), 232–247

Uganda National Council of Science and Technology. (2007). National guidelines for research

involving humans as research participants. Kampala: Uganda National Council of

UNESCO (2006). *ICTs in education for people with special needs*. Moscow: Institute for Information Technologies in Education Specialized Training Course.

Wickenden, A., Nickson, S. & Yoshida, K.K. (2013). Disabling sexualities: Exploring the impact of the intersection of HIV, disability and gender on the sexualities of women in Zambia. *African*

Journal of Disability 2 (1), Art. <http://dx.doi.org/10.4102/ajod.v2i1.50>

WHO. (2010a). *Community based rehabilitation guidelines: Supplementary booklet*. Geneva: World Health Organisation.

WHO. (2010b). *Community based rehabilitation guidelines: Education component*. Geneva: World Health Organisation.

Zembylas, M. (2008). Engaging With Issues of Cultural Diversity and Discrimination through Critical Emotional Reflexivity in Online Learning. *Adult education quarterly*, 59(61), 61-82.