Organization: NUWODU (National Union of Women with Disabilities of Uganda)

Background

Founded in 1999 by a group of female political leaders and young people with disabilities at the national conference in Kampala, NUWODU is a female-led DPO that is an umbrella organization. It brings together various organizations to advocate as a unified voice for the rights and equal opportunities of women and girls with disabilities and to fight against injustice and GBV. It was originally set up as the women’s wing of the National Union of Persons with Disabilities in Uganda (NUDIPU) to react to the lack of disability-inclusion in the women’s rights movement, as well as the rights violations, barriers, and intersectional discrimination that women and girls with disabilities experience.

Today, the organization’s main goal is to promote the political, economic, social and cultural advancement of women and girls with disabilities by advocating for their effective participation in development. NUWODU has specific objectives such as promoting the participation and inclusion of women and girls with disabilities, promoting and advocating for their sexual and reproductive health rights, and promoting their inclusion in formal and informal education in order to improve their access to employment and participation in economic processes according to the opportunities available to them.

What happened?

NUWODU’s good practice, which began in 2016, focuses on capacity building and awareness-raising at all levels of the community.

Level 1: Paralegals

The first and most important level corresponds to women with disabilities acting as paralegals. After being trained by NUWODU, they are equipped to:

- Share information with the community on the rights of persons with disabilities, sexual and reproductive health rights and referral pathways.
- Volunteer as activists in their communities, encouraging GBV survivors and/or their caregivers to report cases to the police and to follow the cases through in court.
• Act as role models for other women and girls with disabilities, encouraging them to attend school, raise awareness among the community, and to speak up for themselves when their rights are violated.

Level 2: Local Advocates
The second level of the practice involves key community members, both women and men, acting as local advocates. These are community leaders without disabilities, including religious, cultural, opinion, and village leaders. Local advocates receive training on the rights of persons with disabilities, conflict management and mediation. The training:
• Informs their decisions as community leaders and
• Enables them to advocate for women and girls with disabilities to their respective audiences.

Level 3: Duty-Bearers
The third and final level engages duty-bearers involved in GBV prevention and response. This layer includes multiple professional groups:
• Local government members attend awareness-raising sessions to strengthen their response to GBV cases involving women and girls with disabilities and improve the inclusion of persons with disabilities in general.
• Police officers are trained to provide inclusive GBV services and involved in community-based dialogue to raise awareness of the rights of women and girls with disabilities.
• Health workers work with NUWODU to improve their knowledge and practices regarding women and girls with disabilities. This training covers sexual and reproductive rights, consent, and accessibility.

In addition to this multi-layered approach, NUWODU also helps with specific support that vulnerable women might not have access to, such as transportation to attend court hearings or receive medical treatment after experiencing GBV. This ad hoc support, combined with the multi-level activities, demonstrates the participation of all stakeholders and the meaningful contribution made by women and girls with disabilities.

What changed?
There has been a radical change in people’s mindsets and perceptions of persons with disabilities at all levels. Before NUWODU started this work, persons with disabilities were insulted, neglected, locked up in houses, and had difficulties accessing education and services. Women and girls with disabilities were often excluded from communities and perceived as having no voice. Few were aware of their rights or even what constitutes violence and were therefore not equipped to report violence.

Women and girls with disabilities are now more aware of their rights and how to exercise them. They have organized themselves into women’s groups that advocate for better GBV prevention and response, and educate their members on these issues while creating safe spaces to harness their collective power.
Female paralegals with disabilities have played a major role in furthering action and inclusion at all levels. The existence of paralegals heightens vigilance in communities to better detect and support GBV survivors and contributes to an active community protection system. Female paralegals with disabilities, along with those involved on other levels, now form a permanent structure that represents persons with disabilities at the grassroots level. 

The multi-layered and individual-based perspective of the practice drives its long-term sustainability. The funding eventually stopped, but the activities have kept going, illustrating the depth of the changes brought about by NUWODU’s work.

**Notable Successes**

1. Created engagement at all levels with GBV response and the rights of women and girls with disabilities
2. Created meaningful participation and leadership of women with disabilities.
3. Reinforced and empowered women with disabilities in their capacity to effect change.
4. A woman with a hearing impairment held the role of project manager and women with disabilities are working as paralegals.
5. The number of GBV cases reported has significantly increased and the percentage of cases which go to court has also significantly increased, showing both an improvement in referral mechanisms and judicial effectiveness for women and girls with disabilities.
6. Police officers take into account and specify the disability status of the survivor when recording GBV cases and healthcare professionals have become more inclusive and responsive, notably on the issue of consent for women and girls with disabilities.
7. Healthcare processes have become more inclusive and responsive on the issue of consent for women and girls with disabilities.
8. Local governments, including the senior probation officer, recognized that the activities have had a positive impact on their work which is hindered due to their limited resources.

**Key Success Factors**

1. **Working with different actors at all levels** has been instrumental in making a positive impact. Interaction between all the different levels of GBV response is part of the holistic change instilled and focuses on the rights of women and girls with disabilities.
2. **Having women with disabilities as leaders** increases the opportunities for empowerment and reassures all women with disabilities of their capacity to effect change.