

Experiences of Gender-Based Violence Among Disabled Women: A Qualitative Systematic Review and Meta-Synthesis Protocol

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Abstract

Background: Gender-based violence (GBV) is a major public health concern and a human rights issue disproportionately affecting disabled women. Disabled women are twice as likely to experience GBV than nondisabled women, yet there has been a lack of attention to this issue. This review aims to gain a greater understanding of the experiences of GBV of disabled women through a systematic and qualitative meta-synthesis. The qualitative meta-synthesis will be conducted by a research team of academic and community members and students with varying lived and service provider experiences with disabilities and GBV. The study findings aim to promote best practices by offering solutions to increase accessible and inclusive resources and services responsive to disabled women. **Methods:** A systematic review of qualitative studies will be performed based on searches of 12 academic databases, including MEDLINE (Ovid), APA PsycINFO (EBSCO), Sociological Abstracts (ProQuest), Social Services Abstracts (ProQuest), and SocINDEX (EBSCO). A search of the gray literature will be performed by searching the Google search engine, Google Scholar, the Community Health Online Digital Archive and Research Resource (CHO-DARR), and the Global Database on Violence Against Women. In addition to the database and gray literature searching, we will complete backward and forward citation tracing. Two research team members will be involved in all screening, review, data extraction, and quality assessment of studies. A third reviewer will resolve any disagreements and consult with the research team. Thematic synthesis steps will include becoming familiar with the data, developing a thematic framework, indexing the data to identify themes and codes, charting the data, and mapping and interpreting the data. The Critical Appraisal Skills Programme checklist will be used to appraise the quality of included studies. Confidence in the meta-synthesis findings will be assessed by applying the GRADECERQual approach. **Review Registration:** This protocol is registered with the International Prospective Register of Systematic Reviews (PROSPERO): CRD42023400410.

Keywords

disability, illness, women, gender-based violence, trauma, qualitative meta-synthesis, qualitative research

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Gender-based violence (GBV) is a major public health concern and a violation of human rights (Sinko & Saint Arnault, 2020). GBV is an umbrella term for any violence perpetrated against a person's will that results from power inequalities because of one's gender, gender expression, gender identity, or perceived gender (Wirtz et al., 2020). It can include physical, emotional, or psychological violence, including sexual assault, intimate partner violence (IPV), neglect, and harassment (WAGE, 2022). Women experience the most frequent and severe incidents of violence and abuse, with one in three women experiencing IPV in their lifetime (WHO, 2021). Disabled women are twice as likely to experience GBV than nondisabled women (e.g., sexual assault, unwanted sexual behaviours in public, online harassment) (Cotter & Savage, 2019; Perreault, 2015; Statistics Canada, 2020). They face a wider range of emotional, physical, and sexual abuse by family members, personal care attendants, health care providers, and strangers (Nixon, 2009). Disabled women may experience specific types of abuse, such as withholding equipment, aids, and medication and leaving women in physically uncomfortable positions for extended periods (McCarthy et al., 2017). Disabled women identifying with other marginalized identities, such as sexual and gender minority populations, are also more likely to report physical and sexual assaults (Cotter & Savage, 2019).

Reducing GBV requires a multipronged solution involving multiple invested parties, including actions by governments, budgeting to respond to gender inequality, and actions by civil society organizations (Dlamini, 2021). Recommendations to address the increase in GBV against women include strengthening services and building community capacity to improve response quality (UN Women, 2020). Yet while key services (e.g., community living, shelter, counselling, health-focused, and non-governmental community settings) support disabled women in their programs, they often lack access to the best practices necessary to develop and promote accessible, inclusive, and effective programs and policies (Muster, 2021). For instance, many disabled women experience inaccessible services when seeking GBV support (Frawley et al., 2017; Robinson et al., 2021). More than ever, GBV survivors need adequate support and interventions adopting anti-ableist and inclusive approaches recognizing their unique identities and needs (Basnet Bista et al., 2022). To strengthen services and build community capacity, the voices of disabled women must be at the center of policy change, solutions, and recovery (UN Women, 2020).

While current scoping reviews focus on mapping and measuring specific forms of GBV and disability (Campbell et al., 2022; Meyer et al., 2022), there is no known review or synthesis of qualitative research on this subject. Qualitative research is necessary to build understanding, reduce stigma and discrimination, and improve research and literature quality, relevance, and knowledge translation (Lund, 2011; Muster, 2021). For this reason, this review will prioritize qualitative research that centers the voices of disabled women experiencing GBV to create an in-depth and nuanced understanding of their experiences (Alhusen et al., 2020; Ruiz-

Pérez et al., 2018). GBV among disabled women is a global endemic (McConnell & Phelan, 2022), yet the lack of attention to this issue has contributed to the invisibility of the victimization of disabled women (Dowse et al., 2016). This review is intended to provide a new and more comprehensive understanding of the lived experiences of GBV among disabled women to promote best practices by strengthening services and building community capacity.

Objective

This qualitative meta-synthesis will systematically examine and synthesize qualitative data exploring the experiences of GBV among disabled women. The findings will promote best practices by offering solutions to increase accessible and inclusive resources and services responsive to disabled women.

Methods

Study Design

A qualitative meta-synthesis summarizes and synthesizes qualitative findings across primary studies to produce a narrative related to the same topical area (Sandelowski et al., 1997). Meta-syntheses are more than the sum of parts as they offer interpretations of data that result from interpretive transformations far removed from the findings reported in the studies (Sandelowski & Barroso, 2007). As narratives related to GBV are rarely informed by disabled people (MacKeigan, 2021), we will be centring the voices and experiences of disabled women in this review. In this review, we adopt qualitative meta-synthesis guidelines by Sandelowski and Barroso (2007) for synthesizing the literature. The guidelines include (1) formulating the review question, (2) conducting a systematic literature search, (3) screening and selecting appropriate research articles, (4) analyzing and synthesizing qualitative findings, (5) maintaining quality control, and (6) presenting findings.

Review Questions

This qualitative meta-synthesis is guided by the following review questions: (1) How do disabled women experience GBV and what are their formal and informal needs? (2) How do disabled women access services and resources related to GBV? and (3) What are the best practices and prevailing barriers for organizations that support disabled women experiencing GBV from the perspectives of disabled women?

Eligibility Criteria

This qualitative meta-synthesis will include studies from published and gray literature (e.g., government reports) that employ qualitative data collection methods such as interviews and focus groups and qualitative methods for data analysis such as content and thematic analysis. We will include

qualitative studies with designs such as grounded theory, phenomenology, narrative inquiry, and ethnography. Mixed-methods studies with qualitative findings will also be included. Studies without a qualitative analysis component (i.e., quantitative survey) and synthesis papers (e.g., scoping reviews and literature reviews) will be excluded. We will include studies from any geographical region and setting as long as the study pertains to disabled women's experiences with GBV. For instance, the settings may include healthcare settings or community organizations. Given the dearth of research in this area, year parameters will not be used for the search.

We adopted the SPIDER (i.e., sample, the phenomenon of interest, design, evaluation, research type) tool to design our search strategy (Cooke et al., 2012). The SPIDER format is a search strategy tool for qualitative research that advances thinking beyond the traditional PICO question (i.e., population, intervention, comparison, and outcome), as PICO is limited in its usefulness to include terms pertaining to qualitative design (Cooke et al., 2012). Adapted from the PICO framework, Cooke et al. (2012) note the acronym SPIDER (sample, phenomenon of interest, design, evaluation, and research type) reflects its advantage for identifying relevant qualitative studies. The SPIDER tool has been adopted in various qualitative meta-syntheses (Douma et al., 2021; Lunda et al., 2018). See Table 1 for a description of the components of our research question in SPIDER format.

Information Sources

We will search the following academic databases: MEDLINE (Ovid), APA PsycINFO (EBSCO), Criminal Justice Abstracts (EBSCO), Social Work Abstracts (EBSCO), Sociological Abstracts (ProQuest), Social Services Abstracts (ProQuest), SocINDEX (EBSCO), International Bibliography of the Social

Sciences (ProQuest), Applied Social Sciences Index and Abstracts (ProQuest), Women's Studies International (EBSCO), LGBTQ + Source (EBSCO), and Scopus (Elsevier). We will attempt to contact the author if a document cannot be accessed for full-text review. To locate gray literature, we will search the Google search engine and Google Scholar. We will review the first 50 results from the Google search engine and Google Scholar. Additionally, we will search the Community Health Online Digital Archive and Research Resource (CHODARR) and the Global Database on Violence Against Women.

In addition to the database and gray literature searching, we will complete backward and forward citation tracing, adding to the comprehensiveness of this review. The academic librarian (KR) will load forward and backward citations (with duplicates removed) from our final list of included papers into Covidence systematic review software (Covidence, 2023). Two team members will review all new papers loaded into Covidence for eligibility for a full-text review. The reference lists of papers in relevant journals not included in the database searches (e.g., *Canadian Journal of Disability Studies*) will be hand-searched.

Search Strategy

A draft search strategy was developed in MEDLINE (Ovid) by an academic librarian (KR) with expertise in identifying literature within health and social science research in consultation with other team members. The strategy is adapted from published knowledge syntheses on disability (Irvin et al., 2022; Small et al., 2022) and gender-based violence (Farmer et al., 2023) and employs text words and controlled vocabulary terms related to the SPIDER eligibility criteria, specifically the sample (women and nonbinary women with disabilities), the phenomenon of interest (gender-based violence), and the study designs of interest (qualitative literature). No year limits will be

Table 1. Research Question Framework (SPIDER).

Sample	Women with disabilities and nonbinary people who have experienced gender-based violence Women are defined as anyone who self-identifies as a woman (e.g., cisgender, transgender, gender diverse and nonbinary women) (Statistics Canada, 2021; Statistics New Zealand, 2021) Disabilities include any physical, intellectual, and developmental disabilities, chronic health conditions, and chronic illnesses. Like other reviews (Campbell et al., 2022), we excluded HIV to focus on disabilities disproportionately experienced by women. Mental health disabilities were also excluded from this meta-synthesis, given the span and prevalence of systematic reviews focused on mental health and gender-based violence (Golding, 1999; Sparrow et al., 2017)
Phenomena of interest	The lived experiences of gender-based violence. Gender-based violence is defined as any violence perpetrated against a person's will that results from power inequalities because of one's gender, gender expression, gender identity, or perceived gender. Gender-based violence can include physical, emotional, or psychological violence, including sexual assault, intimate partner violence, neglect, and harassment The formal and informal needs of disabled women who have experienced gender-based violence, the barriers to accessing services, and the best practices to support this population. These may include organizational approaches and policies
Design	Meta-synthesis of qualitative research, including interviews and focus groups with disabled women
Evaluation	Thematic synthesis of disabled women's experiences of gender-based violence and findings related to the needs of the population and the supports and services demonstrated to be most effective
Research type	Qualitative research published in English with no year parameters

applied to the search, and any documents published from database inception to the search date will be included. The complete pilot strategy and results are in [Appendix A](#).

Study Records

The academic librarian (KR) will import the search results into Covidence. Access to Covidence software is available to all team members through the university. Covidence is a valuable multi-disciplinary tool for conducting a qualitative meta-synthesis ([Ahmed et al., 2023](#); [Hughes et al., 2022](#)). The team will use Dedoose software, a cross-platform program for analyzing qualitative and mixed-methods research for the data synthesis stages. Data will be imported into Dedoose to be managed and analyzed into themes. Dedoose is frequently adopted in the data analysis stages of qualitative meta-syntheses ([Matthews et al., 2019](#)).

At least two team members will independently screen results directly in Covidence using the title and abstract to determine eligibility using the predetermined inclusion and exclusion criteria (i.e., every result is reviewed by two team members). Any document that has a disagreement between two reviewers will be reviewed by a third reviewer to resolve the conflict. The third reviewer will consult the research team throughout this process. The search results and screening process will be presented in a PRISMA-2020 flow diagram.

Data Extraction and Analysis

Our team will develop a standardized data extraction form to extract relevant qualitative data from the included studies. Similar to other qualitative meta-syntheses ([Douma et al., 2021](#)), we will pilot the data extraction form on at least six studies identified from the final list of eligible studies. We will extract data regarding the first author, publication year, journal, number of participants, type of disabilities identified, location, research methods (method of data collection and analysis framework used), GBV-related service or resource utilized (if applicable), potential or actual needs of involved participants, and outcomes (including any reported barriers and facilitators from the GBV-related service or resource), and any other categories that are identified from the pilot test. We may modify the data extraction form by consensus if needed. Two independent team members will import data into the data extraction form. Any disagreements will be resolved by a third reviewer, and there will be a discussion with the team to reach a consensus if needed.

Quality Assessment. To assess the methodological quality and rigor of included studies, we will utilize the Critical Appraisal Skills Programme (CASP) checklist as our primary quality assessment tool ([CASP, 2018](#)). The CASP checklist is an appraisal tool designed for systematic reviews to systematically assess the trustworthiness, relevance, and results of published papers ([CASP, 2018](#)). The CASP checklist is one of

the most frequently used tools for assessing qualitative studies in systematic reviews and meta-syntheses.

Two team members will independently apply the CASP checklist to each study that meets the inclusion criteria and import the information into a table. The CASP consists of 10 questions related to the appropriateness of the study methodology, sampling strategy, clarity of data collection, analysis and procedures, consideration of bias and ethical issues, accessibility, and significance of the findings ([Kokorelias et al., 2020](#)). Any disagreements will be resolved by a third reviewer, and there will be a discussion with the team to reach a consensus if needed. Studies will not be excluded based on quality; however, the results of the CASP assessment will be discussed in the review.

Data Synthesis

We will use a thematic synthesis approach to analyze and synthesize data from the final sample of studies ([Dixon-Woods, 2011](#)). Findings will be synthesized through reading and re-reading the selected studies, identifying the pertinent themes from the data set, and comparing and contrasting the relationships between each study's themes. In this way, our meta-synthesis will offer a rich interpretation of the data, providing deeper insights into our topic area ([Lee et al., 2015](#)). Regular team meetings will be scheduled to discuss the data synthesis stages and the results. This meta-synthesis will follow the five stages of framework synthesis identified by [Dixon-Woods \(2011\)](#), as adapted by [Douma et al. \(2021\)](#).

Stage 1: Familiarization with the data. Team members will begin by becoming familiar with the data and will note recurrent themes. This will involve reading the studies multiple times and filling out the standardized data extraction form. Team members will make a note of any initial themes during these readings.

Stage 2: Identifying the Thematic Framework. We will develop a framework based on themes generated from our analysis.

Stage 3: Indexing. Team members will independently read the extracted information from the standardized data extraction form to identify themes. The thematic framework will be revised as new themes are identified, with ongoing discussion and consensus among team members throughout this process. All studies will be reviewed until no new themes are identified. The identified themes will be used to create codes and then each study will be indexed using the codes related to the thematic framework.

Stage 4: Charting. The team will develop an analysis table and chart the data according to themes, akin to the thematic charting framework outlined by [Dixon-Woods \(2011\)](#). Our themes and subthemes will be charted in a table utilizing rows

and columns to compare and contrast the findings across all studies.

Stage 5: Mapping and Interpretation. The team will use the analysis table to define the identified concepts and map the range and nature of GBV among disabled women according to the review questions. Associations and connections between the themes and subthemes will be mapped using our analysis table, assisting with a greater understanding of the topic.

The review's major findings will be interpreted in line with our review objectives, and we will summarize each finding in a separate table titled "Summary of qualitative findings." This summary table of major findings will explain each finding while offering an organized overview of new data to share and disseminate.

Reporting of the Meta-Synthesis

We will be reporting our synthesis of qualitative research in accordance with the Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA 2020) guidelines (Moher et al., 2015) and in alignment with the Enhancing Transparency in Reporting the Synthesis of Qualitative Research (ENTREQ) statement by Tong et al. (2012). The review's rigor will be increased by adopting trustworthiness measures of dependability by using a detailed audit trail, increasing credibility through team members' prolonged engagement with the topic (i.e., research and practice experience), and ensuring confirmability by incorporating direct quotations from primary sources to support the meta-synthesis themes (Drisko, 1997).

Research Team and Reflexivity

Reflexivity enhances the quality of qualitative research and promotes rigor by extending understanding of a phenomenon by considering how the positions and personal interests of the researchers impact the stages of the research process (Jootun et al., 2009; Primeau, 2003). Reflexivity is essential throughout the research process, promoting accountability by reflecting on the potential for bias. We will engage in reflexive exercises throughout the research study, as Braun and Clarke (2021) suggested, to increase the trustworthiness of the findings. Our research team includes faculty, researchers, community workers, and students invested in promoting the well-being of disabled women. Most team members have worked with survivors of GBV in various professional capacities, including as social workers, community workers, and family intervention specialists. Additionally, several team members have lived experiences of the topic area, as several self-identify as disabled women or survivors of GBV.

The research team works collaboratively to achieve the research objectives. All team members have consulted on the conceptualization and design of this qualitative meta-

synthesis, including developing the research questions, inclusion and exclusion criteria, and the search strategy. In addition, team meetings are scheduled regularly for discussion and decision-making related to the research stages.

Assessment of Confidence in Review Findings

Drawing on Lewin's (2015) Grading of Recommendations, Assessment, Development, and Evaluation (GRADE) approach to confidence in review findings, we will apply the CERQual approach to assess and report our confidence in our meta-synthesis findings. Confidence in review findings will be assessed based on (1) identified methodological limitations of studies included in the review, (2) coherence between primary study data and review findings, (3) strength of data used in developing meta-synthesis findings, and (4) relevance of included studies to our SPIDER research question framework (Lewin et al., 2018).

Ethics and Dissemination

This qualitative meta-synthesis draws from existing literature, including scholarly and gray literature (e.g., book chapters and government reports). We do not require a formal ethical review as we will analyze publicly available data. The findings will be disseminated through scholarly publications, including a journal article submission, a knowledge synthesis report, an evidence brief, and knowledge mobilization activities. This research will contribute to scholarly literature to improve theoretical knowledge on women's experience of disability and GBV in academic sectors. Additionally, as our project is supported by community participation and expertise, we will engage with these collaborators in a virtual forum to discuss the next steps for enhancing and improving services to support disabled women who experience GBV.

Declaration of Conflicting Interests

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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Supplemental Material

Supplemental material for this article is available online.

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