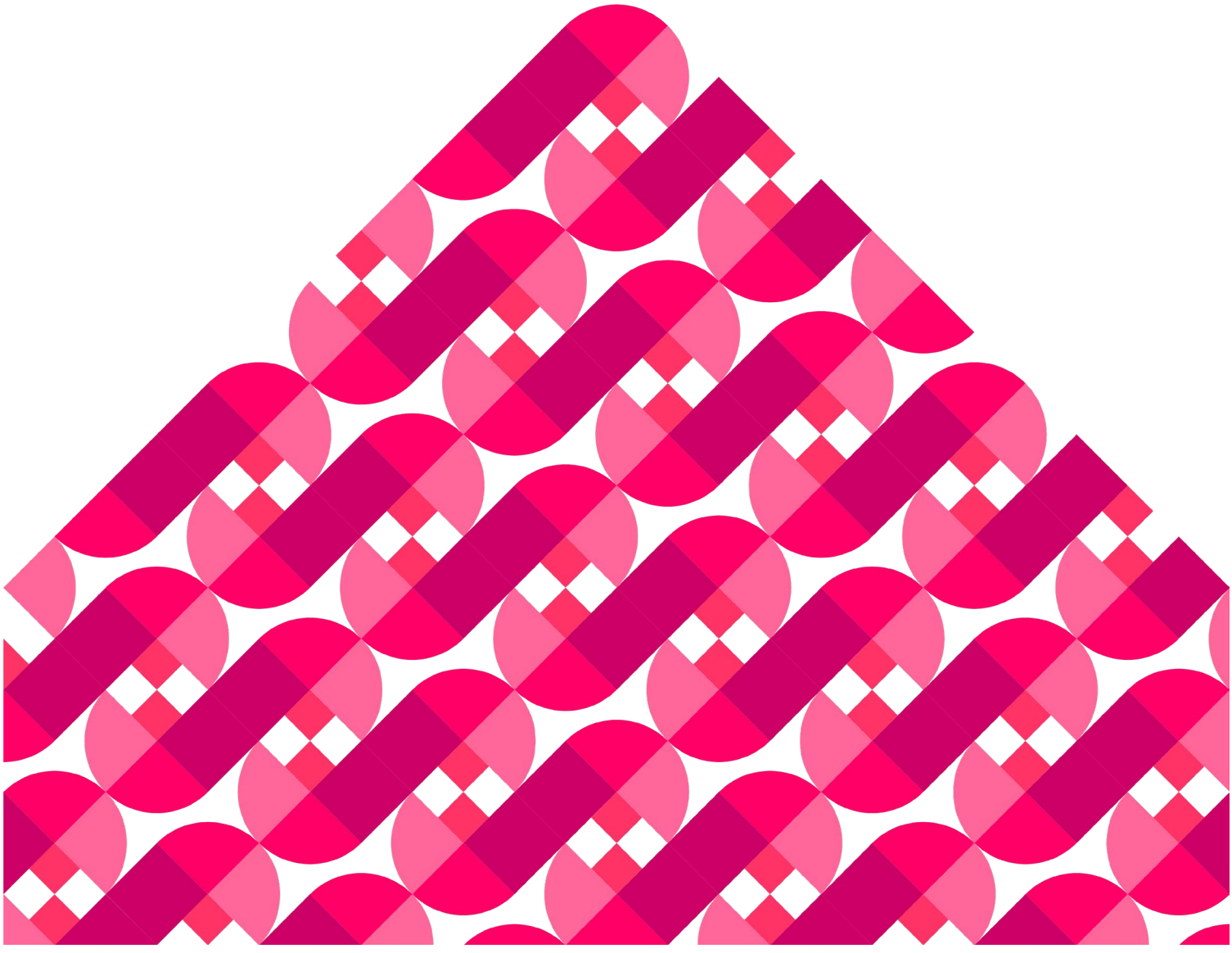
Swedish Agency for Participation

Survey of honour-based violence and oppression against persons with disabilities in Sweden



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Survey of honour-based violence and oppression against persons with disabilities in Sweden

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Summary

The Swedish Agency for Participation (MFD) has been commissioned by the Swedish government to conduct a survey of honour-based violence and oppression against persons with disabilities. This report is a condensed version of the final report submitted under this government commission.

The survey is based on six qualitative interview studies. Persons with disabilities with lived experience of honour-based violence have also been interviewed. The studies cover the school system, the justice system, healthcare, youth clinics, and social services. The majority of those interviewed are professionals working in these sectors.

The survey identifies several key findings. Exposure among persons with disabilities in an honour-related context is difficult to detect. This exposure is exacerbated by dependence on family support and care. This makes it more difficult for the group concerned to understand risks and to protect themselves against violence. The family's lack of knowledge and sense of shame associated with disability also contribute to limiting individuals' opportunity to access support and seek help. For professionals, it is often difficult to distinguish between legitimate care provided by the family and undue control and oppression.

Professionals need better knowledge of the specific vulnerability and exposure experienced by this group in an honour-related context. Services working with, for example, schools for pupils with intellectual disabilities, habilitation services, and activities under the Act (1993:387) on Support and Service for Persons with Certain Functional Impairment (LSS) need enhanced knowledge about honour-based violence and oppression. Professionals within the justice system and social services need deeper knowledge about how violence can take different forms against persons with disabilities.

The findings also show that progress can be achieved when staff are supported by specialists in honour-based violence and oppression or disability.

Better cooperation between various actors is also needed. The division of responsibilities needs to be clarified in cases where persons with disabilities are subjected to, or at risk of being subjected to, honour-based violence. Professionals also need a shared and easily accessible knowledge base in order to work more effectively.

The conclusion is that long-term measures are required. Efforts to highlight how honour-based violence and oppression affect persons with disabilities continue to face significant challenges. Knowledge needs to increase. Services that come into contact with this group need to develop more effective methods and approaches. To be able to prevent, detect, and act in cases of violence, clear cooperation, well-defined responsibility between actors, and coherent guidance are required.

About the report

This is a shortened version of the section of the report *Särskild sårbarhet, särskilt ansvar* [*Particular vulnerability, particular responsibility*] describing a survey of honour-based violence and oppression against persons with disabilities. The full report constitutes the final account of a government commission assigned to The Swedish Agency for Participation (MFD) in June 2023.[1]

The report is mainly intended for professionals and decision-makers who may encounter persons with disabilities in their work. This includes schools, social services, LSS services, healthcare, and the justice system. The report is also directed at organisations and authorities working to prevent and combat honour-based violence and oppression.

MFD has also involved persons with disabilities who have personal experience of honour-based violence and oppression. The survey is additionally based on cooperation with actors working to combat honour-based violence and oppression, and organisations representing persons with disabilities.

MFD has chosen a qualitative and exploratory approach to generate knowledge in areas where knowledge has previously been limited. Efforts have focused on identifying and describing the exposure of persons with disabilities living in an honour-related context, based chiefly on the experiences of professionals and to some extent on the experiences of the group concerned itself. The survey does not measure the extent of honour-based violence and oppression against persons with disabilities in Sweden. Rather, it highlights challenges, success factors, and good examples, as well as knowledge gaps and development needs in the work to prevent and combat honour-based violence and oppression.

The survey is based on a large number of interviews. These interviews were conducted with ten women and men with disabilities who had themselves been subjected to violence and oppression,[2] as well as with representatives from the following sectors:

- The school system: Interviews with representatives from 16 organisations in compulsory and upper-secondary schools for pupils with intellectual

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[1] Swedish Agency for Participation (2025) *Särskild sårbarhet, särskilt ansvar – Stödmaterial för att motverka våld mot barn och unga med funktionsnedsättning och kartläggning av hedersrelaterat våld och förtryck mot personer med funktionsnedsättning.* [*Particular vulnerability, particular responsibility – Supporting materials to combat violence against children and young persons with disabilities and survey of honour-based violence and oppression against persons with disabilities*].

[2] Of these ten interviewees, seven were women and three were men.

disabilities, two special needs schools[3], and 20 organisations in upper-secondary adult education for persons with intellectual disabilities,
- Habilitation services: interviews with 14 representatives from eight organisations,
- The justice system: interviews with 14 professionals at the Swedish Police Authority and the Swedish Prosecution Authority, as well as lawyers,
- Youth clinics, child health services and women's health services[4]: interviews with representatives from 27 different organisations,
- Social services, LSS services and organisations providing protected accommodation: interviews with a total of 38 professionals.

[3] Special needs schools are state-run schools administered by the Swedish National Agency for Special Needs Education and Schools (SPSM) for pupils with specific disabilities, such as deafness, hearing impairment combined with intellectual disability, severe language disorder, or visual impairment with additional disabilities.

[4] In the report, 'women's health services' is used as an umbrella term for all organisations that provide pregnancy-related care as well as care related to women's physical, sexual, and reproductive health. The study includes midwifery clinics, maternal health centres, specialist maternity care, as well as various women's clinics and gynaecological clinics. It also includes specialist clinics providing support and care for girls and women exposed to female genital mutilation.

Glossary – disability-related terminology

Disability refers to the limitations that an impairment may place on a person in interaction with their environment. Examples include difficulties in managing everyday life and restricted participation in employment, social relationships, leisure and cultural activities, education, and democratic processes. The barriers are primarily linked to shortcomings in accessibility within society and the physical environment.

Impairment is a reduction in physical, mental, or intellectual ability. An impairment can arise due to illness or other conditions, or as a consequence of a congenital or acquired injury and may be permanent or temporary.

Intellectual disability (ID) involves reduced intellectual capacity and limitations in adaptive functioning, i.e., how a person functions in everyday life. ID varies considerably between individuals and is divided into mild, moderate, severe, and profound forms.

Cognitive impairment can arise due to different impairments or injuries affecting the brain. This may include, for example, a neurodevelopmental disorder, intellectual disability, or brain injury following an accident or stroke.

LSS is the Swedish abbreviation for the Act (1993:387) on Support and Service for Persons with Certain Functional Impairment. Examples of LSS support measures include personal assistance, housing with special services, short-term stays outside the home, and companion service.

Neurodevelopmental disorders (NDD) is an umbrella term for various conditions affecting how the brain and nervous system function and process information. The term includes conditions such as ADHD, autism, and language disorders. It is common to have a combination of NDD diagnoses, such as autism and language disorder.

Mental disabilities refer to long-term mental health-related impairments that may make it more difficult for a person to live independently and participate in society on equal terms with others. The condition may fluctuate over time and is not necessarily constant. A person with a mental disability may at times function without significant difficulties but may also experience substantial challenges in everyday life.

Accessibility means that persons with disabilities have access to physical and digital environments, transport and facilities, as well as access to information, communication, goods, products and services on equal terms with others.

Violence against persons with disabilities

Previous studies by MFD show that the risk of being subjected to violence is nearly twice as high for a person with a disability as for the general population.[5]

Children and young persons with disabilities are particularly exposed. Their vulnerability and exposure to violence and other forms of abuse are well-documented in both Swedish and international research. Studies show that children with disabilities are twice as likely to report that they have been subjected to violence by relatives or persons close to them. Bullying is also twice as common. Children and young persons with disabilities are also subjected to sexual abuse to a greater extent.[6]

Violence against a person with a disability may take the same forms as violence directed at others. However, it may also manifest itself in other ways. It might involve moving furniture around in the home of someone who is blind or hiding or damaging someone's assistive devices. Actions like these are called disability-related violence.

Violence can also occur in places intended specifically for persons with disabilities, such as LSS services. Persons with disabilities often depend on many different people for support and care, and violence may occur within these relationships. Such relationships are not usually considered close relationships. Yet they can be both intimate and long-standing.

Dependence, vulnerability, and invisibility

Exposure to violence among persons with disabilities is often described through three interconnected themes: dependence, vulnerability, and invisibility.[7] These need to be understood together. They can explain how violence occurs, why it is not detected, and why persons with disabilities do not have access to appropriate support and protection.

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[5]Swedish Agency for Participation (2023) *Våld mot personer med funktionsnedsättning – Om utsatthet och förekomst av våld* [*Violence against persons with disabilities – On exposure and the occurrence of violence*].

[6] Svedin, C.G., Landberg, Å., & Jonsson, L. (2022) *Mer utsatta än andra – Om våld och övergrepp mot barn med funktionsnedsättningar* [*More exposed than others – On violence and abuse against children with disabilities*]. The Children's Welfare Foundation Sweden.

[7]Swedish National Council for Crime Prevention (2007) *Våld mot personer med funktionsnedsättning* [*Violence against persons with disabilities*].

Dependence: Many persons with disabilities are dependent on family members and support staff. They may also have a greater need for accessible environments. Dependence can affect a person's opportunity for self-determination. It can also be a risk factor for being subjected to abuse and violence. At the same time, dependence can prevent a person subjected to violence from leaving an abusive environment or relationship.

Vulnerability: A disability can in itself involve different forms of vulnerability, such as reduced physical or cognitive capacity to protect oneself against abuse and violence or to understand dangers in the environment. Vulnerability can also involve lacking knowledge or opportunities to protect one's rights or to talk about what one has been subjected to.

Invisibility: Exposure and violence against persons with disabilities can be made invisible in different ways. Prejudice and lack of knowledge about who can be subjected to violence or perpetrate it can prevent detection, protection and support. Limited communication and limited contact with the outside world can contribute to invisibility. Accessibility barriers in society can lead to isolation and make it more difficult for others to recognise a person's situation. Another aspect of invisibility is failing to ask or follow up signs of violence or abuse. Invisibility can also involve flawed or insufficient statistics that conceal violence against certain groups.

What is honour-based violence and oppression?

The Swedish government's definition of honour-based violence and oppression

Honour-based violence and oppression refers to persons, primarily girls and women but also boys and men, whose lives are restricted and who are subjected to pressure and violence aimed at maintaining the family's control over the individual.[8]

Honour-based violence and oppression is built on strong patriarchal and heteronormative values aimed at maintaining the honour of the family or extended family. The family's honour is considered to depend on the chastity and virginity of girls and women, as well as their actual and alleged behaviour in relation to these ideals.[9]

Honour-based violence and oppression is perpetrated or authorised by a group, often the family or extended family. It can take many forms, including, child marriage, forced marriage, or female genital mutilation (FGM). It can also involve attempts to change or suppress the sexual orientation, gender identity or gender expression of LGBTQI persons or taking a child out of the country to subject them to honour-based violence.

Child marriage and forced marriage can also occur in connection with an individual being exploited in prostitution and human trafficking. For example, a woman who is forced into marriage may also be a victim of human trafficking. She may also be exposed to sexual exploitation.

Honour norms can, in their most extreme form, lead to deadly violence.

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[8] Swedish Government (2020) *Ökat skydd mot hedersrelaterad brottslighet* [*Increased protection against honour-based crime*]. *Bill 2019/20:131*. Stockholm, Ministry of Justice.

[9] Swedish Government (2022) *Ett särskilt brott för hedersförtryck* [*A special criminal offence for honour-based oppression*]. *Bill 2021/22:138*. Stockholm, Ministry of Justice.

Honour-based violence and oppression in Swedish legislation

Sweden has gradually developed and strengthened legislation to prevent and combat honour-based violence and oppression. The work is based on the principles of human rights, children's rights, and gender equality.

Honour-based oppression

Since 2022, there has been a special criminal offence – honour-based oppression – in the Swedish Penal Code. The offence criminalises repeated violations of a person's integrity where the acts were intended to seriously damage the person's self-esteem. For an offence to be considered honour-based oppression, the motive for these acts must have been to preserve or restore the honour of a person, family, kin, or other similar group.

The purpose is to capture the systematic and collectively sanctioned oppression that often affects persons in honour-related contexts, even when individual acts would not in themselves constitute serious crimes. The punishment is imprisonment for up to six years.

Forced marriage and deception for the purpose of marriage abroad

Since 2014, it has been a criminal offence to force or pressure a person into marriage. It is criminal to induce a person to enter marriage through unlawful coercion or exploitation of a person's vulnerable situation. Attempts, preparation and conspiracy are also criminalised.

The offence of deception for the purpose of marriage abroad was also introduced at the same time. It involves a person, through deceptive conduct, inducing another person to travel to another country in order to subject them to forced marriage. The provisions also apply to marriage recognised as valid under the laws of another state.

Child marriage

Since 2020, all forms of marriage involving persons under 18 years of age have been criminalised, regardless of whether force, pressure or exploitation can be proven. It is criminal to induce or allow a child under the age of 18 to marry or to enter into a marriage-like relationship. Sweden does not recognise child marriages entered into abroad, even if they are valid in the country where they were contracted.

Female genital mutilation

Female genital mutilation (FGM) has been prohibited in Sweden since 1982. The law states that surgical interventions involving the female external genitalia and intended to mutilate or otherwise permanently alter them are prohibited, regardless of consent. The offence can result in imprisonment for up to six years, and Swedish courts may also impose sentences in cases where the procedure was performed abroad on a person with ties to Sweden.

Honour motive as grounds for an increased sentence

Since 2020, there has been a specific aggravating circumstance providing that an honour motive should be taken into account when assessing the seriousness of an offence and determining the sentence.

Travel ban

A travel ban was introduced in 2020 in the Swedish Care of Young Persons Act (1990:52) (LVU) in order to prevent children from being taken abroad to be married, enter into a marriage-like relationship, or be subjected to FGM.

In June 2024, the provisions were extended to include additional forms of harmful travel abroad, such as so-called “upbringing trips” and conversion attempts linked to sexuality or gender expression.

Human trafficking

The offences of forced marriage, child marriage, and deception for the purpose of marriage abroad are subsidiary to the offence of human trafficking. This means that it must always be examined whether the circumstances instead meet the criteria for human trafficking.

This applies, for example, in cases of forced marriage involving compensation (a so-called “bride price”) or when a woman is transferred or “inherited” within a family or extended family.

Vulnerability and exposure in an honour-related context

Control or care? A difficult distinction in an honour-related context

Persons who live with a disability may have extensive and specific needs for care and support from their family and from society. Relatives can furthermore act as legal guardians, representatives or personal assistants.

When a person needs help with everyday tasks or communication, they often become dependent on other people. This creates a power relationship between the individual and the people around them. For children and young people, this can affect their ability to make decisions for themselves and to develop a sense of personal integrity, autonomy, and self-esteem. If independence is limited, there is a risk that this may come to be perceived as normal and accepted.

The survey shows that it is often difficult for professionals to determine when support and care are preventing a person from expressing their own wishes. It is particularly difficult when the person lives in an honour-related context. Staff report that it can be difficult to distinguish honour-based control from ordinary care. School staff state that students may be vulnerable in different ways, which can sometimes lead parents to seek to protect them by limiting their freedom.

This concerns, for example, students who exhibit risky behaviour online or who are at risk of being manipulated or recruited by criminal gangs. When there are suspicions of honour-based oppression, it becomes particularly difficult to draw the line between care and control.

Vulnerability and risk factors

Different disabilities can increase vulnerability in an honour-related context. This may be because the person concerned has greater difficulty understanding their situation and the risks involved. Persons with an intellectual disability, or another cognitive impairment may be highly dependent on those around them and have limited awareness of risks. This means that they are at increased risk of being exploited or manipulated.

The disability can also make it difficult to recognise warning signs or understand when family members or others cannot be trusted. It can be very difficult, or even impossible, to live a double life when a person is unable to conceal aspects of their life that conflict with the family's honour norms. It may also be difficult to adapt to the culture of silence that exists in honour-related contexts.

Persons who need support in communication are at risk of being isolated within families governed by honour norms.[10] This may involve the family failing to provide, or deliberately withholding, support from the person. The aim may even be to restrict the person's contact with people outside the family. It may also involve not accepting the child's need to attend compulsory school for pupils with intellectual disabilities or a special needs school.

If the person has difficulty expressing themselves or does not have access to relevant information, their ability to report their situation is reduced. A lack of knowledge about their rights may also mean that a person does not understand that they are being subjected to violence or oppression, or that they are entitled to support.

Persons who are dependent on those around them often struggle to participate in social contexts outside the family. This increases their exposure.

> This is a group that has difficulty leaving the home environment independently and building a network. Doing so means going against their entire extended family. And there is nowhere else to go. In a way, they become trapped by the situation. There are no real alternatives.
>
> – Counsellor, habilitation services

Shame and disability in an honour-related context

A recurring theme in the survey is the shame associated with disability in an honour-related context.[11] In such contexts, disability may be perceived as a deviation from what is regarded as normal, which is considered to threaten the family's honour. As a result, disability is often associated with shame in these settings.

In an honour-related context, the individual's actions are closely linked to the reputation and honour of the family and the wider group. If a person breaks

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[10]Barriers to communication arise when, for example, persons with intellectual disabilities do not have access to the augmentative and alternative communication that they need. This can also happen if persons who are deaf, hearing impaired, or deafblind do not have access to different forms of interpretation (sign language interpreting, deafblind interpreting or real-time captioning).

[11]Shame and stigmatisation of disability have also existed historically in Sweden. MFD has described this stigmatisation in the exhibition *Inlåst och utanför: Synen på människor genom historien – om funktionsnedsättning och institutionsvård* [*Locked in and outside: Views on people throughout history – On disability and institutional care*]. The exhibition is also available online: https://mfd.grade.se/luvitportal/np/templogin.aspx?courseid=5059

honour norms, for example through romantic relationships, this may bring shame upon the entire extended family. Shame is therefore a central concept in honour-related contexts and can be used to control the person's behaviour. This may involve threats, punishment, or violence. Feelings of shame may lead families to act in ways that have serious consequences for the individual.

A family in an honour-related context that seeks to avoid shame and appear socially acceptable may deny family members their individual rights. In this setting, the ideal of heterosexual marriage may be viewed as a route to perceived normality. In honour-related contexts, there may also be beliefs that marriage can "cure" a disability. For a person with a disability, this creates a risk of different forms of oppression and violence intended to preserve the family's honour.

This can result in child marriage, forced marriage, deception into marriage, or deception for the purpose of marriage abroad. Another belief may be that children with disabilities are viewed as a punishment from God, which can result in shame and guilt being placed on the mother.

Shame among relatives can take different forms. One consequence may be that the disability is not acknowledged and that the person is denied support. Another consequence may be that the person is prevented from participating in social contexts and kept isolated from others.

People with disabilities who have grown up in an honour-related context confirm in interviews that their disability is often viewed as shameful. They describe indifference, distancing, and a lack of empathy and affection from their family. Interviewees who are deaf describe how hearing siblings have held a higher status within the family.

In strongly collective honour-related contexts, the value, status, reputation, and standing of the individual – and therefore also of the family – are affected by how others judge the individual's actions. A person with, for example, an intellectual disability may in this context be viewed as a risk because they may unintentionally violate social norms, which can affect the family's honour.

In honour-related contexts, gender identities or sexual orientations that break with prevailing norms are often regarded as particularly shameful. LGBTQI persons are therefore at greater risk of being forced into marriage or subjected to other attempts at so-called "correction".

An interviewee who is deaf describes how his parents distanced themselves from him because of his sexual orientation and how they are ashamed of him:

> He [my father] is extremely ashamed. Because I did not turn out the way he expected me to.
>
> – Deaf man in his thirties

Consent from a disability perspective

One recurring theme is the particular vulnerability of some persons with disabilities to being deceived into marriage. Staff within social services and the justice system emphasise that it can be difficult to determine if a person with an intellectual disability living in an honour-related context has the capacity to consent to marriage.

At the same time, all adults have the right to marry. Under Swedish law, there is no legal basis for questioning a person's capacity to consent to marriage. The legal framework within which professionals operate is the legislation prohibiting forced marriage through unlawful coercion or exploitation of a vulnerable situation.

Being in a vulnerable situation means being in a position of dependence in relation to a perpetrator. This can be due to financial hardship, refugee status, powerlessness, a relationship of dependency or obedience, illness, or an intellectual disability.

The UN Convention on the Rights of Persons with Disabilities clarifies that a person who has difficulties making decisions due to their disability is entitled to receive the information and the support necessary to make their own decisions in the best possible way and to live as independently as possible.

Different forms of honour-based violence and oppression against persons with disabilities

Persons with disabilities can be subjected to the same types of violence and oppression as others, but these often take different forms. Interviewees with personal experience, as well as professionals who were interviewed, describe several ways in which honour-based violence and oppression may manifest itself. The most common forms affecting this group are outlined below.

Everyday control and restrictions

When a person's everyday life is characterised by scheduled activities and support measures, it can be difficult for outsiders to determine what constitutes legitimate support and guidance in everyday life. Several professionals describe how there can sometimes be a more concealed form of oppression in everyday life, which makes it even more difficult to assess what constitutes legitimate support and what amounts to undue control.

This may involve girls being given less freedom or parents being perceived as particularly strict. Even though such situations can be difficult to detect, the ability to identify them is important in order to prevent the violence from escalating.

> We have a father who is very dominant and controlling. He physically assaults the mother. He does not hit our patient, but he threatens her. She is not allowed to socialise with whomever she chooses. The environment is very restrictive. She's not allowed to meet men and boys. She longs to be able to live a normal life, but she is frightened and does not dare to take that step. […]
>
> At first, moving away from home was completely inconceivable. Now she longs for it.
>
> – Counsellor, habilitation services

Fear and exposure to physical violence

Interviewees with personal experience of living in an honour-related context describe both witnessing and being subjected to violence during childhood.

> We're afraid of him [our father]. He has calmed down in recent years. But what he might do is always in the back of your mind. He was very violent when we lived [in our country of origin]. I have seen my siblings being beaten. I have always been afraid of him.
>
> – Young woman with a disability

Some interviewees describe how, even after breaking ties with their family, they continue to live in fear because of threats of violence from family members or relatives. For those who experience barriers in communicating with others, it can be particularly difficult to convey such fears to people outside the family.

Interviewees also describe how their belongings were destroyed, for example through mobile phones being smashed or clothing considered inappropriate being torn apart. Economic violence was also reported.

Some interviewees have also been threatened with weapons and subjected to physical violence by family members. One young woman with an intellectual disability who had been raped by her boyfriend was subjected to further violence by her father and her brothers after telling them that she was no longer a virgin.

Forced marriage, deception, and abductions in an honour-related context

There are strong expectations surrounding heterosexual marriage in honour-related contexts. For persons with disabilities, this can involve particular pressure, as marriage is sometimes viewed as a way of reducing the stigma associated with disability. The survey contains examples of persons who are deaf being forced into marriage and people with intellectual disabilities being deceived into marriages to which they were likely unable to give informed consent. This affects girls and boys, and women and men alike.

In some cases, the person is taken abroad to the family's country of origin. There, the person may be forced into marriage, as in the case of an interviewed man who is deafblind and who was married to a hearing woman against his will.

> I wanted a divorce and then I tried to tell my mother and father that I wanted a divorce. We were sitting there on the plane and I started crying. My mother saw that and understood that I really didn't want to be married.
>
> – Man in his thirties who is deafblind

For women with intellectual disabilities, exposure may be particularly acute where forced marriage leads to sexual abuse, unwanted pregnancy, and pressure from both the husband and the family. The disability may make it more difficult for the woman to resist pressure from the family and to understand her situation.

The survey shows that cases involving abduction in an honour-related context are often complex and difficult for the justice system to handle. One young woman with a disability, who now lives under a protected identity, states that she was taken out of the country to be married before reaching adulthood. Her parents deceived her by claiming that they were travelling to visit a seriously ill relative. She was kept abroad for several months before the Ministry for Foreign Affairs helped her return to Sweden. By the time she returned, she had turned 18.

If financial transactions occur in connection with a forced marriage, the acts may, under Swedish law, be classified as human trafficking. However, the survey shows that knowledge within, for example, social services remains limited regarding the application of human trafficking legislation in cases involving child marriage or forced marriage.

Female genital mutilation of girls and women with disabilities

Female genital mutilation (FGM) refers to procedures in which parts of the external genitalia of girls are removed, damaged or otherwise altered. It is a serious violation of children's rights and human rights. The practice, which has existed for more than 2,000 years, primarily affects girls between the ages of 4 to 14, but may also be performed on younger children.

FGM is often linked to beliefs about girls' and women's sexuality and purity. One reason may be to ensure a girl's virginity before marriage, which is regarded as important for the honour of the family and the collective. In some cultures, FGM is viewed as a transition into adulthood. FGM can lead to serious physical and mental consequences.

In Sweden, all forms of FGM are prohibited under the Act Prohibiting Female Genital Mutilation (1982:316). It is also illegal to perform the procedure in other countries if the person involved is a resident of Sweden.

The National Board of Health and Welfare estimates that approximately 68,000 girls and women living in Sweden may have been subjected to some form of FGM, and that between 13,000 and 23,000 girls may be at risk of being subjected to FGM.[12]

The survey highlights that many organisations experience difficulties in detecting exposure to FGM in this group.

Among the interviewees is a young woman who was subjected to FGM as a child.

> They destroyed my life. They decided to sew up my genitals.
>
> – Young woman with a disability

A majority of the schools in the study – 10 out of 18 – have experience of working with girls with disabilities who have been subjected to FGM.

[12] National Board of Health and Welfare (2023) *Uppskattning av antalet kvinnor och flickor i Sverige 2021 som kan ha varit utsatta eller riskerar att utsättas för könsstympning* [*Estimate of the number of women and girls in Sweden in 2021 who may have been subjected to or are at risk of being subjected to female genital mutilation*].

Representatives of the justice system state that cases involving FGM are particularly difficult and require specialised investigators with expert knowledge.

Very few healthcare institutions in the survey are aware of cases in which a girl or woman with a disability has been subjected to FGM. However, several professionals explain that it is often difficult to identify whether a patient has an intellectual disability or neurodevelopmental disorder. This may be one reason why this group is seldom identified in healthcare settings.

The vulnerability of boys and young men

Boys and men can have dual roles in an honour-related context. They may be expected to control and restrict female family members while also being subjected to violence and oppression themselves. School staff have highlighted this dual role among boys:

> It is very important not to forget [the boys'] role. It is horrible to be a ten-year-old and already feel responsible for whether your sister is wearing jeans. Imagine going through life constantly monitoring things in that way.
>
> – Counsellor, compulsory school for pupils with intellectual disabilities

So-called "upbringing trips" are examples of abductions in an honour-related context that may primarily, though not exclusively, affect boys and young men.[13] Staff at youth clinics highlight how young people with neurodevelopmental disorders or intellectual disabilities are at particular at risk of being taken abroad in order to be subjected to upbringing measures based on honour norms. One reason for such trips may be behaviour in boys that is perceived as breaking sexual norms.

[13] In the report *Bortförda barn och unga* [*Abducted children and young people*] (2022), the Swedish Gender Equality Agency states that children and young people are taken out of Sweden every year against their will. The aim of the abductions can be child marriage, forced marriage, or upbringing trips. When boys and men are abducted abroad, it is most often for an upbringing trip due to criminal or other form of destructive behaviour. Among girls and young women, abduction for the purpose of child marriage or forced marriage is more common. In cases where girls and women are subjected to upbringing trips, it is more often to prevent them from adopting Swedish values and ways of life that are perceived as incompatible with honour norms.

> They may be locked up, disowned, or sent back to the family's home country for violating too many honour norms. […] I met a boy who was going to be sent to Quran school because he had contracted chlamydia. His family believed that he needed stricter upbringing because they thought he had been too sexually active.
>
> – Midwife, youth clinic

Another risk highlighted by the study is the recruitment of boys and young men into criminal environments.[14] This primarily concerns boys and young men with intellectual disabilities and neurodevelopmental disorders living in honour-related contexts. They can be drawn in through false friendships and subsequently exploited by criminal gangs.[15]

[14] These risks of course also exist for girls with disabilities, but this did not emerge from MFD's interviews.

[15] MFD sees that there are large knowledge gaps about the relationships between honour-based crime, gang criminality, and other serious crime.

Conditions and needs for preventing and combating exposure

All interviewed professional groups may come into contact with persons with disabilities who may have been subjected to violence and oppression. Some organisations work specifically with persons with disabilities. Others, which work with issues relating to violence, such as parts of social services and the justice system, encounter a broad range of service users that includes persons with disabilities.

Knowledge and competence

The level of knowledge varies depending on role and organisation. Schools for pupils with intellectual disabilities, and special needs schools, habilitation services, and LSS services possess extensive knowledge about disabilities and impairments, but often less knowledge about violence and honour-based oppression. Within the justice system and parts of social services, the reverse is often the case – knowledge about disabilities is frequently lacking.

The school system

- Teachers and student health service staff need greater knowledge about honour-based violence and oppression. Many members of school staff, including headteachers, are unaware that the issue is included in the curriculum.
- There is a lack of knowledge about the legislation prohibiting FGM. There is often also a lack of systematic efforts within schools to detect cases of FGM. The survey contains examples showing how this can result in school staff referring a girl who has been subjected to FGM only to healthcare services, rather than also referring the case to social services for investigation.

Healthcare

- Habilitation services vary in their level of knowledge about honour-based violence and oppression. Because their remit is so broad, there is a risk of the issue not being given enough attention.
- Youth clinics state that they have a good understanding of honour-based violence and oppression. Most have also received training relating to disabilities. However, there remains a need for more advanced expertise and access to support materials.
- Child health services and women's health services describe having a good basic level of competence. Nevertheless, many interviewees call for greater knowledge about how honour-based violence and oppression may manifest itself in relation to persons with different types of disabilities.

Social services and LSS services

- Knowledge about honour-based violence and oppression needs to be strengthened, particularly within organisations that provide support measures for persons with disabilities.
- Challenges arise when knowledge is required both about disabilities and about honour-based violence. For example, when a social services case officer needs to communicate with a victim of honour-based violence who needs visual support or sign language interpreting. Social workers state that this lack of knowledge negatively affects investigations.

The justice system

- There is a lack of sufficient knowledge about both honour-based violence and disabilities. Although there are specialists within the Swedish Police Authority and the Swedish Prosecution Authority, not all cases are handled by them. There is even more limited knowledge about how these issues intersect. Interviewees state that basic knowledge about honour-based violence and oppression, as well as disabilities, must be strengthened throughout the entire justice process, including within the courts.

Preventing honour-based violence and oppression

To prevent honour-based violence and oppression, initiatives are needed to, among other things, counteract harmful masculinity norms and strengthen girls' and women's rights to make decisions about their own lives. It is also important to provide education on sexual and reproductive health and rights, and to strengthen the influence and participation of children and young people.[16]

Schools have a particularly important role in preventative work. The curriculum establishes the need for knowledge-enhancing initiatives concerning honour-based oppression and issues relating to sexuality, consent, and relationships. However, the survey shows that existing support materials on honour-based violence are not designed for schools for pupils with intellectual disabilities or special needs schools.

Teachers and student health services may instead be referred to materials intended for preschools. In special needs schools, professionals emphasise that there is often a lack of materials for students with severe hearing loss or students who are deaf.

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[16] Swedish Government (2016) *Makt, mål och myndighet – feministisk politik för en jämställd framtid* [*Power, goals, and authority – Feminist politics for an equal future*]. *Skr. 2016/17:10*. Stockholm, Government Offices.

Within habilitation services, there is a perception that the mission itself is preventative in nature. By informing and encouraging families, staff seek to help them accept support measures. This work is often carried out in cooperation with other actors, such as schools and interest organisations, because some guardians are unwilling to accept support. As a result, some children and young people do not receive the help they need and risk becoming increasingly isolated and exposed.

The work undertaken by youth clinics in the area of sexual and reproductive health provides valuable opportunities for violence prevention. They offer supportive conversations in which they provide frames of reference to help young people reflect on the risks they may face and to remind them of their rights. The clinics also carry out outreach work through visits and group information sessions aimed at compulsory and upper-secondary schools for pupils with intellectual disabilities. They also collaborate with habilitation services and exchange experiences with them.

An elusive group

Detecting honour-based violence and oppression among children, young people, and adults with disabilities presents challenges in many respects. Accessibility barriers and communication obstacles also make it difficult for those subjected to violence to talk about their exposure.

Organisations in the survey face different challenges in their work:

- A large majority of the schools included in the survey lack procedures and action plans for preventing and detecting honour-based violence and oppression. Schools highlight particular challenges in determining the motives behind guardians' restrictions on students' freedom and independence. This also applies for adult students with intellectual disabilities.

> We currently have a student whom we feel may be in that grey area. I think it is quite difficult to know where to draw the line regarding what should be considered [oppression]. But it feels as though there is an honour culture involved... because the student is monitored so closely, and it is difficult to draw this line. To what extent are they [the parents] simply trying to ensure that things go well for her, and to what extent are they controlling her?
>
> – Special needs teacher, upper-secondary adult education for students with intellectual disabilities

- Professionals within habilitation services report that exposure to honour-based violence and oppression is difficult to detect. They may fail to identify exposed patients, despite having long-term contact with them.
- Youth clinics experience difficulties in reaching young persons with disabilities and young people living in honour-related contexts. One exception is young persons with neurodevelopmental disorders. As a result, young persons with other disabilities living in honour-related contexts risk not receiving the support offered by the clinics.
- Child health services and women's health services have limited experience of meeting persons with disabilities who have been subjected to honour-based violence and oppression. Although these healthcare services encounter a broad range of patients, this group appears to remain invisible.
- Healthcare professionals experience particular difficulties in detecting exposure among women who face barriers in communication.

Asking questions systematically and under the right conditions

Several organisations emphasise the importance of asking the right questions about violence, recognising warning signs, and building trust. Within habilitation services, it is particularly important to be able to speak with the person alone, because relatives often attend appointments. Several interviewees describe how relatives may insist on being present. Some organisations have therefore introduced procedures enabling doctors, counsellors and other professionals to meet persons individually.

Many habilitation services ask systematic questions about violence. Some have routines and checklists to help employees more easily detect and respond to situations where honour-based violence and oppression are suspected.

Youth clinics use the material *SEXIT*[17] to ask questions about honour-based violence and oppression. The material is also available in easy-to-read Swedish and with visual support. Interviewees note, however, that many young people living in honour-related contexts answer 'no' to the questions. This may be due to difficulties understanding the questions and recognising their own exposure, or to fear of the consequences of speaking out.

Youth clinics emphasise the importance of offering supportive conversations and counselling about risks. This is especially important for young persons with disabilities, who may have limited capacity to reflect on consequences. Interviewees emphasise, however, that supportive conversations must always be

[17] SEXIT is a questionnaire and conversation aid with a focus on sexual health and experiences of violence. https://www.vgregion.se/halsa-och-vard/vardgivarwebben/amnesomraden/sexuell-halsa/kunskapscentrum-for-sexuell-halsa/utbildningar/catch-up-sexit/

combined with helping the young person understand that the control to which they are subjected is unacceptable. Such conversations should not be interpreted as justifying honour-based oppression.

> We may also be able to help them reflect on risks. For example, we often ask: 'What would happen if your birth control pills were discovered? What would you say? Would they [your parents] believe that explanation? What would happen if there were photographs of you and your partner?' That can help them think about risks. We often receive support with this from the honour-related resource team.
>
> – Midwife, youth clinic

Child health services and women's health services encounter new parents and children and therefore have good opportunities to prevent and detect honour-based violence and oppression. Systematic work is also carried out using questionnaires. Child health services use screening procedures[18] to examine and detect various problems. Interviewees explain that asking everyone the same questions may make it easier to raise sensitive issues.

Within child health services, questions are also asked about attitudes towards female genital mutilation, and information is provided about Swedish legislation. Several interviewees describe how they initially felt unsure, but that clear procedures and experience made it easier to ask this question.

> At first, I felt a little uncertain. Now it feels natural. It's like asking about alcohol or tobacco use. Itis simply part of the appointment. We might say: 'We ask everyone this question. You come from a country where female genital mutilation occurs. Here in Sweden that practice is prohibited. How do you feel about that?'
>
> – Nurse, child health services

[18] Screening involves a general approach in which everyone that an organisation comes into contact with is asked questions and examined in order to detect various problems or risk behaviours.

Difficult to investigate honour-based violence and oppression

Social services describe investigations into honour-based violence and oppression as time-consuming and difficult. These cases are often complex, and social workers may sometimes need to make rapid decisions regarding care and custody. The situation becomes even more difficult where there are no sheltered accommodation options suitable for persons with disabilities.

Many social workers feel uncertain and work under high-pressure conditions. Cases involving persons with disabilities often take more time, partly because of the person's dependence on relatives.

The Swedish Police Authority and the Swedish Prosecution Authority now have specialists who provide support in cases of honour-based violence. However, there is no equivalent expertise relating to disability issues. Investigators must instead rely on limited methodological support and legal guidance.

Police officers, prosecutors, and staff at Barnahus[19] describe cases involving honour-based violence and oppression as resource-intensive and difficult. These may include child marriage, forced marriage, and FGM. Such cases require specialist knowledge that not all professionals possess.

The work also involves assessing threats and the risk of abduction. In some cases, problems arise concerning how questioning and interviews should be conducted. It can be difficult to obtain statements that withstand scrutiny in legal proceedings. The requirement not to ask leading questions makes the work even more difficult and creates obstacles to the use of augmentative and alternative communication (AAC). Greater knowledge is needed about how people with different cognitive and communication-related impairments think and communicate.

> The justice system is not adapted to different ways of communicating
>
> – Police officer

The interviews show that there is some preparedness for conducting interviews with adults with intellectual disabilities. These interviews are sometimes done with the support of child interviewers and in collaboration with social services.

[19] Barnahus is a collaborative model in which social services, the police, prosecutors, and healthcare providers work together to investigate suspected crimes against children and provide support for the child in a safe and child-friendly environment.

The police state that increased collaboration with social services would be beneficial in all cases that concern honour-based violence and oppression.

Challenges in placing persons with disabilities subjected to honour-based violence in domestic violence shelters

For supportive and protective interventions to work effectively for persons with different needs and impairments, it is necessary to have accessible and secure accommodation solutions tailored to the individual's needs. The survey shows that this presents a challenge for social services in relation to, for example, domestic violence shelters[20].

If the accommodation does not meet the person's needs, there is a risk that the individual seeking protection will return to their family. Several interviewees describe creative solutions, but there are often still barriers that prevent some persons from utilising protective interventions.

> We had a case not long ago where it was very apparent that the girl was 18 years old, but perhaps mentally more like 13. She was living in extremely difficult conditions at home. But legally she was an adult. So when she came here, she could not fully understand how exposed she was. That made our work - trying to help her to understand her situation - very difficult. In the end, she returned home.
>
> – Women's shelter representative

Organisations providing protection and support describe how difficult it can be to get municipalities to understand the needs involved and to approve placements in domestic violence shelters that may need to continue for extended periods.

Persons with, for example, intellectual disabilities or autism often need additional support and stable routines when placed in domestic violence shelters. Leaving family members and a familiar environment can be particularly difficult. Several interviewees emphasise the importance of a safe daily structure with clear routines during their stay in domestic violence shelters.

[20] Other commonly used terms include sheltered accommodation and refuge.

> Many people who are still emotionally vulnerable [and] have not had the opportunity to build self-esteem also struggle to manage their own protection effectively. A person needs first to value themselves in order to have the motivation to protect themselves. Physical protection is comparatively straightforward to arrange — we have secure buildings, after all. But emotional and psychological protection takes much more time, and that process cannot be rushed.
>
> – Domestic violence shelter provider

Cooperation is crucial for effective work

Effective cooperation between actors working to prevent, detect, and act against honour-based violence is crucial, especially for persons with disabilities, whose life situations are often complex.

Cooperation is necessary in order to share knowledge, strengthen competence, and improve the ability to detect violence and take appropriate actions. This applies both within individual organisations and between the police, social services, schools, healthcare services, and other relevant actors.

Healthcare organisations' views on cooperation

Interviewees from the healthcare sector describe confidentiality regulations both as a protection factor and an obstacle to cooperation.

Habilitation services would like to see more dialogue between different actors and highlight examples where anonymised cases have been discussed together with forensic psychiatry, psychiatric services, and social services in order to provide mutual guidance and support. In some regions, there are structured forms of internal cooperation concerning honour-based violence and oppression, such as designated representatives with special responsibility for monitoring issues relating to honour-based violence.

Other healthcare organisations stress the importance of a coordinated chain of care, especially in cases involving honour-based violence and oppression. This becomes even more important where the person subjected to violence has a disability. Professionals note that it is difficult for individual organisations to possess expertise both in honour-related issues and disability-related issues. A combination of competencies is therefore needed to manage these complex issues effectively.

Schools' views on cooperation with social services

School staff describe cooperation with social services as challenging. This particularly concerns how and when social services involve parents in cases where honour-related violence and oppression may be present. One concern raised is that

social services sometimes share too much information with guardians following a report of concern. This may place a student living in an honour-related context at even greater risk.

There are also examples of other forms of collaboration. Some schools have developed structured cooperation with habilitation services and LSS services concerning honour-based violence and oppression in order to ensure access to various support measures that can help counteract isolation in honour-related contexts. One school that has developed a systematic approach to combating FGM collaborates with child health centres and maternity services.

Social services' views on cooperation

The survey shows that the internal cooperation within social services — between individual and family care services and LSS or functional support units — is often underdeveloped. Staff report that cooperation frequently depends on individual initiatives.

Cooperation between social workers and LSS caseworkers is sometimes hampered by the absence of a shared overall understanding of the person's needs. There may also be a lack of consensus regarding how work against honour-based violence and oppression should be conducted. In such complex cases, there is a risk that the person's needs will not be met because responsibility between different departments is unclear.

Social workers report that cooperation between Barnahus and child protective services functions well. Social services also carry out outreach work by engaging with recreation centres, schools, and civil society organisations.

Cooperation from a justice system perspective

Actors within the justice system call for working methods for adults with intellectual disabilities similar to those currently used within the Barnahus model, where different professions come together to collaborate around individual cases.

One example highlighted is a specialist reinforcement team providing expertise and support on honour-related issues within Police Region Stockholm. Through this team, case officers assigned to cases suspected of involving honour-based violence and oppression are offered additional support. This approach is regarded as creating greater confidence and significantly improving the quality of case handling. Several interviewees therefore argue that the model should be implemented nationwide.

Conclusions

Honour-based violence and oppression against persons with disabilities is a serious societal problem that creates ill health, insecurity, and barriers to participation. In honour-related contexts, children, young persons, and adults with disabilities experience increased vulnerability, invisibility, and dependence. This can make it difficult for them to understand risks and to defend themselves against violence and control.

A lack of knowledge among persons with disabilities regarding their rights and the ways in which violence may manifest itself can increase their exposure and make it more difficult to seek help. People who face barriers in communication are particularly vulnerable when their surroundings do not provide appropriate support and tailored information.

Families' lack of knowledge about disabilities, as well as feelings of shame associated with disability, further increase exposure. The survey also shows that persons with disabilities who are at risk of honour-based violence and oppression often remain particularly invisible within different parts of the healthcare system.

Great need for improved knowledge

A lack of knowledge and communication opportunities makes it difficult for exposed people to express what they want, what they need, and what they have experienced. Support measures therefore need to include knowledge-raising initiatives, accessible formats, and support enabling persons to express their needs and experiences.

When persons gain a better understanding of violence, their rights, and how to seek help, their ability to stay safe and influence their own life situation is strengthened. This becomes particularly important when a person is living in a context in which their own family is perpetrating violence and oppression.

The survey shows that there is a general need for greater knowledge about honour-based violence and oppression among professionals working with persons with disabilities. This applies across all organisations included in the survey. Basic knowledge about both honour and disability is essential for effective work.

Organisations investigating honour-based violence and oppression need better knowledge about how vulnerability among persons with disabilities may manifest itself. Access to experts in both violence and disability has proven to be an important success factor and could be used more extensively across all organisations.

Organisations working specifically with persons with disabilities need basic knowledge about honour-based violence and oppression. The healthcare sector

requires enhanced competence in identifying warning signs and risk factors, as well as improved approaches to communication and support.

Overall, there is a need for national development initiatives to establish a shared knowledge base that can be disseminated consistently across the country.

A particular knowledge gap identified concerns female genital mutilation (FGM) of girls and women with disabilities. The survey shows that these girls and women are difficult to identify and, in the worst cases, remain invisible in most organisations. One exception is schools, where 10 of 18 schools included in the survey had identified students who had been subjected to FGM. It is important to ensure that the disability perspective becomes an integrated part of national efforts to combat FGM.

Developments for improved preventive measures

All organisations need better approaches and methods for preventing honour-based violence and oppression against persons with disabilities of all ages.

The survey shows that several organisations lack systematic approaches to preventing, detecting, and combating honour-based violence and oppression. This applies, for example, to habilitation services, schools, and social services. Staff report a need to further develop the use of action plans, procedures, and checklists.

There is a need for strengthened information initiatives aimed at families concerning different disabilities in order to counteract ignorance, stigma, and shame.

Staff across all examined organisations require better access to existing support materials. There is also a need to develop new support materials that take into account the exposure of persons with disabilities to honour-based violence and oppression. This includes support in the use of different communication aids, such as visual support materials.

Detecting honour-based violence and oppression

It can be difficult for professionals to determine what constitutes reasonable care and what amounts to undue control of a person with a disability. In honour-related contexts, these distinctions become even more difficult. Professionals require greater basic knowledge and practical experience relating both to disabilities and to honour-based violence in order to identify exposure effectively.

Improved knowledge in both areas increases the likelihood of detecting honour-based violence and oppression. Access to external expertise, guidance, and well-functioning cooperation are key factors.

Organisations that frequently encounter persons with disabilities need to develop routines that make individual conversations possible.

Concrete guidance is needed in connection with investigations involving persons with disabilities who have been subjected to honour-based violence and oppression. Within social services, there are calls for national guidance and an action plan specifically focused on honour-based violence and oppression.

Within the healthcare sector, there is a need for coordinated and easily accessible educational support. This includes support in recognising signs of exposure to honour-based violence and oppression, as well as materials that can be used in dialogue with patients and their families.

Professionals require support in assessing the capacity of young adults with intellectual disabilities to give informed consent, particularly in situations where there is a risk of deception into marriage.

Systematic work to prevent FGM among girls and women, for example within schools for pupils with intellectual disabilities and habilitation services, needs to be further developed. Clearer procedures for detection and intervention in cases of suspected exposure are required.

Improved cooperation to counteract silo working

Cooperation contributes to a holistic understanding of the individual's often complex needs. Social services, healthcare providers, schools and, where necessary, the justice system need to cooperate in order to effectively prevent, detect, and provide support when persons with disabilities are at risk of being subjected to violence.

Cooperation between different organisations needs to improve. For this to function effectively, roles and responsibilities must be clearly defined. Cooperation involving specialist support has been proven to function well.

Everyone needs basic knowledge, but difficult and uncommon cases require specialist expertise. Organisations working specifically with persons with disabilities require support from experts on honour-based oppression. This includes organisations such as schools for pupils with intellectual disabilities and habilitation services. Within the justice system and parts of social services and the healthcare sector, specialist support relating to disability issues is needed instead.

References

National Board of Health and Welfare (2023) *Uppskattning av antalet kvinnor och flickor i Sverige 2021 som kan ha varit utsatta eller riskerar att utsättas för könsstympning* [*Estimate of the number of women and girls in Sweden in 2021 who may have been subjected to or are at risk of being subjected to female genital mutilation*].

Svedin, C.G., Landberg, Å., & Jonsson, L. (2022) *Mer utsatta än andra – Om våld och övergrepp mot barn med funktionsnedsättningar* [*More exposed than others – On violence and abuse against children with disabilities*]. The Children's Welfare Foundation Sweden.

Swedish Agency for Participation (2023) *Våld mot personer med funktionsnedsättning – Om utsatthet och förekomst av våld* [*Violence against persons with disabilities – On exposure and the occurrence of violence*].

Swedish Agency for Participation (2025) *Särskild sårbarhet, särskilt ansvar – Stödmaterial för att motverka våld mot barn och unga med funktionsnedsättning och kartläggning av hedersrelaterat våld och förtryck mot personer med funktionsnedsättning*. [*Particular vulnerability, particular responsibility – Supporting materials to combat violence against children and young persons with disabilities and survey of honour-based violence and oppression against persons with disabilities*].

Swedish Gender Equality Agency (2022) *Bortförda barn och unga* [*Abducted children and young people*]

Swedish Government (2016) *Makt, mål och myndighet – feministisk politik för en jämställd framtid* [*Power, goals, and authority – Feminist politics for an equal future*]. *Skr. 2016/17:10*. Stockholm, Government Offices.

Swedish Government (2020) *Ökat skydd mot hedersrelaterad brottslighet* [*Increased protection against honour-based crime*]. *Bill 2019/20:131*. Stockholm, Ministry of Justice.

Swedish Government (2022) *Ett särskilt brott för hedersförtryck* [*A special criminal offence for honour-based oppression*]. *Bill 2021/22:138*. Stockholm, Ministry of Justice.

Swedish National Council for Crime Prevention (2007) *Våld mot personer med funktionsnedsättning* [*Violence against persons with disabilities*].

Find out more

Several reports that have formed the basis for this short report, as well as the full report[21] of the survey, are available on www.mfd.se.

- Swedish Agency for Participation (2025) *Hedersrelaterat våld och förtryck – Om funktionshinder, oskuldskrav och heteronormativitet* [*Honour-based violence and oppression - Disability, virginity norms and heteronormativity*] https://www.mfd.se/material/publikationer/rapport/hedersrelaterat-vald--om-funktionshinder-oskuldskrav-och-heteronormativitet/
- Swedish Agency for Participation (2025) *När elever med funktionsnedsättning utsätts för hedersrelaterat våld och förtryck – Erfarenheter och arbetssätt inom skolan.* [*When students with disabilities are subjected to honour-based violence and oppression – Experiences and approaches in schools*] https://www.mfd.se/material/publikationer/rapport/nar-elever-utsatts-for-hedersrelaterat-vald/
- Swedish Agency for Participation (2025) *Hedersrelaterat våld och förtryck mot personer med funktionsnedsättning – En studie om rättsväsendets utmaningar och möjligheter* [*Honour-based violence and oppression against persons with disabilities – A study of challenges and opportunities within the justice system*] https://www.mfd.se/material/publikationer/rapport/hedersrelaterat-vald-och-fortryck-mot-personer-med-funktionsnedsattning/
- Swedish Agency for Participation (2025) *Utmanande väg till ett liv fritt från hedersrelaterat våld och förtryck – En intervjustudie om habiliteringens arbete och målgruppens utsatthet* [*A challenging path to a life free from honour-based violence and oppression – An interview study on the work of habilitation services and the vulnerability of the target group*] https://www.mfd.se/material/publikationer/rapport/utmanande-vag-till-ett-liv-fritt-fran-hedersrelaterat-vald-och-fortryck/
- Swedish Agency for Participation (2025) *Vårdverksamheters arbete mot hedersrelaterat våld och förtryck – Intervjustudie med fokus på personer med funktionsnedsättning* [*Healthcare services' work against honour-based violence and oppression – An interview study focusing on persons with disabilities*] https://www.mfd.se/material/publikationer/rapport/vardverksamheters-arbete-mot-hedersrelaterat-vald/

[21] Swedish Agency for Participation (2025) *Särskild sårbarhet, särskilt ansvar* [*Particular vulnerability, particular responsibility*]. https://www.mfd.se/material/publikationer/rapport/sarskild-sarbarhet-sarskilt-ansvar/