จุฬาลงกรณ์มหาวิทยาลัย

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กองทุนรัชดาภิเษกสมโภช

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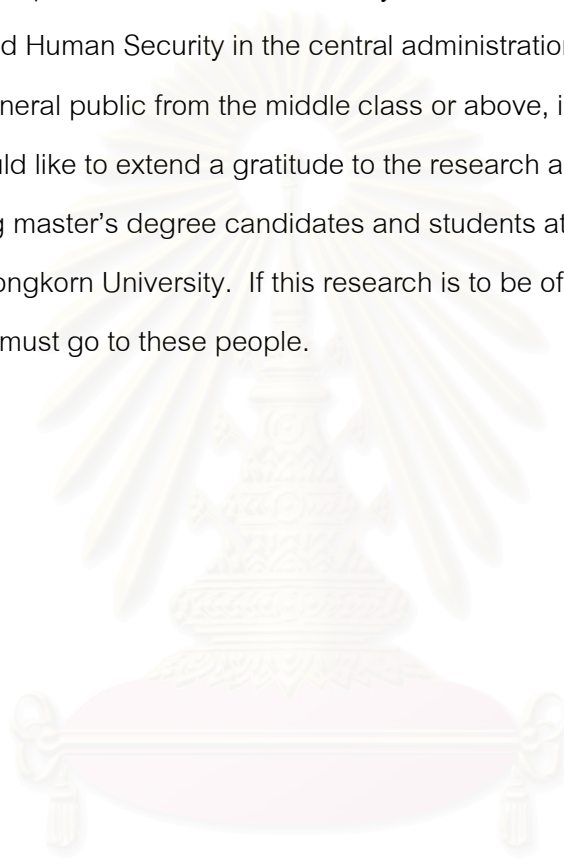
โดย

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บทคัดย่อ

คนพิการดูเหมือนจะประสบกับความยากลำบากในการดำรงชีวิต และเผชิญความด้อย
โอกาส   ลักษณะเช่นนี้น่าจะมาจากการที่คนพิการขาดสิ่งต่าง ๆ ที่เป็นความจำเป็นใน
ชีวิตประจำวัน ซึ่งน่าจะเป็นผลสืบเนื่องจากการที่มีปัญหาในความไม่พอเพียงของสวัสดิการคน
พิการ ตลอดจนการขาดทั้งประสิทธิภาพและประสิทธิผลของนโยบายสวัสดิการคนพิการ
นอกจากนี้แล้ว สังคมยังดูประหนึ่งว่าจะไม่ได้เกื้อกูลคนพิการเท่าใดนัก   ดังนี้แล้ว ภายใน
ประเด็นของความพิการนี้ โครงการวิจัยจึงได้ระบุคนสามกลุ่มที่น่าจะเกี่ยวข้องกับประเด็น คือกลุ่ม
คนพิการ ภาครัฐที่มีภาระหน้าที่ภายในนโยบายสาธารณะด้านสวัสดิการสังคม และประชาชนใน
สาธารณะ ที่อยู่ในสังคมเดียวกัน และใช้ทรัพยากรในสังคมร่วมกับคนพิการ   โครงการวิจัยนี้มี
สมมติฐานว่ากลุ่มคนทั้งสามนี้ มีมุมมองที่แตกต่างกัน หรือระบุประเด็นที่แตกต่างกัน ในเรื่องของ
สิทธิของคนพิการ และความเป็นปัญหาสังคมในประเด็นความพิการ อันเป็นที่มาของการไม่ได้
แก้ไขปัญหาความพิการผ่านนโยบายสาธารณะ

โครงการวิจัยใช้วิธีการสำรวจมุมมองของกลุ่มคนสามกลุ่ม เพื่อเป็นข้อมูลของการวิจัย
โดยที่ใช้วรรณกรรมด้านความพิการ มาช่วยออกแบบแบบสอบถาม เพื่อใช้สำรวจมุมมองดังกล่าว
และในการวิเคราะห์ความเหมือน และ/หรือความแตกต่างของมุมมองนั้น โครงการวิจัยใช้ One-
way analysis of variance และ Tukey post hoc test เป็นหลัก

ผลจากการวิเคราะห์มุมมอง ชี้ให้เห็นว่ากลุ่มคนพิการมีมุมมองในเชิงบวก ต่อสิทธิคน
พิการ ตลอดจนมองว่าความพิการเป็นปัญหาสังคม มากกว่าคนในสังคมโดยรวม และกลุ่ม
ข้าราชการ ที่มีภาระหน้าที่ด้านนโยบายสวัสดิการสังคม ซึ่งเป็นตัวแทนความเป็นภาครัฐ   ความ
แตกต่างในมุมมองที่พบนี้ มีนัยสำคัญในประเด็นและในเชิงนโยบายด้านความพิการ กล่าวคือ
ภายในการประยุกต์ใช้ทฤษฎีนโยบายสาธารณะในเรื่องของการกำหนดและระบุประเด็นปัญหา
นโยบายนั้น มุมมองที่แตกต่างกันในประเด็น หรือมุมมองที่จำแนกกันโดยธรรมชาตินี้ จะทำให้เกิด
การไม่เข้าใจ และไม่เห็นคล้อยตามกันในประเด็นหนึ่ง ๆ และทำให้เกิดการสะดุดของประเด็น
หรือการไม่เคลื่อนไหวของประเด็นไปสู่วาระในเชิงนโยบายของรัฐ   นอกจากนี้ รัฐโดยทั่วไป ทั้งที่

อยู่ในระบอบประชาธิปไตยหรือไม่ก็ตาม มักจะจำเป็นต้องคำนึงถึงความเห็นของสังคมในประเด็นและนโยบายหนึ่ง ๆ และในเมื่อผลของการวิจัยเชิงประจักษ์นี้ ชี้ว่าสังคมโดยรวม ไม่ได้มีมุมมองหรือแนวโน้มที่จะเรียกร้องให้ภาครัฐแก้ไขปัญหาในเรื่องสิทธิคนพิการแต่อย่างได กับทั้งยังมองว่าประเด็นความพิการเป็นปัญหาสังคม ในระดับที่น้อยกว่าในมุมมองของคนพิการ ดังนั้น รัฐจึงไม่ได้มีความจำเป็นในทางการเมือง ที่จะแก้ไขปัญหาในทันที และจึงเป็นที่มาของปัญหาด้านความพิการที่คงอยู่ นั่นคือความยากลำบากในการดำรงชีวิตและด้อยโอกาสของคนพิการ ที่ไม่ได้รับการแก้ไขอย่างเป็นรูปธรรม

โครงการวิจัยมีข้อเสนอแนะ ให้คนพิการมีบทบาทที่มากกว่าเป็นเพียงกลุ่มเป้าหมายของนโยบายด้านความพิการ โดยพยายามสร้างบรรยากาศทางการเมือง และบรรยากาศเชิงนโยบายที่เป็นบวกต่อประเด็นความพิการ โดยคนพิการควรดำเนินกิจกรรมเป็นกลุ่ม คือกลุ่มคนพิการ ซึ่งสามารถจะเรียกร้องรัฐให้แก้ไขปัญหาที่มีอยู่ และอาจนำเสนอเนื้อหา สาระของนโยบายที่ต้องการไปพร้อมกับการเรียกร้อง และยังอาจร่วมมือกับภาครัฐในการดำเนินนโยบายด้านสวัสดิการคนพิการ ซึ่งก็คือการที่กลุ่มคนพิการ ร่วมกับภาครัฐปฏิบัตินโยบายสวัสดิการคนพิการ หรือกลุ่มคนพิการอาจจะพยายามขยายประเด็นความพิการ ออกสู่ความสนใจของสาธารณะ นั่นคือการทำให้ประเด็นดูเป็นปัญหาสังคมในระดับที่สูงขึ้น นอกจากนี้ กลุ่มคนพิการยังอาจจะมองหาผู้ประกอบการนโยบาย ที่มีคุณลักษณะและคุณสมบัติที่สามารถช่วยผลักดันประเด็นความพิการเข้าสู่วาระการพิจารณาของรัฐ

Project Title: Perceptions on Disability Rights and Disability as a Social Problem.

Name of the investigator: Pisanu Sangimapongsa (Assistant Professor).

Year: May, 2008.

Abstract

People with disabilities seem to experience hardship in life and other disadvantages. Such difficulty seems to be related to the fact that disabled people tend to lack many essential elements in life, which could stem from inadequate, inefficient, and ineffective welfare. Also related is the general public that tends to exhibit little or no concern about the disability issue. As such, three groups of people are identified to be associated with the disability issue – people with disabilities, the State offering the disability welfare, and the general public sharing social resources with disabled people. This study applies the public policy theory on issue definition and hypothesizes that the three groups perceive the disability issue differently regarding disability rights and disability as a social problem. This, in turn, leads to the lingering disability problems – the hardship and disadvantages among those with disabilities – without any correction.

In terms of the research procedure, survey research method is used to reflect the perception of the three groups. The disability literature helps construct a survey instrument that examines the perception of these people. One-way analysis of variance and Tukey post hoc test are pursued to study the extent of difference in perception.

The empirical findings indicate the different perceptions, in that people with disabilities exhibit more positive view on disability rights and perceive the disability issue more as a social problem than the general public and public officials representing the State. Such difference has an implication on the disability issue and policy. Within the public policy theory on issue definition, the variation in perception or a divided perception stymies the public understanding of the issue and prevents the disability issue from entering the State agenda. Also, the State usually pays attention to the public, whereby, in this case, the non-disabled public has a less positive view on

disability rights and disability as a social problem than disabled people. Consequently, the State does not take any immediate action on the disability issue, therefore, maintaining the status quo.

The study gives some suggestions that people with disabilities, the target of the disability policy, must be more active in engendering a favorable political and policy environment for the disability issue. Strong disability groups should be formed and press demand on the State to change the status quo. They could attach some viable policy solutions to the demand, while also cooperating with the bureaucracy in the implementation of the disability policy. The disability groups can also expand the disability issue to catch attention of the public, making the issue more of a social problem. Or the groups can find policy entrepreneurs with capability of pushing the issue into the State agenda.

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Introduction

Disability represents both social and physical phenomenon making those experiencing some kinds of disability naturally differ from non-disabled people. In one definition, disability means an individual who lacks the ability to pursue social activities and maintain some aspects of livelihood. These conditions are the result of certain physical, psychological, mental, and intellectual limitations, which usually lead, in turn, to various forms of discrimination, prejudice, and poverty. The World Health Organization also refers to disability as a disadvantage in life as a result of some defections, leading ultimately to an inability to function in accordance with one's age, gender, as well as the culture, social status, and environment to which one belongs (Kanhawattana, 2003: 9 & 14). Disability is usually classified into five types, comprising mobility, vision, hearing, mental and behavior, as well as intellectual and learning (Yaemyue, 2005: 10). In any case, the physical, mental, and intellectual limitations, which usually lead to a discrimination against those disabled people, all culminate in their disadvantaged condition, in comparison with those without disabilities. In most modern societies including Thailand, this usually necessitates certain kinds and degrees of compensation, usually in the form of social welfare, gearing toward individuals with disabilities.

The disadvantages experienced by people with disabilities also stem from the societal belief that they usually comprise a minority group. Such categorization of a minority status, by all means, depends on various ways in determining disability, since certain degrees of disability, in some people's view, might not at all be considered a disability. Thus, disability incidence does vary somewhat by sources of information and statistics.   In 2001, for instance, the National Statistical Office indicates that 1.8 percent of the Thai population was disabled, while Thailand Institute of Health Research and the World Health Organization reported 8.1 percent and 5 percent, respectively (Kanhawattana, 2003: 2). Among the populations of disabled people, children, and the elderly, who are all in need of social welfare, the numbers of children and the elderly far

exceed those with disabilities in the Thai society. According to the National Statistical Office, the numbers of children between 0-14 years old, the elderly over 65 years old, and people with disabilities are, respectively, 14.6, 3.2, and 1.8 million. Therefore, the disabled people relatively become a minority, confronting disadvantages in life.

With such disadvantages, the Thai society, similar to other modern ones, has tried to ameliorate the life quality and health conditions among people with disabilities. There are, for instance, Disability Rehabilitation Act of 1991 as well as related rules and regulations – the Regulation of the Disability Rehabilitation Committee in Disability Registration of 1994, the Regulation of the Department of Social Welfare in Monthly Disability Payment of 1996, and the Regulation of the Disability Rehabilitation Committee in Setting the Standards of Assistive Technologies and Devices for People with Disabilities of 2001. The Thai Constitution of 1997 and the first draft of Thai Constitution of 2007, in the section on rights and freedom of the Thai citizens, state that people with disabilities have the right to receive social welfare and assistive technologies, along with other assistance from the State. There have also been the Promotion and Development of People with Disabilities Bill and People with Disabilities Bill, all under consideration. All these efforts in disability policies are due to the close relation between disability and disadvantages of various forms, such as discrimination and poverty, some of which are even in the definition of disability, as described above. Despite these efforts, the Thai society still witnesses life condition of disadvantages among disabled people. Such conditions are expressed by Thongtien and a few others who are people with disabilities themselves in Hongladarom (1998,1999, 2000, & 2002). Following are some translated citations of their reflection.

"We are people with disabilities, facing a lot of disadvantages in life. I [Hongladarom] always feel being discriminated against, as if we are second-classed citizens. Even public officials such as the police look down on us, instead of paying attention to and caring for us. That is because we are the vulnerable, disadvantaged minority" (2000: 55).

"We [people with disabilities] have to help ourselves, since we cannot expect help from others. Even my [Hongladarom's] close relatives seem uninterested and show no concern about the disability issue, while listening to stories regarding the plight of people with disabilities. And that is because they are non-disabled. Just wait till they are; and they will know what it is like to be disabled" (2000: 57).

"From time to time, there are demands for disability policies that should ameliorate life condition among those with disabilities. But in reality, policies are simply intention expressed in written words, without any real execution or action" (2002: 17).

"We found that social workers come into contact with individuals with disabilities for only one time, without further contact, hence, suggesting interruption of services. Some people with disabilities received disability compensation of 2,000 baht upon turning disabled, without further assistance of any forms, such as counseling and job/vocational training. After people have received medical treatment but face some disability conditions, they are sent home immediately with no other assistance, such as counseling. With some empathy, the Department of Social welfare [now Ministry of Social Development and Human Security] could have some sorts of follow-up services, such as home-visits to see subsequent needs of disabled people and their families along with some kinds of response to these needs" (2002: 84).

"There should be laws requiring all public hospitals, Department of Social welfare, as well as foundations to have a well-defined and properly planned system of welfare, gearing toward people with disabilities, as opposed to relying solely on charity work. The difference between a well-defined system of welfare required by law and charity work is that the latter's services are purely optional, depending on good conscience, which might or might not actually exist. Depending on charity work and conscience, this country will continue witnessing the plight of people with disabilities" (1999: 37).

"The State must take responsibility in caring for people with disabilities. We nowadays lack sufficient budget for the disabled and elderly, minimizing the ability of the Department of Social Welfare in responding to the poverty confronting them. For me [Thongtien], I am quite lucky to have caring relatives. But for others with disabilities, they are like abandoned dogs on the Thai streets" (2000: 12-13).

"The hotline of the Department of Social Welfare? Calls are usually not answered. And many of the answered ones only offer hopelessness. A common response is, 'Please hang on and be patient. We will contact you later on.' Such hotline, I [Hongladarom] believe, is set up primarily for the over-time money for public officials" (2000: 46).

"More times than I [Hongladarom] can count, Thai banks refused to offer me the services that are usually given in normal circumstances. Starting from the very basics, I simply cannot climb the staircases of some banks. Even if I could get into the banks, I cannot receive certain services, simply because I cannot fill and sign certain forms. I cannot help but thinking that with a seven-digit number in my bank account, climbing the stairs to the bank would never have been a problem for me" (1998: 117-118).

"In New Zealand, people with disabilities have to pay for only half the fare of taxis, as the State picks up the other half. There is also a service called Meals on Wheels offering hot food to the disabled and elderly, who have difficulty leaving their home but like to have hot meals. The State has also tried to apply the philosophy of independent living among disabled people. Instead of staying in disability institutions, disabled people could choose to stay at State-provided homes. The State also supplies monthly stipends and provides personal assistants" (1998: 128-132).

Aside from Hongladarom (1998, 1999, 2000, & 2002), there is also a reported story on a Thai well-to-do family, having a daughter with Down syndrome. Dr. Chaiyan Ratchagoon, the father, voices his opinion that the Thai society has little regard to

people with disabilities. "The Government and the Ministry of Social Development and Human Security have done little, with respect to the disability issue. Only the Ministry of Education has rather progressive policy on equal education for all, including children with disabilities. My family is simply an exception, as we have sufficient means to care for our daughter. But for others that lack such means, they would need some kinds of assistance from the State" (With Love.. Dr. Chaiyan Ratchagoon, 2004, Translated, Feb 3: 26).

From the disability problems illustrated above, some observation may be made, leading to the general framework, objectives, and hypotheses for this research. First, Thai people with disabilities seem to lack many essential elements in life, which seems to suggest that the State's social welfare policies are not sufficiently equipped to fulfill the needs of disabled people. Such public policies are both necessary and common in modern states, as they lead to greater social justice. In modern states, one type of public purpose, among many others, is support persons who are unable to care for themselves, such as pensions for retired and disabled people (Johnson, 2004: 5). Second, such non-fulfillment of public purpose seems to stem from the lack of efficiency and effectiveness in the functioning of social welfare policy, which is mainly in the purview of the Ministry of Social Development and Human Security. Third, non-disabled people view the disability issue as of no concern to them; but the issue is solely faced by the disabled. It is also observed that there are, in general, three parties involved with the issue. One would be people with disabilities, who are in need of disability welfare or the target group of the disability policy. The second party is the State, who is responsible for the fulfillment of the public purpose of greater justice for the society, while fulfilling the need of disabled people. Third, people without disabilities are also involved, perhaps not directly, as both disabled and non-disabled people live in the same society and share the society's resources with each other.

In the disability issue, the three groups of people identified above seem to have different views with respect to the issue. For example, those with disabilities feel the lack of life essentialities to which they, as people with disabilities, should be entitled. On

the other hand, the general public without disabilities seems to have little regard to or is unaware of the disadvantages confronted by those with disabilities. At the same time, officials responsible for social welfare policy in the Ministry of Social Development and Human Security or the State deliver social services that do not seem to meet the needs of people with disabilities. Henceforth, following are the objectives of the present study.

1. Examining the perception of people with disabilities on the disability issue, since they represent the target group of disability policy.

2. Examining the perception of officials offering social welfare services to the minority, disadvantaged groups of people, especially disabled people on the disability issue, since they are directly involved with disability policies.

3. Examining the perception of the general public without disabilities on the disability issue, since they live in the same society and share social resources with disabled people.

With the above objectives for this research, it is presupposed that the three groups of people of interest view the disability issue differently. This, in turn, results in the disadvantaged condition experienced by those with disabilities, as mentioned above. In public policy terms, problem identification constitute an important element that determines the likelihood or plausibility that an issue will become of societal interest, that is, a policy issue within the government attention. "Conditions … do not become problems unless they are defined as such, articulated, and then brought to the attention of government … [A] policy problem can be defined as a condition or situation that produces needs or dissatisfaction among people and for which relief or redress by governmental action is sought" (Anderson, 2003: 81). In other words, "General problems exist within the purview of government, yet only a select few can be afforded serious consideration at any one time" (Blankenau, 2001: 38). Kingdon (2003: 90-91) refers to the problem that rouses the attention of the public and government as the problem stream. Therefore, with the disability issue, it is probable that the three groups, with different perceptions on the issue, will define it differently. Unlike people with

disabilities, the general public, being unaware of the disability condition and life situation, might not necessarily perceive the disability as an important social issue. It is perhaps easy for such issue to slip the attention of government, resulting in the persistence of non-progressive, mediocre disability policy.

A large part of the disability issue usually involves the rights of those with disabilities. The disability rights perspective comprises the sociological definition or minority rights within the definition of the disability issue (Jeon & Haider-Markel, 2001: 216). Defining the issue in terms of rights suggests that those with disabilities are entitled to certain rights, such as the right to work and the right to health care services, which could ameliorate their life condition. The three groups of interest could have disparate views of disability rights, as one could reasonably expect.

One other important aspect of differing viewpoints comprises the disability issue as a social problem. Again in public policy terminology, a public policy is generated in response to social problems. Not all problems are considered social problems, in that some problems could be viewed as personal in nature. In addition, not all social problems are of equal importance (Chambers & Wedel, 2005: 7). Some people might view certain problems as important, henceforth, requiring some public policies in responding to those, not other less-important ones.

With respect to the above discussion on disability rights, disability as a social problem, along with possibly disparate perceptions on problem identification, following are hypotheses of this research.

1. The three groups of people of interest – those with disabilities, officials responsible for delivering social welfare, and the non-disabled public possess different perceptions on disability rights, leading to the disadvantages faced by those with disabilities. In particular, disabled people have the most positive view regarding disability welfare as disability rights, while the other two groups have a less positive view.

2. The three groups also have dissimilar perceptions on disability as a social problem. While people with disabilities view disability as a social problem, the other two groups perceive it as a social problem in a lesser degree.

Along with rights and social problems theories, the "underdog" principle also helps construct the two hypotheses above (Hurst, 1992: 287). According to this principle, for example, as groups, African Americans in the United States and Women would call for public policies that guarantee equality in job situations, such as equal pays. By the same token, with the minority and disadvantaged situation of those with disabilities, they should welcome public policies that uphold their rights and view disability as a social problem, calling for public policies in response to it. On the other hand, since people in the general public are not directly affected by disability policies and comprise the better-off majority, they would be less receptive to the views of disability rights and disability as a social problem.

Within the objectives and hypotheses of this research, and when considering public policy theories, this study believes that it is appropriate to compare the views of disabled people on disability rights and disability as a social problem with those of the general public and officials responsible for social welfare. Although in democracies, public policies are formulated and implemented by elected officials and bureaucracies, they are usually attentive to the conscious concerns of the general public. Being responsive to public opinion generally bring electoral benefit to elected officials. They, for the same reason, would ensure that bureaucracies do not deliver public policies contradicting public opinion (Van Horn, Baumer, & Gormley, 2001: 231). Also in public policy implementation theory, public officials are usually given a certain amount of discretion in fulfilling their jobs in delivering policy outcomes (Gerston, 2002, 120; Ham & Hill, 1993: 152). The extent of social welfare services given by public officials to people with disabilities, in some degrees, depends on the formers' perception on disability rights and disability as a social problem. Henceforth, perceptions on the

disability issue are compared among the three groups of people, as discussed above.
Figure 1 represents the general framework for the present study.

<u>Figure 1</u>. The research framework.
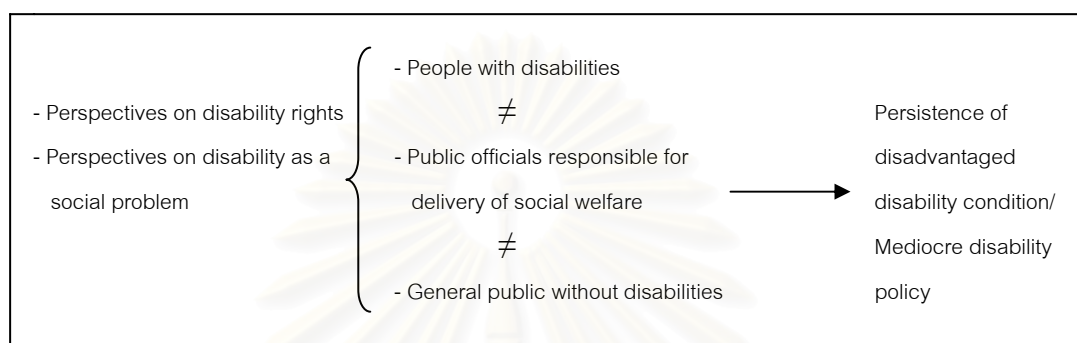
It is the intention of this research to reveal empirically the differing perspectives
among the three groups of people of interest. It is supposed that such difference is
responsible for the disparity between the expectation of people with disabilities and the
actual welfare services being offered, leading, in turn, to their perceived disadvantaged
conditions.

Survey of related literature

The literature review has helped provide general observation on the disability issue as well as contribute to the construction of research objectives and hypotheses in the above discussion. It has also provided the framework for the study -- the supply of important political and public policy theories on rights and the social problems. Therefore, following is a discussion on general literature as well as previous research on the disability issue. Then, there is a discussion on theories of rights and social problems, along with some other related concepts and theories, which should strengthen the understanding of disability rights and disability as a social problem.

General literature and previous research on the disability issue

The survey of literature and research in the disability issue comprises the following. Paewking and Ornopas (2003) studied life condition, work situation, frustration, as well as expectation and future plan among people with vision impairment. Kwanyuen and Chancharoenlap (2003) did research on the life of blind people who are also beggars. Wimonkanchana (1998) examined the effect of job training which is a provision in the Disability Rehabilitation Act of 1991 by focusing on three specific groups of people with disabilities – people who were going through vocational training, those who had received the training and were looking for jobs, and those who were already working. Klincharoen (1995) studied the job situation of social workers in delivering welfare to homeless people. Kanhawattana (2003) researched on problems facing people with disabilities and their needs in relation to social welfare serviced by the State. Pitakmahaket (1994) examined patterns and problems in entering the job market among disabled people, as well as forms of assistance given by job training centers for people with disabilities. Thongjerm (1997) studied self-perception and the world view among blind children attending the Bangkok School for the Blind. Tapawpong (1994) examined employers' attitude toward hiring people with disabilities and toward Disability Rehabilitation Act of 1991, which affects job opportunities for those with disabilities. National Statistical Office (2004) published general statistics on people with disabilities.

Hongladarom (1998, 1999, 2000, & 2002), via the perception of disabled people themselves, describes their perception on life condition and problems facing them, which should widen the perspective of the public on disabled people and the disability issue. In addition, some newspaper stories on people with disabilities, albeit rare, help reflect the current situation on disability in the Thai society as well as the life of disabled people and their families.

The research objectives and hypotheses have been derived from the review of literature on the disability issue and research, as explained above. Primarily, in the perception of people with disabilities, they seem to lack many essential elements in life, causing their disadvantaged condition. On the other hand, the current disability policies and their implementation do not seem to be responsive to the need of disabled people as the policy target groups, probably causing the felt lack of life essentialities among those with disabilities. Thirdly, there seems to be a divide between non-disabled and disabled people, although they live in the same society, share social resources, and experience the same public policies. Therefore, three groups of people become of interest in this research – people experiencing disabilities, officials in the state agency directly involved with social welfare policy, and the general public, who, from time to time, come into contact with fellow citizens with disabilities.

Most of the previous studies, as summarized above, use qualitative research methodology, therefore, discussing in detail the felt lack of essentialities in the life of those with disabilities. For instance, most people with disabilities cannot live independently due to many obstacles facing them. Most of the obstacles comprise the social environment that is not amenable to the general routines of disabled people. The most difficulty seems to be transportation and commuting, which, if corrected and made more accessible to them, would give them a sense of independence. But in actuality, most people with disabilities are unable to use public transportation. In order to commute, most have to turn to taxies, which are expensive. This adds more to the cost of living among people with disabilities, who already have extraordinary expenses such as health care and rehabilitation (Kwanchuen & Mongkolswasdi, 2003: 18). Paewking

and Ornopas (2003: 14) found that people with vision impairment have an additional expense in hiring a "navigator," who directs or takes them to work, which is usually singing as it seems to be most amenable to them. Pitakmahaket (1994: 45) did a comparative study on problems facing people with disabilities by arranging them from most to least severe – economic, psychological, physical, and friendship. The economic problem or financial matter is significantly more serious than other problems, as these latter ones are rather of the same level of severity. Paewking and Ornopas (2003: 25) found that the families of people with vision impairment are mostly unequipped to care for them.

 Hongladarom (1998, 1999, 2000, & 2002) also refers very often to the lack of essentialities in life of people with disabilities, such as the following.
"My friend, Surisa, must depend on friends and family. The Thai people with disabilities suffer from the lack of money. The condition is particularly severe in case of those who have no family" (2002: 150-151, Translated).

"The law states clearly that there must be no discrimination against people with disabilities. Or put differently, those with disabilities must have access to everything to which non-disabled people are entitled. But 95 percent of the law is simply words and statements. In reality, people with disabilities still receive discriminatory treatment from the State. I [Hongladarom] must still use taxies for commuting and generally pay a higher fare than do non-disabled people, since I most taxi drivers must lift me on to and off the vehicles" (2000: 95-96, Translated).

 At times, there are newspaper stories and reports on disability in the Thai society. There is one story about the life of a middle-aged Canadian by nationality, who came to work and has had many respectable and rewarding positions in Thailand. He has lived in Thailand for so long that he currently has few connections back home in Canada. In other words, Thailand has become more of his home than Canada. The reporter, who interviewed him in order to present his life story, asked him if he would

eventually return to Canada. He said that he was not at all certain, since Thailand is like his home now. However, there is one aspect that gives him some concern. For him, the one thing that Thailand lacks is a social welfare system, such as disability and elderly welfare. He believes that he will need it, when he becomes older and have mobility problem. He mentioned the social welfare that his 83 year old mother received in Canada upon going through a hip surgery. After returning home and during recovery and rehabilitation, there are various services all paid by the welfare system, such as 24 hour, home-nursing care; home inspection for safety reason; and some adjustments in the home, so that she lives comfortably (Sanguanseriwanich, 2007, Feb 18: p. 18). There is another reported story of a 29 year old lady who has been paralyzed for sixteen years after a sports injury. Her parents had to sell all the assets, including their home for her medical treatment and care. Unfortunately, while the money has been depleted, her condition does not improve much. Now, her only hope would be some donation. Her bank account number is announced in the story for such donation (Please Help, 2006, Nov 17: p. 9).

The lack of essentialities in life among people with disabilities, in some ways, should relate to the disability policy that is not responsive to their needs. The current services seem to be inadequate, inefficient, and ineffective. Kwanyuen and Chancharoenlap, 2003: 33) reveal difficulty among people with disabilities in commuting to receive health care and monthly stipend for individuals with disabilities. The amount of stipend is less than the cost of commuting to get it, since most people with disabilities cannot use public transportation. Klincharoen (1995: 56) found that the existing social welfare services are reactive, instead of pro-active. There is no reaching out to those in need. She also found the lack of coordination among people delivering services as well as the lack of planning. In addition, there seems to be insufficient number of welfare service providers, in comparison with the much larger number of people in need of services, hence, suggesting the inadequate resources geared toward social welfare services. Managers in welfare agencies also report that some social workers have been in the agencies for a long time but have no interest in self-development and do not pay

attention to the progress in social welfare technologies and techniques. Worse than that, 62.5 percent of managers and supervisors in social welfare agencies believe that a large number of social workers have negative attitude toward people with disabilities (p. 61). Certain services are in the form of control via detention, which causes the sense of loss in freedom among disabled people. This results in the desire to break away from social welfare facilities. This latter finding is similar to that of Paewking and Ornopas (2003: 22) that reports the fear among blind people of being caught and detained by officials in the Department of Social Welfare (currently the Ministry of Social Development and Human Security) while trying to earn a living by singing on the streets. They have heard about people being caught and put away, as well as rumors that those who were detained were also tortured.

There are more findings of previous research that suggest the inadequacy, inefficiency, and ineffectiveness in disability welfare services. Wimonkanchana (1998: 62) found non-continuation / interruption of social welfare services as well as the lack of well-coordinated services among various welfare agencies. For instance, there is neither evaluation nor follow-up services in order to inspect life condition of those after disability registration. The provincial offices of the Ministry of Social Development and Human Security have all the disability registration records. However, they usually do not reach out to those on such records, such as people registered as employees with disabilities, to oversee work conditions facing them. At times, there could be changes in job assignments; and certain positions are not appropriate for certain types of disability, hence, suggesting the need for routine inspection. With no reaching-out services, some disabled people might be fearful of contacting state agencies. Kanhawattana (2003: 75) criticizes disability policies and services for having limitation for not catching up with current technologies and development in the disability issue, as well as lacking dedication to policy initiation, budgeting, and servicing. This is partially due to the State's general perception that people with disabilities are a very small minority group, therefore, unworthy of gearing the public fund to service them, such as altering the environment to suit them. But in fact, directing the public fund to accommodate people

with disabilities could at the same time benefit other groups of similar conditions, such as the elderly and pregnant women (p. 74). National Statistical Office (2004: Figure 2) reveals that 52.5 percent of those with disabilities receive disability welfare, whereas 47.5 percent do not. These percentages suggest the non-comprehensiveness and inadequacy of disability welfare.

Hongladarom (1998, 1999, 2000, & 2002) also suggests the inadequacy, inefficiency, and ineffectiveness of the disability welfare, such as the following reflections.

"The State picks and chooses to care for only easy matters, while rejecting the difficult ones. For instance, State's rehabilitation facilities refuse offering services to people with a high degree of disabilities. Some welcome and accept only those who can help themselves to the bathroom. Thus, it could be said that the State always avoids solving difficult problems in the disability issue, especially responding to the need of people with high degree of disabilities, while leaving such burden on families and relatives" (2002: 86, Translated).

"Many facilities run by the Department of Social Welfare like the one in Prapadaeng seem to be unhygienic. The elderly with disabilities are left alone by themselves, not receiving proper rehabilitation. The clothes that they wear seem to be dirty. There are trails of leftover food on the floor and furniture, which could cause health problems among residents in the facility" (2000: 94, Translated).

"In releasing patients with disabilities from hospitals, there should be a coordination of efforts and services among doctors, nurses, physical therapists, and social workers to discuss future plans for the patients and their families, such as courses of rehabilitation, possible problems that could emerge in the future. These people with disabilities should not be totally on their own after the release" (1998: 32-33, Translated).

With respect to the general public and its perception on the disability issue and people with disabilities, the literature reveals a sense of apathy. This could be due to the fact that the non-disabled people view the issue as unrelated to them and society. Wimonkanchana (1998: 58) found that, in using public transportation, people with disabilities of most types usually have to spend a long time getting on and off vehicles. This by all means wastes the time of drivers and other passengers. As a result, some buses would not stop when some individuals with disabilities are waiting to get on, making the access to public transportation among disabled people almost impossible. They, therefore, feel that they receive no support from society.

Previous research found problems confronting disabled people in attempting to find jobs. Pitakmahaket (1994: 43) found that some people with disabilities are fired for the reason that they negatively affect companies' image. Seventy percent of people with disabilities believe that there are problems in trying to get a job, whereas thirty percent thinks that there is no problem. Thongjerm (1997: 82) found that blind children who have stayed in the Bangkok School for the Blind are afraid to get out and look for jobs. They fear that they will not be well accepted and included into society. Some of those children think that many people do discriminate against people with disabilities. Tapawpong (1994: 135-138) found that employers of the present days have positive attitude toward provisions in Disability Rehabilitation Act of 2534 which could imply more job opportunities for those with disabilities. However, a more detailed examination seems to suggest that the public's understanding of the situation confronting disabled people and acceptance of their competency are different matters. Employers' decisions to hire people with disabilities could have economic consequences. Thus, in reality, most employers still would prefer not to hire disabled people, solely for economic reason. The survey in Thongjerm's study reveals that 77 percent of workplaces have no intention to hire people with disabilities. And among companies that are willing to hire them will hire only those with equal competency to people without disabilities. Most workplaces view that people with disabilities do experience much difficulty at work. In practice, therefore, businesses' interests are always put ahead of social ideology in

accepting people with disabilities as members of society. Wimonkanchana (1998: 83) also found that most employers would behave in a socially responsible manner only if such practice would not interfere with their businesses' interest. In addition, disabled employees usually receive less promotion than non-disabled counterparts.

Hongladarom (2000: 87-88, Translated) illustrates that, "A hairdresser addresses loudly that she does not want to do my [Hongladarom's] hair, since my wheelchair causes inconvenience in her shop. Another says that the wheels of my wheelchair make her shop dirty. Therefore, the fee for the hairdo from me seems to be unworthy of such inconvenience."

With the above review of literature, the present research, therefore, intends to study the perception on the disability issue among three groups of people. While people with disabilities and officials in social welfare agencies are related directly to the disability issue, people in the general public are related indirectly to the issue. But their perceptions are all believed to affect both the disability issue and life conditions experienced by disabled people. Following is the turn to review theories of rights and social problems, as it is believed that the three groups' perceptions on disability rights and disability as a social problem depart from one another.

Theories on rights

Theories on rights are closely connected to the disability issue and people with disabilities. Article 53 in the draft of 2007 Thai Constitution states that people with disabilities have the rights to social welfare and other kinds of assistance from the State. In theory, there are various classifications of rights of citizenship. Civil rights, which are the first kind of rights originated in the 18th century in nation states, ensure equal treatment and protection under the law among individuals. Political rights, generated later in the 19th century, allow political participation of citizens. These rights to political participation include voting in both general and local elections, holding public offices, as well as participation by other means, such as voicing concern on public matters, pressing demand on new laws, and participation in public hearings. Developed latest in

the 20th century, social rights are most progressive, as these constitute a more concrete

form of rights. As citizens of a state, they are given rights of entitlement to the nation's

resources, mostly in the form of public services and social welfare (Manning, 2003: 46;

Heywood, 2004: 210 & 298). This latter form of rights is particularly related to disability

rights, as people with disabilities are given access to the State's resources and welfare.

It is hypothesized in the research that, according to the "underdog" principle (Hurst,

1992: 287), disabled people have the most positive view on social rights.

Social rights are also closely related to the idea of social citizenship. Citizenship

is ultimately a social status. As citizens, they have to enjoy the freedom from poverty,

ignorance, and despair, if they were to participate fully in the affairs of their community,

an idea embodied in the concept of social rights (Heywood, 2004: 210). Since people

with disabilities have a citizenship status, they are entitled to social resources and,

therefore, to be free from poverty and despair. It is, then, hypothesized that they, as a

social group, would have a positive view on the idea of social citizenship. On the

opposite side of social citizenship, there is the idea of active citizenship. Instead of

emphasizing the concept of rights, The concept of active citizenship calls for citizens'

duties and responsibilities. A good citizen should be hardworking and self-reliant, rather

than depending on the rights of entitlements given by the State. More than being self-

reliant, a citizen should also be ready and willing to help others. The idea of active

citizenship developed out of the Right model of citizenship, which commits to

individualism, freedom, and free competition, hence, calling for a minimal role of State

(Manning, 2003: 66; Heywood, 2004: 211). This is opposite to the State's role in the idea

of social citizenship, which delivers rights and entitlements to its citizens. Therefore,

people with disabilities should have a negative view on the idea of active citizenship.

Disability rights also relates to the concept of equity. That is because the idea of

equity is also attentive to appropriate entitlements. Under equity terms, it is suitable for

those with disabilities to have the rights of entitlement to certain resources, to which non-

disabled people should not have. People with disabilities are entitled to social rights

that apply to them as one specific category of people (Heywood, 2004: 213). Stone

(2002: 43-47) discusses various ways of equitable social resource distribution. Directing social resources to people with disabilities would be considered group-based resource distribution. Its purpose is equality as the end result of such distribution, in that due to the disadvantaged life condition among people with disabilities, their entitlement to more social resources is for the purpose of minimizing such condition. Equitable resource distribution is believed to arrive at equal opportunities. Affirmative action is a public policy in the United States, which gives special treatment, such as an early start in schooling to African American children in order to compensate for their disadvantaged position. Examples of special treatment to people with disabilities might include monthly stipend as well as rehabilitation service funded by the State.

Special treatment and group-based distribution of resources are related to the concepts of needs and wants. Whereas wants are a personal state of desire, needs represent necessities. Certain needs, however, are subject to debate, since there are disagreements on what constitute necessities (Blakemore, 2003: 29-30). But for people with disabilities, it is a general belief that they have higher needs than those without disabilities, supposedly due to their health and physical condition, which translate into generally higher expenses, such as greater transportation costs, as described earlier. Therefore, their higher needs entitle them to more resources. The idea of resource distribution according to needs is proposed by socialist thinkers. Such distribution is considered just and, therefore, appropriate, according to the socialist theory of justice. Along the same line of argument, Rawl's idea of justice praises caring for the most disadvantaged in society, which constitutes a fair distribution of resources. Concepts of resource distribution, needs, justice, and social welfare are intertwined, since resources are usually distributed based on needs, mostly in the form of welfare. And this is considered just (Heywood, 2004: 295-297). However, in order to achieve this form of justice, resources must be taken from some people and given, through a system of distribution of some kind, to some other people. In the disability welfare, such distribution usually goes from non-disabled to disabled people. Therefore, it is

hypothesized in this research that the latter would have a more positive view on resource distribution based on needs than would the former.

The concept of social rights which entitle individuals to social resources could be considered a radical idea, since they are more concrete than other kinds of rights. In countries with mediocre disability welfare, in order to call for a more adequate, efficient, and effective disability welfare, one could apply this radical idea of social rights. Applying the idea of social rights to press a demand for disability welfare is similar to the use of the feminist perspective, which is also a radical thought, to call for women's rights, as reflected in various public policies. Yishai (1993) and Nossiff (1998) both state that only the feminist thought will help achieve comprehensive and concrete women's rights policies, such as pro-choice policy, whereas religious or libertarian perspectives will not.

The radical idea of social rights could lead to the decommodification of labor, as a form of radical disability policy. This kind of policy could release the burden and necessity of selling labor among disabled people. Twine (1994: 19) states that social rights may protect labor power from being treated as an object to be bought and sold in the market. "The commodification of social relationships through the need to buy and sell labor threatens our essential human qualities. … When people are unemployed (or sick or retired), … the tension between treating them as commodities or as human beings takes its starkest form, for without the ability to sell their labor power, their means of life is threatened. Welfare states are concerned to provide some means of life that is not dependent upon a person selling his or her labor power as a commodity." Especially for people with a high degree of disability, it might be neither fair nor possible to expect them to sell their labor in the same way that people without disabilities do.

Similar to the concept of decommodification of labor, Taylor (2004) believes that people with disabilities should be entitled to the right not to work. In a sense, they should not feel ashamed or guilty for not working. Taylor (2004) believes that those with disabilities could choose to work for the reason that they like to, but not for the reason that they have to or that they have to earn a living. There is, in fact, a physical difference

between people with and without disabilities; therefore, it is not fair to determine the value of the former on the same basis as that of the latter. In other words, it is inappropriate to use the criteria of ability to work and quality of work output, which are usually the criteria for the judgment of economic worth among non-disabled people, to determine the life value of disabled people. In the perception of people without disabilities, disabled people are always different from them (p. 42). It is, therefore, only fair that these two groups of people would be entitled to different sets of rights. It is hypothesized that people with disabilities will have a positive view on their right not to work.

There are other related but less radical public policies than the provision of the right not to work. For instance, there are job training services and facilities for those with disabilities. There could also be a provision in the law that prevents job discrimination against disabled people. Another policy could require certain types of business or businesses of certain size to hire a certain number of people with disabilities. Another provision could oblige workplaces to alter some work settings and environment in order to better accommodate people with disabilities. Or some incentives such as tax exemption or deduction could be offered to companies that hire a certain number of disabled people. All these provisions ensure the right to work by trying to integrate people with disabilities in work settings (Heywood, 2004: 211). But such policy, although could benefit disabled people, differs from the policy offering the right not to work, as discussed above.

Some other concepts that are related to disability rights are multiculturalism or cultural diversity as well as social inclusion and integration. Multiculturalism suggests a positive endorsement of communal and cultural diversity, usually arising from racial, ethnic, and language differences. It is the idea that people with such differences could live together harmoniously in the same society. This conception could extend to disabled people, in that, as a group, they could live with those without disabilities, although some effort might be needed to accommodate them into society. The idea of social integration and inclusion allows people with disabilities to take part in the affairs of

society, hence, bringing them into the mainstream (Heywood, 2004: 306 & 215-216). With social integration and inclusion, then, multiculturalism is achieved. With respect to the disability issue, certain public policies could ensure multiculturalism. Such policies include the right to work and the right to schooling among people and children with disabilities (Farrah, 1994: 56; Gartner & Lipsky, 1998: 73; Namsiripongpan, 1996: 120). Prenatal testing for disability is believed by some people to contradict the ideas of multiculturalism and cultural diversity, in that it prefers the culture of non-disability to that of disability (Purdy, 2001: 682). In other words, prenatal testing for possible malformation of fetuses aims at eradicating diversity from society. General social welfare for those with disabilities, on the other hand, is mostly for the purpose of ensuring dignity and quality of life, hence, integrating them into society.

Theories of social problems

According to Chambers and Wedel (2005: 8), understanding a social problem is not quite similar to finding the truth about it. It is, instead, to understand how and what people think and believe about it. In other words, different people may perceive and interpret a problem in different ways. Therefore, within each social problem, Chambers and Wedel (2005: 7) state that people may assign different levels of importance to it. The degree of importance of a social problem depends on two factors. One is the power and social status of those who define the problem and urge the expenditure and resources toward a solution. Another one is the sheer number of people being affected by the problem. Therefore, the more people affected and the greater the social power and status of those urging a solution, the more important a social problem will be. But more than that, differences in perception may lead to disagreement and quandary about whether a problem would constitute a social or personal problem. The designation of a problem as a social or personal problem is important, since it will lead to separate consequences. In the disability issue, only its designation as a social problem would call for public policies, since they respond to social problems. On the contrary, with the

perception of disability as a personal problem, those with disabilities must care for the problem by themselves.

Chambers and Wedel (2005) also state that almost every problem has social consequences. For instance, when one person loses his/her job, it could be viewed as his/her personal problem. However, the loss of job could affect the person's family, in that it could cause further family problems as well as drugs problems and substance abuses which, in turn, could affect the society. Moreover, the job loss could lessen individuals' demand for goods and services, which could further affect the supply in the market. This example illustrates the chain effects of one particular problem, in that it spreads from one person to many others, hence, a social consequence. Chambers and Wedel (2005: 7) state that a social problem involves the worsening in the quality of life of many people. In nowadays' society, with the increase in population along with faster means of communication, the spread of one person's problem to many others is also easier and faster than in the past. This highlights the link between personal and social problems or makes it difficult to differentiate the two. For the disability issue, the number of disabled people, which suggests how widely the issue is experienced, could primarily indicate social consequence of the issue.

Cobb and Coughlin (1998) discuss the kinds of perspectives or problem definition that expand or contract an issue. Issue expansion would initiate a responsive public policy, whereas issue contraction minimizes it. The former is well associated with the perception of an issue as a social problem worthy of having public policies to correct it. Cobb and Coughlin (1998: 417-418) would suggest the following perceptions or problem definitions that help expand the disability issue to become a social problem. The first perspective is problem incidence or prevalence, in that the larger the number of people is affected, the more likely the issue will expand. Second, problem causality would question the cause of disability, whether it is a natural cause or a human cause, such as accidents. Third, the more severe the disability issue is perceived to be, the higher the likeliness that the issue will expand. Very much related to the third criterion is the crisis component. The perception of disability issue as a crisis would easily expand

the issue. Fifth, the perception on certain characteristics of the problem population, such as disadvantage, helplessness, desert, and vulnerability, would also expand issues. Sixth, certain values attached to the disability issue, such as justice, spiritual merit, and rights, also expand it. Lastly, the acceptability of problem solution will also increase an interest in addressing an issue. An acceptable solution would be affordable. Also part of an acceptable solution is its adaptability, suggesting that the bureaucracy must be able to apply it to reach a desirable result. The acceptability also means that the general public would endorse the solution.

Prior to Cobb and Coughlin (1998), Cobb and Elder (1983) already had identified some factors contributing to issue expansion. They identify issues that likely expand as the ones that catch interest of the public or the audience of those issues (p. 110). Primarily, issues that are characterized as natural catastrophe would easily catch a large audience. Unanticipated human events, such as assassination and air hijackings, would be of interest to the public. Third, some technological changes that affect certain aspects of an issue could be interesting to a large audience. For instance, new development in disability or social welfare, new rehabilitation techniques, or less expensive / more affordable assistive technologies and devices would expand the disability issue, as there are new, promising solutions worthy of consideration. Fourth, issues that involve resource distribution would catch the public's attention, such as plights and disadvantage among people with disabilities, as a result of lacking essentialities in life. Fifth, ecological changes, such as a significant increase in the population of the elderly with disabilities could also well expand the issue (p. 84). Sixth, the social significance of an issue refers to the number of people affected by it; that is, the greater the number, the more the significance. Seventh, an issue with temporal relevance or one with a long-term or long-lasting effect will likely expand to catch a large audience. For instance, a disability in a family could be supposed to affect children of that family in some ways, such as long-term mental health. And issue with temporal relevance could also be viewed to spread easily to other related problems, such as poor social welfare that could affect the nation's image. Eighth, simplicity in an issue or one

which is easy for the public to comprehend would more likely expand than a more complex and difficult-to-understand issue. Lastly, new issues will also likely catch public attention (pp. 97-101).

Along the same line as the above discussion, Gerston (2002 & 2004) discusses triggering mechanisms, which are factors that tend to catch public attention, hence, shaping the perception of an issue as a social problem. First, an issue of a high scope affects a large number of people. Second, intensity of an issue also calls for remedies by public policies. Third, resources refer to the price that a society has to pay, if a problem lingers without correction. On the other side, resources also suggest the cost needed for the correction of a problem. The higher the former is, the more likely a response to the problem will be initiated. By the same token, the lower the cost of attacking the problem, the more likely public policies will be initiated. Gerston also mentions social evolution which is the change in public attitude pertaining to an issue. A more positive change in attitude regarding disability rights, for example, will increase the likelihood that the disability issue will receive attention from policy makers (Gerston, 2004: 25-28 & 36).

Social problems, as discussed above, closely relate to the concept of public sphere. The notion of public sphere, in itself, relates to the ideas of collectivism, society, and communitarianism. These ideas comprise a collectivist phenomenon, where individuals see benefits in forming a whole – communities and societies. "However resilient and independent individuals may be, human existence outside society is unthinkable. Human beings are not isolated Robinson Crusoe, able to live in complete and permanent isolation" (Heywood, 2004, 40). Such collectivist phenomenon, at times, requires cooperation among individuals in society or community (Heywood, 2004: 23). Applying the collectivist idea, this research queries the disability issue as a social or a personal problem. Assuming the former would be logical, due to the notion of cooperation among individuals in the collective whole. Sangiampongsa (2003: 303-308) sees the public sphere as the collective whole, in which there is difficulty in separating its components or individuals. In this line of thought, an individual's attitude, actions and

condition likely affect others in the society. As discussed earlier, most personal problems ultimately turn social problems in some manners. Chatterjee (2002: 375) states that in a society, there are individuals who are disadvantaged and need to be cared for by others. Without such care, usually via public policies, the whole society would suffer from appearing to lack integrity and justice, while not providing its members with adequate security. Moreover, Chatterjee tends to view that a starving or destitute person within a group may become a dangerous person. By the same token, according to Twine (1994: 105-107), if certain individuals are rid of material resources that they well deserve in a supposedly just society, they would appear to be facing a social exclusion, which is in disagreement with the idea of collectivism and communitarianism. For the disability issue, people with disabilities are unfortunate that it remains a fringe issue, as compared to related ones, such as women's liberation and gay rights, among others (Taylor, 2004: 33). Such fringe issue – disadvantages confronting disabled people – could have some difficulty reaching the public sphere.

The perception of disability as a social problem may also be justified by the close relationship between disability and poverty. The disability literature discussed earlier, such as Kwanyuen and Chancharoenlap (2003: 33),Wimonkanchana (1998: 53), as well as Hongladarom (1998, 1999, 2000 & 2002), frequently describes the lack of essential elements in life among people with disabilities, along with their higher expenses, as compared to those of non-disabled people. Research report on Health Service System for Rehabilitation (1997) also states that disability breeds poverty. In a similar vein, Batavia and Beaulaurier (2001: 140-142) state that despite the Americans with Disabilities Act of 1990, those with disabilities are four times more likely than those without disabilities to be destitute, due to less job opportunity and their high expenses in life.

The designation of issue status as social or personal has always been dependent on perceptions. Theodoulou and Kofinis (2004: 10-13) state that the status of certain issues is particularly more debatable than other issues. For instance, terrorism issue would almost be subject to no quandary in its status as a social problem.

This research supposes that the disability issue would be one within the gray area between social and personal problem. In addition, the designation of issues as social or personal may not be stable over time. According to Gerston (2002: 5), many of today's social issues, namely homelessness, domestic violence, environmental pollution, and energy were considered beyond the responsibility of government two centuries ago.

Some other related concepts to the disability issue and welfare

There are also some other related and quite various perspectives on disability issue. Kirby (2004) discusses four perspectives on disability. In biomedical perspective, disability is viewed as a deficit, worthy of correction, so that those with disabilities become as close to those without disabilities as possible. Such perspective leads to rehabilitation policy. The perspective on disability as a social construction sees disability as a social labeling, just as the labeling of non-disabled people. As a result of such view, the disadvantage facing people with disabilities is due to the structure of social environment that does not accommodate disabled people, not their personal limitation. This, then, calls for a policy that brings social environment more closely to them, such as a more accessible public transportation. The perspective on disability as difference focuses on the physical dissimilarity between people with and without disabilities, leading to marginalization of those with disabilities and cultural domination by those without disabilities. This perspective would propose a representation of this difference – representatives of those with disabilities – so as to bring benefit to this marginal and different group through public policies. The perception of disability as universal experience views that people without disabilities can only temporarily maintain their non-disability condition. In other words, people would face some types of disability at certain times in their life, such as during old age. This calls for an obligation that people, during their time of non-disability, must provide assistance to those with disabilities, such as by paying disability tax.

There are some other related philosophical welfare perspectives, which could be applied to disability welfare perspectives. The liberal case or liberal welfarism believes

that welfare would bring freedom. With adequate welfare, such as rehabilitation, those

with disabilities should be able to help themselves (Heywood, 2004: 310-311). The

economic efficiency perspective on welfare views social welfare as a social investment

for the future. Therefore, with some disability welfare, people with disabilities would be

better integrated into the workforce and more equipped to contribute to the national

economy (Heywood, 2004: 307). The conservative perspective on welfare foresees

harm from certain conditions, such as poverty and deprivation. Therefore, the disability

welfare is for the purpose of social cohesion, as it attempts to bring people with and

without disabilities more closely to each other by various means (Heywood, 2004: 307 &

310). The social democratic perspective on welfare links disability welfare to social

equality, which is believed to be a just society. Therefore, this is the perspective of

disability welfare as a means to social justice (Heywood, 2004: 311).

All the above discussion comprises the review of literature and research on

disability, along with theories on disability rights and disability as a social problem, as

well as some other related concepts. The literature, particularly the theories of rights

and social problems, will be used to construct a survey instrument that examines

perceptions on disability rights and disability as a social problem among the three

groups identified in the previous section. According to Kingdon's (2003) Multiple

Stream Model, three factors – the streams in this model – will help initiate public policy

by creating an agenda opportunity for an issue. The policy stream refers to a problem

solution that is available, affordable, technically feasible, and acceptable in values of the

public or community. The political stream suggests a positive political environment – the

national mood that welcomes an issue, as well as strong civil society, interest groups,

political parties, and State institutions that are prepared to work with and push a

particular issue. The problem stream, which is of most interest in this research,

represents a positive perception on an issue, in the sense that among many issues, a

particular one is defined and proposed as worthy of State's purview (Kingdon, 2003:

165-168: Blankenau, 2001: 38-39). "Perception is the 'registering or receiving of an

event' that has consequences for people or groups. Definition is the interpretation of

those events, giving meaning to them, making them clear. … But problems do not define themselves. … Someone has to point out that a problem exists and give it meaning. Different people will register the same events in different ways and give them different definitions" (Rushefsky, 2002: 6). Different people are entitled to have their own opinion; and in fact, this is the expectation in democratic societies. However, various and contradicting perspectives, particularly on disability rights and disability as a social problem are designated as a divided problem stream, within the application of kingdon's (2003) Multiple Stream Model (Blankenau, 2001: 45-46). Although this is not at all uncommon and definitely not registered negatively in democracies, it does mean that policy making and further governmental action in responding to a problem will take a longer time to materialize. On a rather positive note, further debate and brainstorming on the issue will continue, possibly and hopefully resulting in "better" public policies and governmental action, due to the benefit of further and intense articulation of various ideas and perspectives. In case of the disability welfare, this research proposes to examine the perceptions on disability rights and disability as a social problem among people with disabilities, public officials involving in social welfare policies, and people in the general public. Differences in perceptions among these three groups could be somewhat associated with the divided problem stream.

Research procedure

As stated above, this research hypothesizes that people with disabilities, public officials in the Ministry of Social Development and Human Security, and the general public differ in their perceptions on disability rights and disability as a social problem. Existing disability policies are, therefore, not responsive to the needs of those with disabilities. As the literature review suggests, disabled people perceive a lack of essential elements in life, probably due to inadequate, inefficient, and ineffective disability welfare, coupling with the general public's perception of disability as a private matter among disabled people and their families. In order to determine perceptions on disability rights and disability as a social problem, survey research methodology by the design and construction of written, self-administered questionnaire is used. Following is the detailed research procedure in response to the research objectives and hypotheses.

Populations and samples

In response to the research objectives, hypotheses, and framework, populations of interest are as follow, consisting of three groups of people.

1. People with disabilities of all types in Bangkok Metropolitan Area who can understand and respond to questions regarding their perception on disability rights and disability as a social problem.

2. Public officials in Ministry of Social Development and Human Security in the central administration, Bangkok, representing the State.

3. The general public or people in the middle class or above, who are not disabled, in Bangkok Metropolitan Area. It is surmised that people in the middle class would be able to reflect on their perception, which should be beneficial to the study. In addition, the disability welfare, as a redistributive policy, usually involves the transfer of private revenue, through a system of progressive taxation, from the more well-to-do to less wealthy people, for the reasons of higher needs of the latter as well as justice (Ripley & Franklin, 1986: 178). For the disability welfare, the relocation of resources for the purpose of welfare, if

any, would be from these people in the middle class to those with disabilities, who are generally less wealthy.

The sample sizes of the three groups are based on the size of each population in Table 4 of Yamane (1967: 398) at 95 percent level of confidence and ±10 percent level of precision. This table lists calculation results of sample sizes from populations of 500 up to infinity and from levels of precision of 1 percent to 10 percent. The formula for such calculations is: $n = N/1 + Ne^2$, where n = appropriate sample size, resulting from the calculation; N = population size; and e = desired level of precision (Suchart, 2546: 140-142). Such calculation and Table 4 of Yamane (1967: 398) give the following sample sizes.

1. Sample of people with disabilities = 100. (Total number of disabled people of all types in Bangkok Metropolitan Area = 77, 444 (Statistics on People with Disabilities, by Thailand Bureau of Statistics, 2544 – www.service.nso.go.th)). Therefore from the formula: $n = N/1 + Ne^2 = 77,444 / 1 + 77,444(.1)^2 = 77,444(.01) = 77,444 / 775.44 = 99.87 = 100$.

2. Sample of public officials involving directly with social welfare policies = 95. (Number of public officials in Ministry of Social Development and Human Security in the central administration, Bangkok = 1,753 (Personnel Information of Ministry of Social Development and Human Security, 2548)). From the formula: $n = N/1 + Ne^2 = 1,753 / 1 + 1,753(.1)^2 = 1,753(.01) = 1,753 / 18.53 = 94.60 = 95$.

3. Sample of people in the general public = 100. (Number of people from the educational background of vocational school to university education within Bangkok Metropolitan Area = 1,473,000 (Data on Social Information, Office of Social Development and Quality of life, National Economic and Social Development Board, 2545 – www.nesdb.go.th)). From the formula: $n = N/1 + Ne^2 = 1,473,000 / 1 + 1,473,000(.1)^2 = 1,473,000(.01) = 1,473,000 / 14,731 = 99.90 = 100$.

Sampling procedure

Non-probability sampling by relying on available subjects or survey respondents, in this case, was mainly used for data collection. Some judgments were also used to determine appropriate, possible locations of each population. In addition, prior respondents sometimes offer suggestions on possibly other respondents. Some judgments were made on the quotas of respondents, such as the proportion of male and female respondents as well as the appropriate proportions of people with each type of disabilities in the disability sample. Such procedure, therefore, tends to suggest multiple techniques of non-probability sampling – reliance on available subjects, purposive or judgmental sampling, snowball sampling, and quota sampling (Babbie, 2004: 182-185). Non-probability sampling is believed to produce quality responses, which should mitigate and compensate for its weakness in non-representation. In probability sampling, identified and selected respondents from various techniques, such as simple random sampling or systematic sampling could be unwilling to take part in a study. Such respondents cannot be forced to cooperate and, by all means, could refrain from participating in the survey. Most survey research simply asks for people's cooperation. Even though identified respondents agree to participate in the study, some may be rather busy at the time of survey and, therefore, could not spend a fair amount of time pondering the questions. As a result, answers that are given might not be accurate. Thus, this study primarily asked for people's willingness to participate. Moreover, as most survey research needs research assistants and survey teams, non-probability sampling could be less expensive than probability sampling, in the sense that the former requires less time and effort of research assistants and survey teams. For all the above reasons, non-probability sampling is still believed to be a viable method of data collection.

Most of data collection in this study is done by a survey team consisting of a research assistant and three other data collectors. A master's degree candidate from Faculty of Political Science, Chulalongkorn University is hired as the research assistant to help coordinate data collection. He first helped identify probable locations and some

contact information of the three samples. Two other master's degree candidates and another master's degree student, also from Faculty of political Science, Chulalongkorn University, are hired as data collectors. The survey team pursued the task of surveying respondents at the identified and selected sites. Although written, self-administered questionnaire was used, which will be further explained in detail, one data collector is instructed to pair with one respondent during the time of survey, in order to assist the respondent in responding to the survey, in case that some clarification on the questions is required. Among the three samples, people with disabilities, in particular, require some assistance from the survey team in responding to the survey. Obviously, the team had to read the survey questions to people with vision impairment. They also had to fill in the answers from some of those with mobility impairment onto the papers.

Probable locations of the three samples were identified by the research assistant. In sampling and surveying people with disabilities, the survey team went to major places where disabled people could be easily located, such as Thai Disabled Development Foundation; Association of the Physically Handicapped; Council of Disabled People of Thailand; Thailand Association for the Blind; Thailand association for the Deaf; various facilities for disability rehabilitation and vocational training, such as Center for Vocational Training for People with Disabilities at Pak Kret and Institution for Children with Disabilities at Pak Kret. The survey team also went to the Government Lottery Office. Within the sampling procedure, even though there are five types of disability, people with vision impairment and those with mobility impairment comprise the largest portions of the disability sample. People with hearing, mental, and learning impairments tend to have some difficulty understanding the questionnaire. A judgment was, then, made not to include many people with these types of impairments, due to the risk of possibly inaccurate responses. In sampling public officials involving with social welfare policies, the survey team went to Ministry of Social Development and Human Security. A separate, official letter addressed to the Permanent Secretary to the Ministry was attached to a sample survey to ask for approximately ten minutes of cooperation from public officials in the Ministry who were not busy at the time of survey. Responses

came from most departments and divisions of the Ministry, such as Office of the Permanent Secretary; Department of Social Development and Welfare; and Bureau of Welfare Promotion and Protection of Children, Youth, the Disadvantaged, Persons with Disabilities, and Older Persons. In sampling the general public in the middle class or above, the survey team went to office buildings on Silom Road, Sukumvit Road and Sathorn Road and asked for cooperation in the study. These sites were purposively selected, as it was surmised that these are the places where people in the middle class or above could be most conveniently located. A preliminary question regarding education attainment is asked early in the survey, in order to screen for only people in the middle class or above.

Questionnaire design, Pretest, and Variables

Within the research framework explained earlier, a survey instrument is generated via the help of literature regarding rights and social problems. The instrument first gathers general, demographic information. Then, two main sections of questionnaire items assess perspectives on disability rights and disability as a social problem among the three samples – people with disabilities, public officials involving with welfare policies, and the general public. Most of the questionnaire items, especially all in the first main section, use seven scales of opinion ranging from highest (7) to lowest (1) on each opinion or from agreement to disagreement to each item. As many as seven scales are used as provided response options for each item mainly for the purpose of quantitative analyses, which will be explained later. Few items with response scales that are shorter than seven are in the second main section. Theories on rights and social problems, as discussed in the literature review, provide the rationale behind each item inquiring perceptions on disability rights and disability as a social problem. Certain questionnaire items, by themselves, become separate variables, while some other items are combined and form composite scores of variables. All of these variables reflect various aspects of perceptions on disability rights and disability as a social problem.

After the questionnaire design, it was tested on three samples similar in characteristics to the actual samples. The three pretest samples, each with ten subjects or respondents, comprise people with disabilities, public officials in the Ministry of Labor, and people in the middle class or above. In particular, officials in the Ministry of Labor were purposively chosen as they are assumed to be closest in characteristics and area of duties to the actual population and sample – public officials in the Ministry of Social Development and Human Security. The former is also chosen as the pretest sample in order to avoid exposing the latter to the survey instrument prior to the actual data collection, since officials in the Ministry of Social Development and Human Security in Bangkok comprise a small population. After the pretest, variables that are composite scores of items went through a reliability test, using alpha coefficients or Cronbach's Alpha. Some adjustments were made to some questionnaire items, as well as to the instructions of the survey. Table 1 lists all the survey items from the two main sections of survey instrument. Within each item, its rationale, which is prescribed by either a theory on rights or a theory on social problems, is explained, along with some citation of literature. The meaning of plausible responses to each survey item is given. Appendices A, B, and C show the actual three versions of survey instrument directed to public officials involving with social welfare policies, people with disabilities, and the general public from the middle class or above, respectively. Within each version, few items are shaded, so that respondents skip those particular ones.

Table 1

List of Questionnaire items, Rationales, and Meanings

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1. ผู้ที่ช่วยเหลือตัวเองได้ยาก ควรได้รับสวัสดิการจากรัฐอย่างพอเพียงที่จะดำรงชีวิตอยู่ได้อย่างดี โดยไม่จำเป็นต้องทำงาน

Rationale / Theoretical framework: Right not to work / Decommodification of labor / Disability rights attitude (radical).

(Table 1 continuted)

Some citations of literature:

"Why should working be considered so essential that disabled people are allowed to be taken advantage of, and, moreover, expected to be grateful for such an 'opportunity'" (Taylor, 2004: 33)?

"People are treated as commodities in the sense that their survival is contingent upon the sale of their labor power" (Twine, 1994: 107).

Meaning: เห็นด้วย (7) = Pro-disability rights attitude (Radical).

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2. คนพิการควรได้โอกาสประกอบอาชีพ มีหน้าที่การงาน

Rationale / Theoretical framework: Right to work / Disability rights attitude.

Some citations of literature:

" … [B]y upholding the right to work, the right to healthcare … social citizenship advances the cause of material equality" (Heywood, 2004: 211).

"In terms of standard-setting, the ILO [International Labor Organization] has helped to evolve several institutional instruments which invite states and other actors to take concrete measures to formulate policies and programs to counter discrimination and include those with disabilities into the employment sector, particularly from the angle of equal opportunities" (Muntarbhorn, 2006: Sect 1, p. 10).

Meaning: เห็นด้วย (7) = Pro-disability rights attitude.

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3. เป็นเรื่องที่เข้าใจได้ ที่นายจ้างต้องการจ้างงานคนปกติ มากกว่าคนพิการ เพราะจำเป็นต้องคำนึงถึงคุณภาพของงานด้วย

Rationale / Theoretical framework: The actual employment situation of the disabled, as compared to the attitude toward the disabled / societal needs while accommodating the disabled.

(Table 1 continued)

Some citations of literature:

"We need a new approach to achieve the goals of people with disabilities. The new approach must meet the needs of both people with disabilities and the social institutions with which they interact. It must entail substantial responsibilities on the part of both parties. Without addressing the needs of

the institutions as well, the needs of the individuals with disabilities will never be met" (Batavia & Schriner, 2001: 697).

"Most employers have positive disposition toward people with disabilities. However, 76.9 percent of businesses have no intention of hiring the disabled. … Disabilities are still a significant barrier to entering the labor market" (Tapawpong, Translated, 1994: 135).

"Employers have started to pay attention to 'social responsibility' if it does not impose too high a cost on them. More businesses have hired the disabled; but their primary choice would be those whose disabilities do not affect the quality of work. Many businesses hire people with disabilities only to appear complying with the law, while many others try to get away with it. Moreover, employees with disabilities generally get promoted less often than those without disabilities, as there still remains the common belief that the positions of supervisors and managers require a totally-abled bodies" (Wimonkanchana, Translated, 1998: 83).

Meaning: เห็นด้วย (7) = Negative employment situation among the disabled, due to their disability.

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4. คนพิการมีข้อจำกัดในการดำเนินชีวิตประจำวัน มากกว่าคนปกติ

Rationale / Theoretical framework: Internal / actual limitation of the disabled, as compared to the attitude toward disability

Some citations of literature:

"For many people with disabilities, there is a limited array of viable substitute options. If your personal assistant doesn't show up, or your customized wheelchair breaks, or your guide dog dies, what do you do" (Batavia & Beaulaurier, 2001: 140)?

Meaning: เห็นด้วย (7) = Perception of actual limitation of disability.

(Table 1 continued)

5. สังคมให้ความเห็นใจคนพิการ

Rationale / Theoretical framework: Attitude toward the disabled and disability.

Some citations of literature:

"Leaders of OAS [Organization of American States] have awakened to the realization that more than 10 percent of their population is disabled. This fact would usually evoke more sympathy and despair than it would action … " (Farrah, 1994: 56).

"A survey found that although national senior executives strongly endorsed the ADA [American Disability Act], the percentage of companies that actually hired people with disabilities increased only slightly from 62% in 1986 to 64% in 1995. Furthermore, related research (namely employer attitude toward workers with disabilities) has consistently shown a discrepancy between expressed attitude and behavior. Specifically, employers' expressed willingness to hire workers with disabilities has been incongruent with their actual hiring" (Hernandez, Keys, & Balkazar, 2004: 29-30).

"People and society should realize that the disabled are competent and should welcome the participation of the disabled in social activities, while those with high extent of disabilities must receive assistance from society" (Namsiripongpan, Translated, 1996: 125-126).

Meaning: เห็นด้วย (7) = Positive attitude toward people with disabilities.

6. คนในสังคมให้ความช่วยเหลือคนพิการ

Rationale / Theoretical framework: Actual assistance given to the disabled, as compared to attitude toward disability and the disabled.

Some citations of literature:

"One can find volunteers who help the disabled, such as those who are willing to read for the blind. But many forms of other required assistance, such as providing transportation and accompanying them to do errands, shopping, and recreational activities are still lacking. It is also difficult to find volunteers to help the disabled bath and get dressed as well as prepare meals for them. Many people with disabilities need such forms of assistance, which are much easier to find in the developed countries. Therefore, in Thailand, there are generally inadequate volunteers who help the disabled" (Namsiripongpan, Translated, 1996: 115).

(Table 1 continuted)

Meaning: เห็นด้วย (7) = Actual positive behavior toward the disabled.

7. ปัญหาเกี่ยวกับการดำเนินชีวิตของคนพิการ เป็นปัญหาที่รุนแรง

Rationale / Theoretical framework: Problem intensity.

Some citation of literature:

"[It is] the extent to which people feel psychologically involved in or affected by the issue … Take the issue of gun control, for example. Virtually many times there is a shooting or other well-publicized abuse of firearms, public opinion surveys show the widespread demand for immediate action … " (Gerston, 2002: 34-35).

Meaning: เห็นด้วย (7) = Perceiving problem intensity / Perception of disability as a social problem / Disability issue expansion as a social problem.

8. รัฐจำเป็นต้องแก้ไขปัญหาคนพิการ ไม่เช่นนั้นจะเกิดปัญหาอื่นตามมา

Rationale / Theoretical framework: Expending resources on the disability issue / Solution affordability.

Some citations of literature:

"The fourth component that determines a triggering mechanism is the matter of resources, or precisely the costs of a problematic development. Simply put, the matter here centers on the risks we face in coming to terms with an undesirable situation" (Gerston, 2004: 27).

"Decision makers will not act unless [issue] expanders provide a solution to the problem. Acceptable solutions have three features: Affordability (not too expensive) … " (Cobb & Coughlin, 1998: 420).

Meaning: เห็นด้วย (7) = Perceiving a high cost of not directing resources to the disabled / Perception of disability as a social problem / Disability issue expansion as a social problem / Perceiving affordability in solving the disability problem.

(Table 1 continuted)

9. ความพิการ เป็นปัญหาที่กระทบคนจำนวนมาก

Rationale / Theoretical framework: Magnitude / Scope / Prevalence / Social significance, due to the fact that many people are involved.

Some citations of literature:

"Scope refers to the number of people within a geographic boundary affected by the triggering mechanism. If an event has widespread implications for a sizable sector of society, the demand for action will have a broad base" (Gerston, 2004: 25).

"Social significance is … 'impact'. One can speak of issue impact to refer to the number of persons who will potentially be affected … The greater the impact, the more people who will be seeking active engagement in the decision-making process" (Cobb & Elder, 1983: 97).

Meaning: เห็นด้วย (7) = Perceiving high magnitude of the disability problem / Perception of disability as a social problem / Disability issue expansion as a social problem / Perceiving social significance in the disability issue.

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10. ท่านมีความเกี่ยวข้องกับสมาคม มูลนิธิ หรือชมรมด้านความพิการ

Rationale / Theoretical framework: Involvement with disability groups increases the chance of demand for action.

Some citation of literature:

"People with disabilities would still benefit from more group formation into foundations, forums, and associations. But they are lacking because most people with disabilities are usually busy making ends meet" (Namsiripongpan, Translated, 1996: 143).

Meaning: เกี่ยวข้องมาก (7) = High level of involvement / High level of concern regarding disability as a social problem.

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11. รัฐควรมีสวัสดิการให้แก่คนพิการ เช่นการฝึกงาน เพื่อให้โอกาสแก่คนพิการได้สามารถช่วยตัวเองได้ในอนาคต

Rationale / Theoretical framework: Liberal case for welfare / Liberal welfarism.

(Table 1 continued)

Some citation of literature:

"The liberal case for welfare … has … in particular the belief that welfare can broaden the realm of freedom … [M]odern liberals have seen it [welfare] as an essential guarantee of individual self-development … Very similar motives influenced the introduction of social welfare in the U.S.A. in the

1930s, under F. D. Roosevelt's 'New Deal.' … Once deprivation has been alleviated, liberals hope that individuals will once again be able to take responsibility for their own economic and social circumstances and 'stand on their own two feet'" (Heywood, 2004: 310-311).

Meaning: เห็นด้วย (7) = Pro-liberal welfare attitude.

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12. นโยบายของรัฐด้านคนพิการ มีผลในระยะยาวต่อคุณภาพชีวิตของคนพิการ

Rationale / Theoretical framework: Temporal relevance / long-term consequences of the disability issue.

Some citation of literature:

"If an issue has long-term implications beyond the exigencies of the immediate situation, there is a greater likelihood that it will attain additional visibility" (Cobb & Elder, 1983: 117).

Meaning: เห็นด้วย (7) = Perceiving temporal relevance in the disability issue / Perception of disability as a social problem / Disability issue expansion as a social problem.

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13. ในระยะยาว สังคมจะได้ประโยชน์จากสวัสดิการคนพิการ

Rationale / Theoretical framework: Temporal relevance of the disability issue / Public interest within the disability policy.

Some citations of literature:

One argument for the continuation of a public program is its future payoffs, hence, temporal relevance (Cobb & Elder, 1983: 119).

"The concept of the public interest from a socialist perspective gives expression to the fact that individuals are not separate and isolated creatures …, but social animals who share a genuine

(Table 1 continued)

concern about fellow human beings and are bound together by common human needs" (Heywood, 2004: 244).

"[T]he public interest could mean things that are good for a community as a community. Even the most minimally organized community has some stake in preserving its own sense of order … whatever form that takes" (Stone, 2002: 21).

Meaning: เห็นด้วย (7) = Perceiving temporal relevance in the disability issue / Perception of public interest within the disability policy / Perception of disability as a social problem / Disability issue expansion as a social problem.

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14. ความพิการ นับเป็นเรื่องของโชคชะตา หรือบาป กรรม

Rationale / Theoretical framework: Problem causality / Perception of disability as personal tragedy or personal problem.

Some citations of literature:

"Disability is most commonly perceived as a personal tragedy, isolated and spontaneous, so rarely worthy of a second thought. The disabled are viewed with sympathy as victims of 'bad luck' who will simply have to accept disadvantage as their lot in life …" (Taylor, 2004: 33).

"Therefore, with respect to problem causality, what causes the problem of disability? Is it bad luck" (Cobb & Coughlin, 1998: 416)?

"People with disabilities should be well-accepted by their own families. In particular, parents whose children are disabled must realize that disabilities are of no one's faults" (Namsiripongpan, Translated, 1996: 123).

Meaning: เห็นด้วย (7) = Perception of disability as personal tragedy (personal problem) / Perception of disability as a personal problem / No disability issue expansion as a social problem.

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15. ความพิการ เป็นเรื่องเกี่ยวกับการกระจายรายได้ของคนในสังคม

Rationale / Theoretical framework: Unequal resource distribution between the abled and the disabled.

(Table 1 continued)

Some citation of literature:

"The fourth category [of triggering mechanisms] is an actual imbalance, or bias, in the distribution of resources leading to such things as civil rights protest …" (Cobb & Elder, 1983: 84).

Meaning: เห็นด้วย (7) = Perception of unequal resource distribution between the abled and the disabled / Perception of disability as a social problem / Disability issue expansion as a social problem.

16. **นับเป็นความยุติธรรม ที่จะเก็บภาษีจากคนปกติ มากระจายสู่คนพิการ เป็นสวัสดิการ**

Rationale / Theoretical framework: Radical, distributive justice approach in disability welfare.

Some citation of literature:

"[D]istributive Justice Approach focuses society's energies on the task of striking the right balance of correction and accommodation to ensure full equality of social participation for all. … [T]he distributive justice approach cares only about making sure that disabled individuals get to participate equally in all areas of life alongside non-disabled individuals, even if this means going what looks like the proverbial extra mile" (Tong, 1999: 523).

Meaning: เห็นด้วย (7) = Pro-distributive justice attitude (radical).

17. **มีข้อจำกัด ในการปฏิบัติภารกิจด้านสวัสดิการคนพิการ**

Rationale / Theoretical framework: Adaptability in social problem solving.

Some citation of literature:

"Decision makers will not act unless there is solution to a problem. Adaptability of the solution is when it [solution] does not require a great effort for the bureaucracy to accomplish the end (i.e., no limitation in the task)" (Cobb & Coughlin, 1998: 419).

Meaning: มีข้อจำกัดมาก (7) = Perceiving non-adaptability in solving disability problem / No expansion of disability as a social problem.

18. **ควรปรับสภาพแวดล้อมของสังคม ให้คนพิการสามารถใช้ประโยชน์ได้อย่างคนปกติ เช่นรถประจำทาง และถนน ที่คนพิการใช้ได้สะดวก**

(Table 1 continued)

Rationale / Theoretical framework: Perspective of disability as social construction.

Some citation of literature:

"A disability conceptualization provided by many disability rights advocates conceives of disability as a socially constructed phenomena." Societies are mostly organized to accommodate only those who fell within an extremely narrow range of physical and cognitive functional variation. With sufficient funds and political will, many of the organized environments and activities, which were historically structured for a too narrow range of functional abilities, can be restructured to render them accessible to some individuals with disabilities. (Kirby, 2004: 231-242).

Meaning: เห็นด้วย (7) = Pro-social diversity attitude / Pro-multi-culturalism / Pro-disability rights.

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19. มีคนกลุ่มอื่น ๆ เช่นคนไร้บ้าน หรือกลุ่มเด็ก ที่ควรได้รับสวัสดิการ ก่อนกลุ่มคนพิการ

Rationale / Theoretical framework: Characteristics of problem population / Group-based distribution.

Some citations of literature:

In order for a group to be helped, it must appear deserving (Cobb & Coughlin, 1998: 418).

"While issues regarding racial, gender, and sexual orientation equality are all at the forefront of political and social theory, disabled people are almost always left out of these conversations" (Taylor, 2004: 32).

Group-based distribution holds that some major divisions in society are relevant to distributive equity. For example, affirmative action is a policy of distributive preference to members of groups that have been victims of historical discrimination. A quota of resource is geared toward such groups (Stone, 2002: 45-46).

"There's a feeling that disabled people are taking away the rights and resources of those who are more deserving … " (Wolfe, 1995: 25).

"And just as women and people of color are blamed for the decrease in secure jobs for white men caused by economic restructuring, so children with disabilities and their parents are attacked for using up a 'disproportionate ' amount of educational dollars – money that would be better spent on 'normal' children" (Pelka, 1996: 28).

(Table 1 continued)

Meaning: เห็นด้วย (7) = Perceiving that the disabled are a group that deserves less public assistance than do other groups / No expansion of disability as a social problem.

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20. ผู้ที่ประสบความพิการจากความประมาทของตนเอง สมควรได้รับความช่วยเหลือจากสังคม น้อยกว่าผู้พิการตามธรรมชาติ เช่นผู้ที่พิการแต่กำเนิด

Rationale / Theoretical framework: Deserts / Civil rights vs. Distributive justice approach (more radical).

Some citations of literature:

"According to civil right's advocates, it matters how a person's impairment or disability came about. … If … [a] … person lost an arm because of his own action or negligence, then it's not the responsibility of his company to remedy his handicap. … Advocates of distributive justice disagree. Uninterested in assigning blame for people with disability conditions, the distributive justice approach cares only about making sure that disabled individuals get to participate equally in all areas of life alongside non-disabled individuals" (Tong, 1999: 522).

"Deserts-based theories … resemble rights-based theories … notably in rejecting any presumption in favor of equality. A 'desert' is a just reward or punishment, reflecting what a person is 'due' or 'deserves'" (Heywood, 2004: 301).

Meaning: เห็นด้วย (7) = Pro-desert attitude.

ไม่เห็นด้วย (1) = Pro-distributive justice attitude / Pro-disability rights attitude (radical).

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21. ผู้ต้องโทษที่พิการ ควรได้รับสวัสดิการน้อยกว่าผู้พิการอื่น ๆ

Rationale / Theoretical framework: Deserts / Civil rights vs. Distributive justice approach (more radical).

Some citation of literature:

"[T]he theory that punishment is a form of retribution is based upon the idea of deserts because the wrong-doer is thought to 'deserve' punishment not simply as a result of his actions but in view of the quality of evil lying within him or her" (Heywood, 2004: 301).

Meaning: เห็นด้วย (7) = Pro-deserts attitude.

ไม่เห็นด้วย (1) = Pro-distributive justice attitude / Pro-disability rights attitude (radical).

(Table 1 continued)

22. หากเป็นไปได้ ควรฟื้นฟูคนพิการให้เหมือนคนปกติ

Rationale / Theoretical framework: The biomedical model/perception of disability.

Some citation of literature:

"Within this still dominant biomedical model, disability is conceptualized as 'a physiological or mental deficit,' or negatively valued variation from … 'normal species functioning'. This conceptualization of disability calls for medical / scientific efforts to either prevent such variation or to restore individuals with such impairment … to normal species functioning" (Kirby, 2004: 229).

Meaning: เห็นด้วย (7) = Attitude of pro-biomedical model of disability.

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23. คนพิการควรมีสิทธิ เสรีภาพ ภายใต้กฎหมาย เหมือนคนปกติ

Rationale / Theoretical framework: Civil rights as one type of rights.

Some citation of literature:

"Though modeled exclusively on British experience, Marshall's analysis has had for broader influence in discriminating between the various rights of citizenship. In Marshall's view, the first rights to develop were 'civil rights,' broadly defined as 'rights necessary for individual freedom.' These include freedom of speech, assembly, movement, … the right to equality before the law … and so forth. Civil rights are therefore rights exercised within civil society, and their existence depends upon the establishment of limited government, government that respects the autonomy of the individual" (Heywood, 2004: 207).

Meaning: เห็นด้วย (7) = Attitude of pro-civil rights as one type of disability rights.

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24. คนพิการควรมีสิทธิที่จะมีบทบาททางการเมือง เช่นลงสมัครรับเลือกตั้งเป็นผู้แทนราษฎร เหมือนคนปกติ

Rationale / Theoretical framework: Political rights as one type of rights.

Some citation of literature:

"Second, there are 'political rights' which provide the individual with the opportunity to participate in political life. The central political rights are obviously the right to vote, to stand for election and to hold public office" (Heywood, 2004: 207-208).

(Table 1 continued)

Meaning: เห็นด้วย (7) = Attitude of pro-political rights as one type of disability rights.

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25. คนพิการควรได้รับสิทธิพิเศษในหลาย ๆ เรื่อง มากกว่าคนปกติ จะได้ชดเชยความพิการ

Rationale / Theoretical framework: Social rights / Entitlements / Social citizenship.

Some citation of literature:

"Finally, Marshall identified a range of 'social rights' which guarantee the citizens a minimum social status. These rights … include the right to basic economic welfare, social security … The provision of social rights requires the development of welfare state and an extension of state responsibilities into economic and social life. … The idea of social citizenship arose out of the writing of T. H. Marshall and the emphasis he placed upon social rights. … The distinctive feature of Marshall's work … was the stress it placed upon the relationship between citizenship and the achievement of social equality. … Citizens have to enjoy freedom from poverty, ignorance and despair" (Heywood, 2004: 208, 210).

Meaning: (7) = Attitude of pro-social rights as one type of radical disability rights / Pro-rights of entitlements to public resources.

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26. เหตุผลของการมีสวัสดิการของรัฐแก่คนพิการ เช่นการจัดหางาน เพื่อคนพิการจะได้ช่วยเพิ่มผลผลิตทางเศรษฐกิจแก่ประเทศ

Rationale / Theoretical framework: Economic efficiency as a reason for disability welfare.

Some citation of literature:

"One of the earliest reasons for interest in social welfare had more to do with national efficiency than with principles like justice and equality. When a country's workforce is sickly and undernourished it is in no position to build up a prosperous economy. … [I]n the long run a healthy and productive workforce is beneficial for the whole society" (Heywood, 2004: 307).

Meaning: เห็นด้วย (7) = Attitude of pro-economic efficiency in social welfare.

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27. การขาดสวัสดิการคนพิการ จะทำให้เกิดความแตกแยกในสังคม

Rationale / Theoretical framework: Conservative thinking of disability welfare.

(Table 1 continued)

Some citation of literature:

"Welfare has also been linked to the prospect of social cohesion and national unity. This concern has been close to the heart of conservative thinkers, who have feared that grinding poverty and social deprivation will generate civil unrest. … This [conservative welfare tradition] is undoubtedly concerned to alleviate national hardship, but only to the point where the working masses cease to pose a threat to the prosperous minority" (Heywood, 2004: 307 & 310).

Meaning: เห็นด้วย (7) = Attitude of pro-conservative thinking of disability welfare.

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28. ความพิการ ถือเป็นเรื่องปกติ ธรรมดา ของชีวิตมนุษย์

Rationale / Theoretical framework: Perspective of disability as universal experience.

Some citation of literature:

"An individual's physical and mental health state often fluctuates significantly over a lifetime, as does his or her associated degree of dependency on others. … 'Normal species functioning' … is a very difficult thing to maintain throughout a lifetime. … [M]ost persons will eventually end up disabled to some degrees" (Kirby, 2004: 237).

Meaning: เห็นด้วย (7) = Perception of disability as universal experience / Pro- disability rights.

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29. สิ่งต่าง ๆ ในสังคม เอื้อประโยชน์แก่คนปกติ มากกว่าคนพิการ

Rationale / Theoretical framework: Value domination as a result of the perspective of disability as difference / Cultural imperialism.

Some citation of literature:

"A large percentage of the disabled population meets at least two of Young's sufficient conditions ('faces of oppression') … Two of the most relevant 'faces of oppression' in the disability context are marginalization … and cultural imperialism … On an empirical basis, few would deny that … the cultural representations of the abled majority dominate the sociological landscape" (Kirby, 2004: 234-235).

(Table 1 continued)

Meaning: เห็นด้วย (7) = Perceiving the disabled as being dominated by the non-disabled / Perceiving that the culture of the non-disabled usually prevails over that of the disabled.

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30. ในสังคม มีความรังเกียจคนพิการ

Rationale / Theoretical framework: People with disabilities as victims of hate crimes.

Some citation of literature:

"Hate crimes against disabled people aren't being committed only in low-income, urban areas. … There's hate crimes in the suburbs, too. … There were a husband and wife who both used wheelchairs. They had bought a house and needed to put in a ramp to make it wheelchair-accessible. People in the township came to them and said they didn't want a ramp to be installed because it would interfere with the landscaping. … Some people in the neighborhood got so angry about this that they … said, 'Your kind won't last here'" (Wolfe, 1995: 25).

Meaning: รังเกียจมาก (7) = Existence of social exclusion / Existence of hate crimes.

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31. ในสังคม มีการล้อเลียนคนพิการ

Rationale / Theoretical framework: Hate crimes against people with disabilities.

"The media usually reflects the images of disability as being unpleasant, pathetic, abandoned, and ridiculed by making individuals with disabilities become a laughingstock" (Assistance for people with disabilities: How does Thailand differ from abroad? Translated, 2001: 4).

Meaning: ล้อเลียนมาก (7) = Existence of social exclusion / Not pro-disability rights.

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32. ในสังคม มีการทำร้ายคนพิการ ด้วยเหตุของความรังเกียจ

Rationale / Theoretical framework: Hate crimes against people with disabilities.

Some citation of literature:

"Hostility against the disabled is increasingly common even in public. … 'Move, blind lady,' a man hissed at me as he twisted my arm and grabbed my cane. He threw my cane down the escalator, which was taking me to the subway in Washington, D.C. He spat on me and growled, 'You people belong to concentration camps'" (Wolfe, 1995: 24).

(Table 1 continued)

"[T]he history of discrimination against impaired individuals is shameful and that although the world has come a long way since the Nazi murders of impaired individuals, there is still widespread ignorance and fear of, and hostility toward impaired persons … " (Purdy, 2001: 683).

Meaning: มีมาก (7) = Existence of social exclusion / Existence of hate crimes / Not pro-disability rights.

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33. **ท่านเคยมี หรือมีการติดต่อกับคนพิการ เช่นทำงานร่วมกัน** (Item directed only to the groups of middle class or above and public officials.)

Rationale / Theoretical framework: Contact with the disabled normalizes the relation among the disabled and non-disabled.

Some citation of literature:

"Extensive research has shown that prior experience with people with disabilities in personal and work settings relates positively to attitudes toward this group" (Hernandez, Keys, & Balcazar, 2004: 29).

"The ADA [Americans with Disabilities Act of 1990] may, in the long run, indirectly help to change attitudes by exposing more employers to people with disabilities. However, its direct effect on those who resolutely refuse to comply is likely to be small" (Batavia & Schriner, 2001: 798).

"In terms of the contact effect, American and Taiwanese students with prior contact with people with disabilities expressed more positive attitudes than students with no prior contact with individuals who have disabilities" (Chen, Brodwin, Cardoso, & Chan, 2002: 8).

Meaning: มาก (7) = Having a lot of and/or routine contact with the disabled.

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34. **มีเรื่องอื่น ๆ เช่นการก่อการร้าย มลพิษในสิ่งแวดล้อม ที่ควรได้รับการแก้ไขก่อนเรื่องความพิการ**
Rationale / Theoretical framework: Expending resources on the disability issue / Solution affordability.

(Table 1 continued)

Some citation of literature:

"Sometimes, the costs of solving a problem are almost too much … such as the price associated with cleaning up toxic waste sites in the United States. … In 1980, Congress created the polluter-paid 'Superfund' to clean up the toxic sites. … By 2002, the Superfund was all but depleted, with 70 percent of the originally identified sites still in need of repair. … Congress has been reluctant to move forward." (Gerston, 2004: 28)

"Without a doubt, many strides have been made over the last thirty years, such as improvements in disability legislation and equal access laws, thanks to the work of civil rights advocates. But despite these tremendous advances, disability remains a fringe issue. Of the many social movements that became visible during the sixties and seventies (Civil rights, women's liberation, gay rights, and environmental advocacy, among others) disability movement rarely merit a mention" (Taylor, 2004: 32).

Meaning: เห็นด้วย (7) = Perceiving a high cost of expending resources on the disability issue / No perception of disability as a social problem / No disability issue expansion / Perception of non-affordability in solving the disability problem.

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35. เป็นเรื่องธรรมดา ที่คนพิการจะทำงานร่วมกันกับคนปกติ

Rationale / Theoretical framework: Social integration through work.

Some citation of literature:

"A majority of problems that come with disability in the Americas can, in fact, be mitigated or even eliminated. … Such encouragement is making prevention of disability and the rehabilitation and integration of the disabled less of a luxury and more of a necessary investment in the well-being of the state" (Farrah, 1994: 56).

Meaning: เห็นด้วย (7) = Attitude of pro-social integration at workplace / Pro-disability rights attitude.

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36. เด็กพิการ ควรได้เรียนหนังสือในห้องเรียนเดียวกันกับเด็กปกติ

Rationale / Theoretical framework: Social integration through education-setting / Equal education among disabled and non-disabled children.

(Table 1 continued)

Some citations of literature:

"In principle, disabled children should be in the same classrooms as the non-disabled children, since they must learn how to live with the non-disabled, thereby being well-integrated into society" (Namsiripongpan, Translated, 1996: 120).

"Jamie [with Down Syndrome] is now in his sixth year of school, having entered kindergarten in 1997-1998. … He has learned to read, to do two-and three-digit addition and subtraction" (Berube, 2003: 52).

"And into the third quarter of the 20th century, children with disabilities were excluded by statute and/or practice from the public schools in each of the 50 states. Only in 1975, with the passage of Public Law 94-142, were all children with 'handicaps' (to use the word of that time) assured of a free appropriate public education" (Gartner & Lipsky, 1998: 73).

"Among the often controversial issues faced by children with disabilities and their families and communities is inclusion, also known as mainstreaming. Inclusion allows children with disabilities to receive their education in regular public school programs whenever possible. … Inclusion has been hailed as a sensible and effective way to ensure that children with physical and mental disabilities are afforded full opportunities to learn and to interact with other children. It allows for the integration of these children into the mainstream of society and prepares them to be part of the community. Inclusion also allows other children to view this experience as normal" (DiNitto, 2003: 154).

Meaning: เห็นด้วย (7) = Attitude of pro-social integration through schooling / Pro-disability rights attitude.

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37. **สำหรับคนพิการ การมีชีวิตเป็นโสด น่าจะคล่องตัว มากกว่าที่จะแต่งงาน มีครอบครัว**

Rationale / Theoretical framework: Social integration in personal and social domains.

Some citation of literature:

"For full integration in society, more open attitudes need to exist in all areas, including those of an interpersonal nature. Often, researchers have found that societal attitudes have become more positive in the vocational and educational nature, but not within the personal and social domains. Little research has been conducted to measure societal attitudes toward dating and marriage of

(Table 1 continued)

persons with disabilities. … [A]ttitudes of Americans toward disability varies significantly according to social contexts, with more positive attitudes held toward people with disabilities in work situations than in dating and marriage" (Chen, Brodwin, Cardoso, & Chan, 2002: 5-7).

"Americans ages 21 to 64 with limitations or disabilities are less likely than the general population of the same age to be married, but more likely to be widowed, divorced, separated, or never married" (Freedman, Martin, & Schoeni, 2004: 4).

Meaning: เห็นด้วย (7) = Attitude of not pro-social integration in personal domain / Not pro-disability rights attitude.

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38. เป็นเรื่องธรรมดา ที่คนพิการจะแต่งงาน มีครอบครัวกับคนปกติ

Rationale / Theoretical framework: Social integration in personal and social domains (radical)

Meaning: เห็นด้วย (7) = Radical attitude of pro-social integration in personal domain / radical pro-disability rights attitude.

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39. เหตุผลของการมีสวัสดิการของรัฐแก่คนพิการอย่างพอเพียง เพื่อให้เกิดความเป็นธรรม

Rationale / Theoretical framework: Radical, social democratic argument for welfare as social justice.

Some citation of literature:

" Social democratic theorists … have … linked welfare to the goal of equality, believing it to be a necessary counterweight to the injustices and 'inhumanity' of market capitalism. … The welfare state, according to … socialist view, is a redistributive mechanism: it transfers wealth from rich to poor through a system of welfare benefits and public services, financed by progressive taxation" (Heywood, 2004: 311).

Meaning: เห็นด้วย (7) = Attitude of pro-social welfare as social democratic argument and as social justice / Radical pro-disability rights attitude.

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40. เมื่อมีการตั้งครรภ์ ควรมีการแนะนำให้ตรวจเช็คความผิดปกติของทารก

Rationale / Theoretical framework: Prenatal testing, as anti-disability rights / Multiculturalism / Social exclusion.

(Table 1 continued)

Some citation of literature:

"Why is prenatal testing morally problematic? One reason is that it expresses negative or discriminatory attitudes about both impairments and those who carry them. … The Disability critique emphasizes that burdens [for the disabled] are primarily caused by the social failure to create environments that accommodate a wide range of ability" (Purdy, 2001: 682).

Meaning: เห็นด้วย (7) = Pro-prenatal testing / Not pro-disability rights attitude / Not pro-multiculturalism / Pro-social exclusion attitude.

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41. เมื่อมีการตั้งครรภ์ ควรมีกฎหมายบังคับให้มีการตรวจเช็คความผิดปกติของทารก

Rationale / Theoretical framework: Prenatal testing, as anti-disability rights (radical anti-disabiltiy rights) / Multi-culturalism / Social exclusion.

Meaning: เห็นด้วย (7) = Very pro-prenatal testing / Not pro-disability rights attitude (radical) / Not pro-multiculturalism / Very pro-social exclusion attitude.

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42. หากตรวจพบความพิการของทารกในครรภ์ ควรแนะนำให้ทำแท้ง

Rationale / Theoretical framework: Abortion of deformed fetuses, as anti-disability rights / Multi-culturalism / Social exclusion.

Some citations of literature:

"Prenatal testing and disability rights focus on one of the most contested and difficult issues in disability rights theory, whether it is usually justifiable to abort fetuses expected to be impaired" (Purdy, 2001: 681).

"[W]hy is it that some feminists who oppose aborting a female fetus simply because it is female do not also oppose aborting a fetus, male or female, simply because it tests positive for Down Syndrome? If sexism is wrong, why isn't ableism wrong" (Tong, 1999: 520)?

"Multicultural theorists address the political, social, and cultural issues that arise from the pluralism nature of many modern societies, reflected in growing evidence of communal diversity and identity-related difference. … Multiculturalism not only recognizes the fact of cultural diversity, but also holds that such differences should be respected and publicly affirmed; it practices the politics of

(Table 1 continued)

recognition. … Attempts to reconcile citizenship with cultural diversity have usually focused upon the issue of minority rights … " (Heywood, 2004: 214).

Meaning: เห็นด้วย (7) = Not pro-disability rights attitude (radical) / Not pro-multiculturalism attitude / Very pro-social exclusion.

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43. **หากตรวจพบความพิการของทารกในครรภ์ ควรมีกฎหมายบังคับให้ทำแท้ง**

Rationale / Theoretical framework: Abortion of deformed fetuses, as very anti-disability rights / Multi-culturalism / Social exclusion.

Meaning: เห็นด้วย (7) = Not pro-disability rights attitude (radical) / Not pro-multiculturalism attitude / Very pro-social exclusion.

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44. **คนพิการส่วนใหญ่ ดูแล้วน่าจะมีปัญหาด้านเศรษฐกิจ มากกว่าคนปกติ**

Rationale / Theoretical framework: Inter-relation between disability and poverty / Needs-based theory of justice.

Some citations of literature:

"As a group, people with disabilities appear to be particularly vulnerable financially due to … reduced earning capacity often associated with functional limitations … Based on data from the 1995 Current Population Survey (CPS), 38.3% of working age adults with severe work disabilities (i.e., unable to work due to a disability) live in poverty, compared with 30% of those limited in their ability to work and 10.2% of those not limited in work" (Batavia & Beaulaurier, 2001: 140-142).

"Everyone … is entitled to the realization … of … economic … rights indispensable for his dignity. … Everyone has the right … to security in the event of … disability" (Speth, 1998: 282).

Meaning: เห็นด้วย (7) = Perception of inter-relation between disability and poverty / Perceiving the needs of the disabled / Pro-disability rights attitude.

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45. **คนพิการน่าจะมีค่าใช้จ่ายในการดำรงชีวิตสูงกว่าคนปกติ**

Rationale / Theoretical framework: Inter-relation between disability and extraordinary cost of living / Needs-based theory of justice.

(Table 1 continued)

Some citations of literature:

"[P]eople with disabilities appear to be particularly vulnerable financially due to … the often substantial costs of accommodating [functional] … limitations. … People with disabilities have the same categories of expenses as other people, as well as a few additional categories. These additional expenses may include housing and workplace modifications, special transportation needs, attendant care, interpreter services, reader services … [P]eople with disabilities also tend to have an increased dependence on services also used by non-disabled people such as housekeepers, electricians … because many are less able to engage in self-help activities that are physical in nature" (Batavia & Beaulaurier, 2001: 139, 144).

"The idea that material benefits should be distributed on the basis of need has most commonly been proposed by socialist thinkers, and is sometimes regarded as the socialist theory of justice. … Needs differ from both wants and preferences. A 'need' is a necessity, it demands satisfaction … " (Heywood, 2004: 295).

Meaning: เห็นด้วย (7) = Perception of inter-relation between disability and extra-ordinary cost of living / Perceiving the needs of the disabled / Pro-disability rights attitude.

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46. คนพิการส่วนใหญ่ น่าจะมีปัญหาด้านสุขภาพ มากกว่าคนปกติ

Rationale / Theoretical framework: Inter-relation among disability, health problems, and financial problem / Needs-based theory of justice.

Some citations of literature:

"Due to their disabilities, many of these individuals [with disabilities] have a thinner margin of health than people without disabilities. … Numersous studies demonstrate the high susceptibility of many people with disabilities to major health problems. … First, health problems can substantially affect income. … A major health problem can result in unemployment and/or loss of income. … " (Batavia & Beaulaurier, 2001: 140, 145).

"[A] needs-based theory of justice does not in all cases lead to an equal distribution of resources, because needs … may be unequal. For example, if need is the criterion, the only proper basis for distributing health care is ill-health. The sick should receive a greater proportion of the nation's resources than the healthy, simply because they are sick" (Heywood, 2004: 296).

(Table 1 continued)

"Disability is often associated with one or more specific health conditions or injuries. According to the 2001 National health Interview Survey, the majority of U.S. Children and youth under 18 years with disabilities reported emotional, behavioral, and other development problems as conditions associated with their disabilities" (Freedman, Martin, & Schoeni, 2004: 5).

Meaning: เห็นด้วย (7) = Perception of the inter-relation among disability, health problems, and financial problems / Perceiving the needs of the disabled / Pro-disability rights attitude.

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47. สวัสดิการของรัฐแก่คนพิการ พอเพียงที่จะทำให้คุณภาพชีวิตคนพิการเท่าเทียมกับคนปกติ
Rationale / Theoretical framework: Efficiency and adequacy of disability welfare as social rights.

Some citation of literature:
"In all societies … there are still obstacles preventing persons with disabilities from exercising their rights and freedom. … It is the responsibility of States to take appropriate action to remove such obstacles. … [G]overnments should integrate disability measures, based on laws or regulations aimed at achieving general accessibility – particularly in education. … [G]overnments should actively support opportunities for employment, and take concrete action to open up various sectors of society … to disabled individuals" (Lindqvist, 1995: 3).

Meaning: เห็นด้วย (7) = Perceiving efficiency and adequacy of disability welfare.

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48. ท่านมีโอกาสได้ใช้อุปกรณ์ เพื่อช่วยเหลือความพิการของท่าน (Item directed to only the disabled)
Rationale / Theoretical framework: Access to assistive services / Technological assistance as social rights of people with disabilities.

Some citation of literature:
"Technology is becoming increasingly important in the lives of people with disabilities. … Some technologies – such as automatic teller machines … are not originally designed to overcome disabilities. … Other technologies are used to bridge the gap between an individual's capacity and demands of his or her environment. Such technologies include: mobility devices, … adaptations to cars, computers … The number of devices available in the marketplace for people with disabilities has expanded from 6,000 products only a decade ago to over 29,000 products by 2000" (Freedman, Martin, & Schoeni, 2004: 12).

(Table 1 continued)

Meaning: มีโอกาสมาก (7) = Actual access to assistive services as social rights among the disabled.

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49. คนพิการได้ใช้ชีวิตอย่างมีศักดิ์ศรี เท่าเทียมกับคนปกติในสังคม

Rationale / Theoretical framework: Dignity as disability rights.

Some citations of literature:

"It is the hope among people with disabilities that one day, most would have access to high education, dignity, and equal rights and opportunities to those without disabilities" (Namsiripongpan, Translated, 1996: 121-122).

"Best about Silvers' analysis is her demand that people with disabilities be treated with the same respect and dignity with which non-disabled people are treated. She refuses to view herself (Silvers is a person with disabilities) as a helpless individual or a person to be pitied. Instead, she presents herself as the very vial and successful person. … Silvers reminds her readers that disability is a relative term that applies to everyone in some way or another" (Tong, 1999: 524).

Meaning: เท่าเทียมมาก (7) = Perception of dignity among the disabled.

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50. ท่านได้รับความช่วยเหลือจากใคร หรือหน่วยงานใดมากที่สุด (Item directed only to the group of people with disabilities.)

1. ตนเอง / ครอบครัว / ญาติ / เพื่อน
2. หน่วยงานประเภท มูลนิธิ สมาคม วัด และหน่วยงานการกุศล
3. หน่วยงานของรัฐ เช่น กระทรวงพัฒนาสังคมและความมั่นคงของมนุษย์ โรงพยาบาลของรัฐ

51. ใคร หรือหน่วยงานใด ควรเป็นผู้ช่วยเหลือคนพิการมากที่สุด

1. ตนเอง / ครอบครัว / ญาติ / เพื่อน
2. หน่วยงานประเภท มูลนิธิ สมาคม วัด และหน่วยงานการกุศล
3. หน่วยงานของรัฐ เช่น กระทรวงพัฒนาสังคมและความมั่นคงของมนุษย์ โรงพยาบาลของรัฐ

Rationale / Theoretical framework: Disability as a personal or social problem.

Some citations of literature:

"[In Malaysia and Zimbabwe], [m]ost of the families [with members who have mental illness] found themselves isolated. Despite periodic contacts with a visiting nurse or trips to a clinic, they had little

(Table 1 continued)

involvement with or support from the mental health system. Sources of support are reported [such as religious organizations, family (extended or nuclear), friends, agencies / services]. Despite the prevailing belief that the extended family rallies around a sick or disabled person, it is clear that families relied on support from other family members less often than from religious activities (prayer, meditation …), and only modestly more than support from friends. The notion that families support one another was incompletely observed in this study. … Interestingly, despite the poverty of many of the families, there was little demand fro concrete services, although a small monthly disability grant would be extremely helpful to many. … They wanted services such as are available from social workers in developed countries" (Wintersteen, Wintersteen, & Mupedziswa, 1997: 205-206).

"The high costs of many special accommodations [for people with disabilities] are beyond the financial capacity of most families. … [N]aturally-occurring community supports … , such as churches and social organizations, frequently are not able to accommodate the often-extensive needs of people with disabilities" (Batavia & Beaulaurier, 2001: 151).

"The inadequacies and inequities of the public schemes would not, of course, matter if the private social security mechanisms were strong. Unfortunately, this does not appear to be the case as the market, family, community, and employers are rather weak substitutes for the state in providing social security. Markets when applied to social problems often yield results that are highly inefficient and inequitable. … The effectiveness of family as a social security mechanism in the modern world is even more questionable. There are individuals whose families cannot look after them, either because they do not have one or because the relatives themselves are poor. So leaving the social security function to families simply means that some people will have to go without. At a more fundamental level, it is seriously doubtful if families are capable of shouldering the enormous responsibilities they are being asked to bear" (Ramesh, 1992: 1104-1105).

Meaning: 1 = Perception of disability as a personal problem.

   2 = Middle range -- somewhat personal, somewhat social.

   3 = Perception of disability as a social problem in need of State policy and action.

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52. ในสวัสดิการคนพิการ 2 รูปแบบต่อไปนี้ ท่านคิดว่าอย่างใดเหมาะสมกว่ากัน:
1. คนพิการอาศัยอยู่ที่สถานสงเคราะห์ของรัฐที่ได้มาตรฐานสากล
2. คนพิการอาศัยอยู่ที่บ้าน โดยรัฐมอบเงินสวัสดิการอย่างพอเพียง ให้คนพิการเป็นค่าใช้จ่าย

(Table 1 continued)

Rationale / Theoretical framework: Independent living / Personal assistance service (PAS) vs. Institutional welfare as living arrangements for people with disabilities.

Some citations of literature:

"Conscientious administrators of home health services [for people with disabilities] and other social service programs feel a sense of responsibility to provide the assistance their clients need. … If one were to analyze the various ways people with disabilities meet their needs for personal assistance, four categories of arrangements would emerge: family, paid in-home provider, congregate living, and institutions. The preferability of each of these options can be estimated in terms of cost, … and quality of life for the individual [with disabilities]. … By far the most commonly used option is assistance from family. Parents, spouse, children, or other relatives help as an extension of a natural and socially expected role" (Nosek & Howland, 1993: 791).

"An appropriate welfare system is one which accommodates people with disabilities in their own homes, with family members who can give them love, care, and warmth" (Namsiripongpan, Translated, 1996: 127).

"While the policy debate regarding the relative merits of 'outdoor' or home and community-based support versus 'indoor' or institution-based disability services began with the Industrial Revolution, the modern development of personal assistance programs in the U.S. can be linked to the passage of Titles XIX and XX of the Social Security Act" (Kennedy, 1997: 40-41).

Meaning: 1 = Perception of institutional welfare as appropriate living arrangement for the disabled.

2 = Perception of independent living with PAS as appropriate living arrangement for the disabled.

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53. **อะไรเป็นข้อจำกัดของการปฏิบัติงานด้านสวัสดิการคนพิการบ้าง** (Item directed only to public officials)
1. **ไม่มีข้อจำกัด / การปฏิบัติภารกิจดีแล้ว** 2. **ขาดงบประมาณ** 3. **ขาดกำลังคน** 4. **ขาดองค์ความรู้**
5. **ไม่ทราบ** 6. **อื่น ๆ โปรดระบุ**

(Table 1 continued)

Rationale / Theoretical framework: Adaptability in problem solving / Efficiency & adequacy of disability welfare.

Some citations of literature:

"The Council of Canadians with Disabilities (DCD) says one of the most important social phenomena of the latter half of the 20th century has been the emergence of the Disability Rights Movement. But, it also says governments have been slow to act on implementing a comprehensive disability policy to remove barriers to those with handicaps and include them as equal participants in all aspects of society" ("Pushing doors open," 2003: 24).

"Americans with disabilities continue to lag well behind other Americans in many of the most basic aspects of life. … Large gaps still exist between adults with disabilities and other adults with regard to employment, education, income, frequency of socializing and other basic measures in ten major 'indicator' areas of life" (Batavia & Schriner, 2001: 690).

Meaning: The more limitations indicated, the more non-adaptability in problem solving as well as the more inefficiency and inadequacy.

(Note: Almost all items are uniformly directed to all three samples in the study. There are few items that are posed to only one or two groups, as specified in Table 1.)

Related to Table 1, Table 2 is shown below. It lists all variables in the study. Some of them come directly from individual survey items, while others are composite scores of some items. For the latter, there is a need for a reverse in scaling of the survey items that are combined to become composite scores of variables. The reverse in scaling is for the response options among specific items to go together in the same direction, while forming a composite score of a new variable. Items whose scaling is reversed are specified and indicated in Table 2. Alpha coefficients are reported for variables that are derived from a composite score of items. For the purpose of clarity and as a summary, the meaning of possible scores for each variable is given.

Table 2

List of Variables in Relation to Survey Items and Their Meanings

Variable	Survey items	Meaning
Rights	2, 23, 24, 39	Max (4*7=28) = Pro-disability rights
		Min (4*1=4) = Not pro-disability rights
α = .533		
Radical rights	1, 16, 25	Max (3*7=21) = Pro-radical rights / Social rights
		Min (3*1=3) = Not pro-radical rights
α = .290		
Social problems	7, 8, 9, 10, 12, 13, 4*, 15, 19*, 34*	Max (10*7=70) = Perception of disability as a social problem
		Min (10*1=10) = Perception of disability as a personal problem
α = .571		
Integration/work	35, 36	Max (2*7=14) = Pro-social integration / Pro-rights in work & school settings
		Min (2*1=2) = Not pro-social integration / not pro-rights in work & school settings
α =.73		
Integration/personal	37*, 38	Max (2*7=14) = Pro-social integration / Pro-rights in social & personal domains
		Min (2*1=2) = Not pro-social integration / Not pro-rights in social & personal domains
α = .64		
Inclusion	40*, 41*, 42*, 43*	Max (4*7=28) = Pro-social inclusion / Pro-rights
		Min (4*1=4) = Not pro-social inclusion / Not pro-rights
α = .722		
Hate crimes	30, 31, 32	Max (3*7=21) = Perceiving hate crimes / Non-existence of rights
		Min (3*1=3) = Perceiving no hate crimes/ Existence of rights
α = .85		

(Table 2 continued)

Variable	Survey items	Meaning
Economic problem	44, 45	Max (2*7=14) = Perceiving economic problems among people with disabilities / Non-existence of rights
		Min (2*1=2) = Perceiving no economic problems among people with disabilities / Existence of rights
α = .498		
Health problem	46	Max (7) = perceiving health problems among people / There should be higher disability policy
		Min (1) = Perceiving no health problem among people with disabilities / No disability policy is necessary
State/private	51	Max (3) = Social / public problem
		Min (1) = Private / personal problem
Limitation	3, 4	Max (2*7=14) = Perceiving limitation in daily life among disabled people
		Min (2*1=2) = Perceiving no limitation in daily life among disabled people
α = .381		
Attitude & practice**	5, 6	Max (2*7=14) = Perceiving positive societal attitude and practice toward disabled people
		Min (2*1=2) = Perceiving negative societal attitude and practice toward disabled people
α = .252		
Adequacy & dignity**	47, 48	Max (2*7=14) = Perceiving adequate disability welfare and dignity of disabled people
		Min (2*1=2) = Perceiving inadequate disability welfare
α = .021		and no dignity among disabled people
Desert/justice	20, 21	Max (2*7=14) = Pro-desert
		Min (2*1=2) = Pro-distributive justice
α = .689		
Liberal	11	Max (7) = Perspective of pro-liberal welfare
		Min (1) = Not pro-liberal welfare

(Table 2 continued)

Variable	Survey items	Meaning
Efficiency	26	Max (7) = Pro-economic efficiency perspective on on welfare
		Min (1) = Not pro-economic efficiency perspective on welfare
Conservative	27	Max (7) = Conservative perspective on welfare
		Min (1) = Non-conservative perspective on welfare
Social justice	39	Max (7) = Pro-social justice perspective on welfare
		Min (1) = Not pro-social justice perspective on welfare
Social construction	18	Max (7) = Social construction perspective on disability
		Min (1) = Non-social construction perspective
Biomedical	22	Max (7) = Biomedical perspective on disability
		Min (1) = Non-biomedical perspective on disability
Universal experience	28	Max (7) = Perspective on disability as universal experience
		Min (1) = Not perspective on disability as universal experience
Difference	29	Max (7) = Perspective on disability as difference
		Min (1) = Not perspective on disability as difference
Actual-state/private[D]	50	Max (7) = High disability welfare attainment among people with disabilities
		Min (1) = Low disability welfare attainment
Adaptable[O]	17	Max (7) = Difficulties in implementation of disability welfare / Difficult for disability issue to expand
		Min (1) = No difficulty in implementation of disability welfare / Possible for disability issue to expand
Disability contact[G&O]	33	Max (7) = Having much contact with disabled people
		Min (1) = Having no contact with disabled people
Assistive[D]	48	Max (7) = Having access to assistive technologies / attainment of rights
		Min (1) = No access to assistive technologies / No attainment of rights

(Table 2 continued)

Variable	Survey items	Meaning
Institution/home	52	1 = Pro-institution perspective of disability welfare
		2 = Pro-home care perspective of disability welfare
Implementation problem / Comments & opinion	53***	Areas of implementation problems of disability welfare / Opinion and comments on disability issue and disability Welfare

* Survey items whose scales are reversed.

[O] Variable and survey item applied only to public officials.

[D] Variable and survey item applied only to disabled people.

[G&O] Variable and survey item applied only to the general public and public officials.

** Due to low alpha coefficients from the pretest of survey instrument, single survey items are used instead in the analyses.

*** Item 53 asks the public officials to indicate existing problems or limitations in the implementation of disability welfare. A list of problems / limitations is provided: 1) No problem / no limitation; 2) inadequate funding; 3) Inadequate personnel; 4) Lack of understanding on disability issue; 5) Do not know; 6) Others, please specify. The public officials responding to this item are instructed that they could indicate more than one problem / limitation. In their own words, they could also specify others that they believe to exist. The open-ended answers are compiled and analyzed in supplement to all the closed-ended questions.

Variables shown in Table 2 above enter analyses, as further explained below. These variables reflect perception on the disability issue, disability rights, and disability as a social problem. A few variables, namely Radical rights, Attitude & practice, and Adequacy & dignity, which are derived from a composite score of more than one survey item, have low alpha coefficients. As a result, a low reliability may result if these variables are used as composite scores. Thus, separate survey items are used instead in the analyses. It should be noted that alpha coefficients are valuable and instrumental in suggesting, for instance, that perception on welfare adequacy and dignity of those with disabilities should be examined separately and that the perception on public attitude and societal practice toward disabled people should be considered separately, as well.

Data analyses

Within the research framework and in response to the research objectives and hypotheses, a series of one-way analysis of variance (one-way ANOVA) are pursued as the main analyses, as illustrated in Figure 2. The results suggest differences or similarities on the perceptions regarding disability rights and disability as a social problem among the three samples of interest. Differences in perception indicate some disagreement on the disability welfare issue, supposedly leading to a disparity in the need for welfare as necessity and the actual disability welfare and, in turn, to the disadvantaged condition of people with disabilities. A few chi square tests are used as supplemental analyses involving some variables whose measurements are treated categorically.

Figure 2. Illustration of main analyses using one-way ANOVA.

| | Groups | |
Disabled people	Public officials	General public
n = 100 M (dv) = SD =	n = 95 M (dv) = SD =	n = 100 M (dv) = SD =

(M (dv) & SD = Means and standard deviations of dependent variables or the perception variables from Table 2, which are all listed in Table 3 below.)

Results

General description of the study samples

It is the intention of this research to examine perspective on the disability issue among three groups of people. Ninety-five public officials in the Ministry of Social Development and Human Security in the central administration, Bangkok; one hundred people in the middle class or above; and one hundred disabled people enter the present study as subjects or respondents to the survey used as the data collection method. For the total of 295 respondents across the three samples, 121 are men and 174 are women. Their average age is 35.60 years. One hundred and five people have less than a bachelor's degree, while 157 and 33 people report their education attainment as bachelor's degree and higher than the bachelor's degree, respectively. One hundred and seventy-two people report working in the private sector, which includes both businesses and non-profit, private organizations, where as 123 people work in the public sector or the government. Obviously, the first group comprising officials in the Ministry of Social Development and Human Security fill in most reports of the public sector as their workplace.

Examining more closely the respondents in specific groups yields additional, interesting information of the samples' characteristics. Like most survey research, women tend to be more willing and available to participate in this study. However, among the sample of those with disabilities, there are more male (62) than female (38) respondents. The three groups are somewhat similar in their mean age. For academic attainment in the disability sample, however, 93 people report to have lower than bachelor's degree, whereas 6 and 1 report to have bachelor's and higher than bachelor's degree, respectively. Among the 93 people with less than the bachelor's degree, 24 and 58 report to have elementary and secondary school education, respectively. Also, eight have completed some vocational training, whereas three have no education. With respect to work-related information, most report to be self-employed, such as lottery vending and sewing. Seventeen report to be unemployed, while twenty are still in school. As this study uses the education attainment of bachelor's degree as

the indicator of the middle class status or above and as the criterion for participation in the study within the sample of general public, this particular indicator would categorize almost all respondents in the disability sample to have the social status of less than the middle class. This, by itself, seems to suggest the disadvantaged position among those with disabilities. As the disability literature suggests, people with disabilities have relatively low levels of education, as compared to the general population. In the United States, despite the American with Disabilities Act of 1990, which is considered a civil rights / disability rights legislation providing protection against discrimination, only approximately 30 percent of working-age adults with disabilities are employed full or part-time, compared with 80 percent of adults without disabilities (Batavia & Geaulaurier, 2001: 141; Jeon & Haider-Markel, 2001: 216-217; Freedman, Martin, & Schoeni: 2004: 5). The economic inequality results in the American society between those with and without disabilities. It is natural that the latter would consider such inequality as unjust and demand more equality through income distribution based on needs (Hurst, 1992: 287). In the sample of people in the general public, ninety report to have a bachelor's degree, whereas ten have a master's degree, as only those with at least a bachelor's degree are asked to participate in the study in order to meet the objective and criterion of the general public in the middle class or above. For public officials, 12, 61, and 22 report to have less than a bachelor's degree, a bachelor's degree, and more than a bachelor's degree, respectively.

Perceptions on disability rights and disability as a social problem

Responses from the three groups or samples constitute perception data entering analyses. The main analyses using one-way ANOVA directly respond to the objectives and hypotheses of this study – examining similarities or differences in perception on disability rights and disability as a social problem among the three samples of interest. Therefore a series of ANOVA are pursued with the three samples or groups representing the independent variable and most of the variables specified in Table 2 as dependent variable. As stated above, the variables entering these analyses represent perceptions

on disability rights and disability as a social problem. Table 3 lists means and standard deviations of all the variables with respect to each of the three samples or groups in the study, while ANOVA results for each dependent variable are shown in Table 4.

Table 3

Means and Standard Deviations of All Perception Variables

Variables		Groups		
		Public officials N = 95	General public N = 100	Disabled people N = 100
Rights	M =	23.89	23.70	25.19
	SD =	3.71	3.30	3.37
Right not to work *	M =	4.72	5.38	4.89
	SD =	1.87	1.64	2.24
Distribution by tax *	M =	5.20	5.01	5.37
	SD =	1.45	1.57	1.89
Special rights *	M =	4.07	4.76	5.17
	SD =	1.75	1.74	1.91
Social problem	M =	45.44	43.88	46.67
	SD =	7.09	7.57	7.75
Integration/work	M =	11.82	11.67	13.10
	SD =	2.33	2.54	1.85
Integration/personal	M =	9.76	10.05	10.86
	SD =	2.38	2.56	2.79
Inclusion	M =	10.65	12.79	12.00
	SD =	4.92	5.02	5.03
Hate crime	M =	10.49	9.92	12.99
	SD =	4.05	4.16	3.67
Economic problem	M =	9.97	9.77	10.47
	SD =	2.65	2.75	3.33
Health problem	M =	5.62	5.49	4.56
	SD =	1.43	1.40	2.17
State/private	M =	1.66	1.96	2.78
	SD =	.92	.98	.60

(Table 3 continued)

Variables		Groups		
		Public officials	General public	Disabled people
		N = 95	N = 100	N = 100
Limitation	M =	10.67	11.14	9.77
	SD =	2.84	2.34	3.10
Societal attitude **	M =	5.33	5.47	4.00
	SD =	1.28	1.29	1.72
Societal practice **	M =	4.92	4.95	4.12
	SD =	1.30	1.29	1.27
Welfare adequacy ***	M =	4.33	4.28	3.45
	SD =	1.81	1.75	2.44
Disability dignity ***	M =	4.32	4.09	3.79
	SD =	1.80	1.80	2.05
Desert/justice	M =	6.53	6.97	7.22
	SD =	3.53	3.40	3.93
Liberal	M =	6.54	6.50	6.69
	SD =	.86	.85	.85
Efficiency	M =	5.31	5.57	6.24
	SD =	1.44	1.37	1.17
Conservative	M =	4.07	4.57	4.57
	SD =	1.86	1.71	2.28
Social justice	M =	5.86	5.69	6.27
	SD =	1.20	1.32	1.41
Social construction	M =	6.51	6.37	6.78
	SD =	.85	.95	.81
Biomedical	M =	6.13	6.10	6.00
	SD =	1.26	1.14	1.47
Universal experience	M =	4.52	4.80	5.66
	SD =	1.89	1.86	2.11
Difference	M =	5.66	5.93	6.25
	SD =	1.53	1.37	1.56

* Item that was intended to be included in the composite score of Radical rights. Due to the low alpha coefficient, individual item is examined instead.

(Table 3 continued)

** Item that was intended to be included in the composite score of Attitude & practice. Due to the low alpha coefficient, individual item is examined instead.

*** Item that was intended to be included in the composite score of Adequacy & dignity. Due to the low alpha coefficient, individual item is examined instead.

Table 4

One-way ANOVA Results of the Perception Variables

Variables	Sources of variation	SS	df	MS	F
Rights	Between	130.51	2	65.25	5.45 **
	Within	3497.34	292	11.98	
Right not to work	Between	23.32	2	11.66	3.12 *
	Within	1092.68	292	3.74	
Distribution by tax	Between	6.49	2	3.24	1.19 ns
	Within	797.50	292	2.73	
Special rights	Between	59.57	2	29.79	9.17 **
	Within	948.83	292	3.25	
Social problem	Between	391.00	2	195.50	3.49 *
	Within	16342.10	292	55.97	
Integration/work	Between	122.73	2	61.36	12.05 **
	Within	1487.07	292	5.09	
Integration/personal	Between	64.10	2	32.05	4.79 **
	Within	1954.22	292	6.69	
Inclusion	Between	226.73	2	113.37	4.55 *
	Within	7278.13	292	24.93	
Hate crime	Between	530.64	2	265.32	16.89 **
	Within	4586.10	292	15.71	
Economic problem	Between	25.98	2	12.99	1.51 ns
	Within	2509.53	292	8.59	
Health problem	Between	66.13	2	33.06	11.36 **
	Within	849.99	292	2.91	
State/private	Between	65.80	2	32.90	45.70 **
	Within	210.22	292	.72	

(Table 4 continued)

Variables	Sources of variation	SS	df	MS	F
Limitation	Between	96.93	2	48.46	6.30 **
	Within	2246.63	292	7.69	
Societal attitude	Between	130.57	2	65.28	31.06 **
	Within	613.79	292	2.10	
Societal practice	Between	43.78	2	21.89	13.25 **
	Within	482.64	292	1.65	
Welfare adequacy	Between	48.15	2	24.08	5.86 **
	Within	1199.79	292	4.11	
Disability dignity	Between	13.60	2	6.80	1.91 ns
	Within	1039.31	292	3.56	
Desert/justice	Between	23.95	2	11.98	.91 ns
	Within	3843.75	292	13.16	
Liberal	Between	2.02	2	1.01	1.39 ns
	Within	212.01	292	.73	
Efficiency	Between	45.61	2	22.81	12.88 **
	Within	516.90	292	1.77	
Conservative	Between	15.87	2	7.93	2.05 ns
	Within	1131.50	292	3.88	
Social justice	Between	17.70	2	8.85	5.14 **
	Within	502.32	292	1.72	
Social construction	Between	8.72	2	4.36	5.73 **
	Within	222.22	292	.76	
Biomedical	Between	.88	2	.44	.26 ns
	Within	491.48	292	1.68	
Universal experience	Between	69.83	2	34.92	9.09 **
	Within	1122.17	292	3.84	
Difference	Between	16.86	2	8.43	3.81 *
	Within	646.48	292	2.21	

* $p < .05$.   ** $p < .01$.   ns $p > .05$.

From Table 4, ANOVA results show significant differences among the three groups of interest with respect to most perceptions on disability rights and disability as a social problem. This tends to support the hypotheses presuming such differences. Considering the group means on various perceptions listed in Table 3, Tukey post hoc means comparisons give a clearer picture of means difference – whether or not people with disabilities have more positive views on disability rights and perceive the disability more as a social problem than do public officials and the general public. Also, with additional, related concepts to rights and social problems, Tukey means comparisons further illustrate, for instance, if disabled people perceive themselves as having lower dignity than do the other two groups, hence, suggesting further problems in disability rights. Table 5 shows the analyses of Tukey tests, while rearranging group means from high to low or vice versa, in order to see more clearly how and where the perceptions lie among the groups, as well as the extent of perceptions.

Table 5

Tukey Post Hoc Analyses of Perception Variables with Significant ANOVA Results

Variables	Groups & Means *		
Rights	Disabled people	Public officials	General public
	25.19	23.89	23.70
Right not to work	General public	Disabled people	Public officials
	5.38	4.89	4.72
Special rights	Disabled people	General public	Public officials
	5.17	4.76	4.07
Social problem	Disabled people	Public officials	General public
	46.67	45.44	43.88
Integration/work	Disabled people	Public officials	General public
	13.10	11.82	11.67

(Table 5 continued)

Variables	Groups & Means *		
Integration/personal	Disabled people	General public	Public officials
	10.86	10.05	9.76
Inclusion	General public	Disabled people	Public officials
	12.79	12.00	10.65
Hate crime	Disabled people	Public officials	General public
	12.99	10.49	9.92
Health problem	Disabled people	General public	Public officials
	4.56	5.49	5.62
State/private	Disabled people	General public	Public officials
	2.78	1.96	1.66
Limitation	Disabled people	Public officials	General public
	9.77	10.67	11.14
Societal attitude	Disabled people	Public officials	General public
	4.00	5.33	5.47
Societal practice	Disabled people	Public officials	General public
	4.12	4.92	4.95
Welfare adequacy	Disabled people	General public	Public officials
	3.45	4.28	4.33
Efficiency	Disabled people	General public	Public officials
	6.24	5.57	5.31

(Table 5 continued)

Variables	Groups & Means *		
Social justice	Disabled people 6.27	Public officials 5.86	General public 5.69
Social construction	Disabled people 6.78	Public officials 6.51	General public 6.37
Universal experience	Disabled people 5.66	General public 4.80	Public officials 4.52
Difference	Disabled people 6.25	General public 5.93	Public officials 5.66

* Group means connected by a line do not significantly differ from each other at the .05 level.

One-way ANOVA results and Tukey post hoc analyses in Table 4 and Table 5 tend to support the research hypotheses. They empirically show that in most perception variables, there are statistically significant dissimilarities among the three groups in the way each group views disability rights issue and disability as a social problem. The pattern of variation in perspectives also tends to correspond to the expectation stated in the hypotheses. People with disabilities tend to believe strongly that disability is a rights issue and desire more rights, which are generally possible with public policies offering disability welfare. In particular, they believe strongly, differing from the other two groups, that disability welfare is within the duty of the State, as suggested by the Tukey analysis (variable = State/private). They like to be integrated into society with non-disabled people, not only formally in the work and school settings, but also in the personal domain, especially marriage (variable = Integration/work and Integration/personal, respectively). As the literature on rights suggests, attitude in social integration of people with disabilities are generally more positive in vocational and

educational settings than in personal domains (Chen, Brodwin, Cordoso, & Chan, 2002: 5-7). The perception of those with disabilities, however, is somewhat more positive in work and school integration, as the Tukey analysis indicate a clearer distinction in the perception of disabled people from that of the other two groups within the work domain than in the personal domain. Other related variables also suggest that people with disabilities tend to perceive more problems in the area of disability rights than do the other two groups. Specifically, they tend to perceive a high degree of hate crimes in various forms – loathing, mocking, and harm – inflicted on them. They perceive an inadequacy in the Thai disability welfare policy (variable = Welfare adequacy) as well as unsupportive societal attitude and practice toward them (variables = Societal attitude & Societal practice, respectively). These results indicate a desire among people with disabilities for a stronger disability welfare policy from the State. With respect to perceptions on the disability issue as a social problem, disabled people also score high on this perspective, in which there is a statistically significant difference between them and the general public (variable = Social problem). This latter finding is further supported by the desire among those with disabilities for more State action in the disability welfare (variable = State/private).

While Tukey analyses in Table 5 suggest a pattern that those with disabilities have the strongest desire for more rights and the State's action, the pattern is less clear on the part of the other two groups. On some perception variables, public officials score more positively than the general public on the rights and social problem perspectives, whereas the reverse is true on other variables. In any case, it generally does not matter much as to which of the two groups scores more positively on the perception variables, since the Tukey analyses show non-significant difference between these two in most variables, suggested by the lines connected between these two groups in Table 5. These findings, again, well support the hypotheses that people with disabilities show a more conspicuous desire than the other two groups for disability rights policies and State's attention on the disability issue as a social problem. However, the general similarity in perception between public officials and the general public should be noted.

Public officials, albeit being more directly involved with the disability issue than the general public, do not view the issue more positively in terms of disability rights and disability as a social problem. This is perhaps part of the explanation for mediocre, inefficient, and ineffective disability welfare, as perceived by those with disabilities.

Although most analyses of perception variables are in line with the expectation, few others represent exceptions. Table 4 shows a few non-significant ANOVA results. The perception on progressive taxation for the purpose of income distribution and justice (variable = Distribution by tax) does not appear to be different among the three groups, although people with disabilities still score most positively, according to the means shown in Table 3. As a plausible explanation, this particular variable is intended to be a radical rights perspective, those with disabilities might be rather reluctant to reveal a strong attitude toward it. However, with another radical rights perception – special rights as a compensation for disabilities and disadvantages – there is a statistical difference among the groups, with disabled people having the most positive attitude, as expected (variable = Special rights). Perhaps, people with disabilities disclose their rather radical attitude, as this perception variable does not sound as strong as the perspective on income distribution by tax. In the perception on the economic problem among people with disabilities (variable = Economic problem), the three groups also do not differ significantly from one another, although those with disabilities still score somewhat higher on this variable than the other two groups. Perhaps it is not difficult for people to see economic hardship among those with disabilities (Batavia & Beaulaurier, 2001: 139).

Another kind of unexpected result is when the scores on the perception variables do not confirm with the expected pattern, despite the significant difference among the three groups. There is, however, only one result with such unexpected pattern of perceptions – the right not to work (variable = Right not to work). The general public exhibits the most positive attitude toward this perception variable, which is intended to be another radical rights variable, as it is associated with the social rights theory (Twine, 1994: 20-21). Aside from, perhaps, their reluctance to indicate a positive

non-working attitude, people with disabilities possibly does not view this radical right as positively as expected. Such saying can be confirmed by the findings on other perception variables. With the perception of physical limitation in daily life (variable = Limitation), people with disabilities score the lowest. The same is true for the perception on health problems (variable = Health problem), in that disabled people do not perceive a limitation resulting from their health condition, as compared with the perceptions of the other two groups. Moreover, those with disabilities have a significantly more positive attitude on the economic efficiency reason of disability welfare than the other two groups (variable = Efficiency). With such positive perspective among those with disabilities, they view themselves as useful, ready and equipped to contribute to the societal economic well being, if sufficiently prepared by the disability welfare. These results tend to suggest the belief among people with disabilities that they are better-off working than not working, while benefiting from the disability right not to work.

The analyses of the perception on related concepts to rights and social problems also yield interesting results. The perspective of disability as a social construction (variable = Social construction) is a rather strong rights and social problem perspective, as people with disabilities are viewed as important, while have their own places and culture in a society with cultural diversity – the idea of multiculturalism (Heywood, 2004: 214-217). It is not always the case that disabled people have to be made as similar to those without disabilities, as the biomedical perspective of disability suggests. On the contrary, the society must at times conform to those with disabilities, mostly by altering the social environment to suit them (Kirby, 2004: 231-242). Table 5 reports that people with disabilities reveal more positive attitude on disability as social construction than the other two groups. Perspectives on disability as a universal experience and difference as well as disability welfare as social justice all tend to offer more disability rights through State's policies to people with disabilities. Disabled people score more highly on these perspectives than the general public and public officials (variables = Universal experience, Difference, and Social justice, respectively).

As shown in Table 2, there are a few other variables which, once analyzed alone or with other perception variables, can yield more understanding of the perception on disability rights and disability as a social problem. With respect to the perception on disability as a social problem, the result of one-way ANOVA in Table 4 shows a significant difference among the three groups, suggesting a disparate view on this perspective. Tukey post hoc test in Table 5 further indicates that, while disabled people tend to perceive the disability issue as a social problem requiring the State action, the other two groups, especially the general public, perceive the issue as requiring less concern from the government. According to Cobb and Coughlin (1998: 418), adaptability or administrative feasibility of a policy also helps define an issue as a social problem. However, in the present study, administrative feasibility is a survey item that could be directed only to public official, since it is not applicable to the other two groups. Therefore, this particular survey item, albeit relating to the disability issue's status as a social problem, is not included in the composite score of social problem and the previous analysis using one-way ANOVA. Instead, the perception on administrative feasibility or bureaucratic adaptability of the disability policy (variable = Adaptable) is analyzed separately using chi square, goodness-of-fit test for the response categories of seven. The result is summarized in Table 6

Table 6

Chi square, Goodness-of-Fit Test for Bureaucratic Adaptability (variable = Adaptable)

	Response categories							
	Not adaptable						Adaptable	
	7	6	5	4	3	2	1	
Expected	13.6	13.6	13.6	13.6	13.6	13.6	13.6	
Observed (n)	8	20	33	25	5	2	2	(n = 95)

$$\chi^2 \text{ (df = 6)} = 67.92, p < .01$$

According to Cobb and Coughlin (1998: 418), an issue tends to expand to become a social problem and catch the attention of decision makers when a solution to

the problem exists. Table 6 indicates a high result of chi square, goodness-of-fit test

from the significant difference between the observed and expected counts of individual

survey responses falling into the response categories. The high frequencies or counts

fall in the direction of non-adaptability; therefore, this adds to the perception among

public officials on the disability issue as less of a social problem. In Table 5 that shows

Tukey post hoc test on the social problem perspective (variable = Social problem), while

people with disabilities perceive the disability as a social problem in a higher degree

than do the general public, such difference is not as significant, when comparing the

perception of disabled people with that of the public officials. However, the result of chi

square, goodness-of-fit test in Table 6 shows a higher tendency for the latter to perceive

the issue as less of a social problem. This perhaps further separates the social problem

perspectives of people with disabilities and public officials.

In reference to Table 2, two other variables – Assistive and Actual-state/private –

each came from a single survey item directed to only people with disabilities. The

former examines the extent of access to nowadays' disability assistive technologies,

such as mobility aid, hearing aid, and environmental modification / removal of barriers

(Freedman, Martin, & Schoeni, 2004: 12-13). There are seven response categories in

revealing the extent of access, ranging from "much" (7) to "none" (1). The higher

numbers imply a large extent of access, hence, an acquisition of disability rights. The

latter variable or Actual-state/private assesses sources of general assistance from which

disabled people receive. Three response options or categories are offered for those

with disabilities to indicate the sources: 1) Self / families / relatives / friends; 2)

Foundations / associations / church / other charity organizations; and 3) State, mainly

institutions associated with Ministry of Social Development and Human Security, as well

as public hospitals. These sources are arranged in the order of private sources in the

lower scale to public/State sources in the higher scale. The indication of State sources

(category 3) is interpreted as public in nature, oriented toward caring for social

problems. Organizations such as foundations and churches (category 2) are meant to

be less public in nature, while personal sources (category 1), such as self and family,

are the least public in nature. Again, chi square, goodness-of-fit tests are used to examine the proportions of response in the response categories in both variables. Table 7 and Table 8 illustrate the results.

Table 7

Chi Square, Goodness-of-Fit Test for the Extent of Access to Assistive Technologies among People with Disabilities (variable = Assistive)

	Response categories							
	Much						None	
	7	6	5	4	3	2	1	
Expected	14.3	14.3	14.3	14.3	14.3	14.3	14.3	
Observed (n)	30	12	7	23	6	11	11	(n = 100)
χ^2 (df = 6) = 33.00, p < .01								

Table 8

Chi Square, Goodness-of-Fit Test for the Sources of General Assistance among People with Disabilities

	Response categories		
	Public	Middle range	Private
	State sources (3)	Private sources (2)	Self & personal (1)
Expected	33.3	33.3	33.3
Observed (n)	16	10	74 (n =100)
χ^2 (df = 2) = 74.96, p < .01			

In examining access to assistive technologies, Table 7 indicates a rather impressive extent of accessibility, as responses weigh heavily at the higher end of response categories. This means a fair amount of accessibility to assistive technologies among people with disabilities. The chi square, goodness-of-fit test shows a significant result. One explanation of such high access to technologies is that nowadays, technologies in disability aid have improved, resulting in a large number of disability devices available in the market. Also, the technological assistance includes a variety of

devices, ranging from simple ones, such as walkers and canes to more complex ones, such as special computers and telephones. It also includes alteration of environment and facilities, such as adaptation to cars (Freedman, Martin, & Schoeni, 2004: 12). Given such variety, people with disabilities, therefore, should be able to acquire one or two devices that suit their disability condition. Moreover, certain devices are necessities, in the sense that people with certain extent of disability absolutely need them, such as wheelchairs and other mobility devices. Such access to assistance devices possibly helps increase the perception of dignity among disabled people. As Table 4 indicates through ANOVA, there is no significant difference among the three groups, with respect to the perception of dignity (variable = Disability dignity), although those with disabilities score the lowest among the three groups.

Table 8 shows the actual sources of assistance to those with disabilities. Again the chi square, goodness-of-fit test result reveals a highly significant chi square value, associated with particularly larger weight of responses on self and personal sources of assistance. On the other hand, the other two response categories represent more of public sources of assistance. This indicates that in actuality, people with disabilities rely on themselves, friends, family, and relatives for possible sources of assistance, while the State assistance is empirically shown to be mediocre. Such incidence is not uncommon in many Asian countries with a low development of State welfare, even for those with high needs such as disabled people. In these countries, such factors as indirect, non-progressive tax systems and subordination of social policy to economic policy particularly explain the need to rely on the self, friends, and family for sources of welfare (Yu, 1996: 420; Ramesh, 1992: 1103). Such low level of State assistance notwithstanding, earlier one-way ANOVA and Tukey post hoc test results, shown in Table 4 and Table 5, respectively, clearly indicate the desire for State's provision of disability welfare (variable = State/private). As compared with the other two groups, disabled people perceive that disability welfare ought to be offered by the State. These two findings show a disparity between the actual practice in the disability welfare and the desire among people with disabilities and, hence, their perception of inadequacy in

disability welfare (variable = Welfare adequacy), indicated in one-way ANOVA and Tukey post hoc test results.

While people with disabilities perceive that disability welfare should be provided by the State, they desire to stay at home and, at the same time, to be offered some welfare from the State. This finding derives from the study of perspective on two types of disability welfare – institutional and home-care (variable = Institution/home). This perception variable is cross-examined with the three samples in the present study by using a chi square test of contingency table comprising two variables – Group and Institution/home, in this particular case. Group, as a variable, indicates the variation among the three samples in this study. Within this test, Group is supposed to be the independent variable, while Institution/home becomes the dependent variable, as illustrated in Table 9.

Table 9

Contingency Table of Groups and Perception on Disability Welfare Types and the Chi Square Test Result

| Welfare types | | Groups | | | Total |
		Public officials	General public	Disabled people	
Institution	Expected	19.6	20.7	20.7	61.0
	Observed	18	33	10	61
	% according to groups	18.9%	33.0%	10.0%	20.7%
Home-care	Expected	75.4	79.3	79.3	234.0
	Observed	77	67	90	234
	% according to groups	81.1%	67.0%	90.0%	79.3%
χ^2 (df = 2) = 16.38, p < .01					

The significant result of chi square test of contingency table, as shown in Table 9, suggests a strong relationship between the independent and dependent variables. The three groups of interest in the present study vary in their perception of appropriate types of disability welfare. Within the State institution, the percentages across the three

groups suggest that the general public has the most positive perception on State institution as the appropriate disability welfare. For home-care type of welfare, the percentages across the groups reveal that disabled people perceive this as an appropriate welfare type. But even when considering the perceptions irrespective to any particular group, the "Total" column in Table 9 indicates a much larger percentage (79.3%) of respondent prefer in-home care for people with disabilities to institutional care (20.7%), partially leading to the significant chi square test result. The generally positive perspective toward home care, especially among disabled people, is probably due to the Thai culture, in which the Thai are not familiar with too big a role of institutional provision of care. Both "in-door," institution-based services and "out-door," home and community-based support are Western concepts and technologies of disability welfare policy (Kennedy, 1997: 41). The latter, however, seems to conform more to the Thai way of life than the former, especially in the view of those with disabilities, who are the target group of disability policy. Related to the home-based care is the concept of personal assistance service, which refers to an attendant or care-giver, assisting with activities in daily life of individuals with disabilities at their homes. With the concept of home-based care and personal assistant services, those with disabilities are believed to be living more independently outside institutions that also provide services. Therefore, the notion of independent living among people with disabilities is derived (Nosek & Howland, 1993: 789-790).

Some other relationships between perception variables

In concluding the quantitative analyses of mostly perception variables, simple correlation analyses between pairs of variables could also disclose some interesting findings. In particular, among people without disabilities in the study – public officials and the general public (n_s = 195), previous or routine contact with those with disabilities (variable = Disability contact) tend to be associated with positive attitude on disability rights and the perception of disability as a social problem ($r_{Contact, Right}$ = .16, p < .05; $r_{Contact, Social problem}$ = .27, p < .01; $r_{Contact, Integration/work}$ = .22, p < .01; and $r_{Contact, Hate}$

crime $= .16$, $p <.05$). The significance and direction of correlation suggest that people

tend to have a positive view in social integration of disabled people in work and school

settings. They also tend to sympathize with disabled people and understand their

disadvantaged conditions. People are also open to disability rights policies, which

possibly mitigate problems confronting people with disabilities. The findings, therefore,

tend to suggest that disability rights policies, possibly in the form of more social

integration, should contribute to positive effects. It would be difficult to imagine any

modern societies to have a homogeneous population. There must be a certain degree

of social and cultural diversity, such as the culture of people with disabilities, hence, the

idea of multiculturalism (Heywood, 2004: 214-217). However, it should be noted that

simple correlation analyses do not reveal any significant relationship between the extent

of contact with disabled people and the perception on radical rights, namely the right

not to work, income distribution by tax, and special rights offered to people with

disabilities (variables = Right not to work, Distribution by tax, and Special rights,

respectively). It would be less common for people to be associated with radical rights

perception, as it constitutes an extreme view of disability rights, which is along the line of

social rights concept.

More simple correlation analyses between perception variables yield further

interesting, significant results. First, the perception on disability rights and disability as a

social problem positively relate to each other ($r_{Right, Social problem} = .23$, $p < .01$), in that

those with a positive perspective on disability rights also tend to view disability as a

social problem. Many other significant correlation analyses results indicate strong

relationships between paired variables in expected, reasonable directions. This tends

to suggest that this research has been rather successful in acquiring responses that are

thoroughly pondered. The positive perception on social integration in the personal

domain is also related to the view that the society does not sympathize with disabled

people ($r_{Integration/work, Societal attitude} = -.17$, $p < .01$). The logic behind this significant

relationship could be that more social integration should contribute to more

understanding of disability issue, or vice versa. Pro-State action attitude in the disability

issue is in line with the perception that the society tends not to care for those with disabilities ($r_{\text{State/private, Societal practice}}$ = -.26, p < .01). The State action or disability welfare policies, therefore, should be the source of care. The positive attitude in social integration in non work-related setting goes along with the belief that people with disabilities do not have extraordinary health problem ($r_{\text{Integration/personal, Health problem}}$ = -.15, p < .05). Therefore, with a positive view on the health of disabled people, an integration of people with disabilities into society should not be difficult. The perception of disability welfare inadequacy goes with the support of disability rights ($r_{\text{Welfare adequacy, Right}}$ = -.17, p < .01). The perception of inadequate disability welfare, then, calls for more disability rights policies.

In spite of significant relationships between many paired variables, correlation analyses also yield insignificant findings. In particular, perception variables that constitute radical rights have more difficulty in significantly relating to other variables. Especially the most radical perspective – the right not to work – correlates with very few other variables. Mostly, it correlates with the other two radical rights variables ($r_{\text{Right not to work, Distribution by tax}}$ = .13, p < .05; $r_{\text{Right not to work, Special rights}}$ = .17, p < .01). But it, for instance, does not correlate with the perception on disability rights and disability as a social problem ($r_{\text{Right not to work, Right}}$ = .05, p > .05; and $r_{\text{Right not to work, Social problem}}$ = .08, p > .05, respectively). The other two radical rights variables, probably because they do not sound as radical as the disability right not to work, do correlate with a few other variables. For instance, people who tend to perceive the distribution of income to those with disabilities through tax as fairness also view disability rights positively ($r_{\text{Distribution by tax, Right}}$ = .24, p < .01). Also, the perception on the distributive tax as fairness also goes along with the perception of disability as a social problem ($r_{\text{Distribution by tax, Social problem}}$ =.25, p < .01). For the other radical rights perspective, the attitude of pro-special rights for disabled people does correlate with the pro-rights perspective ($r_{\text{Special right, Right}}$ = .74, p < .01). Thus, the most radical rights perspective seems to be the right not to work, which is so extreme that does not pair

significantly with other perception variables. Even though the perception on the right to work is part of the composite score for rights in general, it is paired with the perception on the right not to work and found statistically insignificant. It is, then, quite fair to suggest at this point that the right not to work, as an extreme, radical rights perception on the disability issue, could have a hard time finding societal support, at least in the Thai society, where State welfare based on social rights (Heywood, 2004: 210; Twine, 1994: 102-103) is not well developed, accepted, and applied. This tends to suggest that radical rights policies, with concrete content and capacity, might still find some obstacles. Future disability policies are more likely be supported by the more general and moderate rights and social problems perspectives.

Aside from qualitative, closed-ended variables discussed thus far, the last survey item (Item 53) calls for more general comments and opinion on disability and disability welfare. For the group of public officials, they are asked to identify problems in the implementation of disability welfare. A list of problems is presented, while they are welcomed to specify others in their own words, if possible. For the latter group, the results comprise 4 counts of "No problem," 76 counts of "inadequate funding," 64 counts of "Lack of understanding the disability welfare," and 3 counts of "Do not know." Therefore, the inadequate funding seems to be the most frequent responses from the group of public officials. Naturally, people with disabilities give more and detailed comments on disability issue and welfare than the other groups, since they are the direct target group of the disability policy. In line with their tendency not to reveal a pro-radical rights attitude, there is much expressed desire for work, vocational training, as well as a somewhat special treatment in regards to job opportunity. Therefore, like their earlier responses in closed-ended questions, those with disabilities express that they could be useful for the society. Their integration into society should not only benefit themselves, but also the society as a whole. Comments from people with disabilities are also more specific than the other two groups. There is some frequent mentioning on disability allowance. A few respondents think that it should be raised from 500 to 1,000 baht per month. People with all disability types frequently mention transportation as the

main obstacle in life and ask for the State action in this particular aspect of disability issue and welfare.

Comments received from the general public and public officials are fewer in number and less specific. This could be interpreted as dissimilar levels of interest in the disability issue among the three groups. It was expected, however, that public officials would exhibit a somewhat more interest in the issue than the general public, due to their general involvement in the welfare policy. The "underdog" principle would confirm the finding that those with disabilities would be most interested in the issue, as compared with the other two groups (Hurst, 1992: 287). But such difference in interest on the issue could lead to disparate perceptions on disability rights and disability as a social problem. All the comments received, along with the results of quantitative analyses, now enter the discussion on the disability issue.

Discussion

The present research is an attitude study – the study of perception among three groups of people on disability rights and disability as a social problem. Other research has also examined attitude on the disability issue. For example, Chen, Brodwin, Cardoso, and Chan (2002) studied attitude on disability regarding dating and marriage of people with disabilities. Such attitude was compared among American, Taiwanese, and Singaporean college students. Hernandez, Keys, and Balcazar (2004) studied attitude on disability rights as endorsed by the Americans with Disabilities Act (ADA) of 1990. There is a comparison of such attitude between people working in the public and private sectors. Like many of earlier studies, such as these two, the present study generally makes an assessment on the attitude as positive and negative in various degrees.

In responding to hypotheses, the main aim of this research has been fulfilled. Thus far, as the above section on research results illustrates, this study has empirically shown that the perception of disabled people on disability rights in general is more positive than that of the general public and public officials involved with social welfare policies. The same pattern of result has been found in perception on disability as a social problem, in that those with disabilities tend to view the issue as a social problem in a higher degree than the other two groups. However, this study makes a distinction between the attitude on disability rights in general and the more radical rights attitude. The difference between the three groups on the latter kind of attitude is less clear.

In addendum to the response to hypotheses, below will be further, detailed discussion on implications of the findings within the framework of this study. The discussion will be based on the main empirical results, while linking these back to political science and public policy theories on rights and social problems and many other related concepts, such as issue definition, income and resource distribution, equity, equality, social justice, collectivism, and public interest. By studying the perception on disability rights and disability as a social problem along with related

concepts, this research makes a comment on the status of the disability issue. The conclusion of the discussion will be a recommendation as to what could be done to the disability issue.

Disability issue definitions and perception on disability rights

In the start, this study is interested in the disability issue, particularly in the perception of those with disabilities themselves. The situation of disability as reflected by Hongladarom (1998, 1999, 2000, & 2002) is that there is a lack of essential elements in the life of people with disabilities, coupling with inefficiency and ineffectiveness of disability welfare policy. At the same time, the general public seems to lack any concern on the disability issue and people with disabilities, although they are living in the same society. Interestingly enough, the disadvantaged situation among those with disabilities, examples of which are given at the Introduction Section of this study, may find commonalities elsewhere, even in the more developed countries, albeit in a lesser degree of severity. In the United States, despite the ADA, according to the 2000 Census, 8.7 million adults and children with disabilities live in poverty. Twenty percent of people with disabilities do not complete high school, compared with ten percent of those without disabilities. Even though the first section of ADA prohibits discrimination against qualified individuals with disabilities in workplaces, only approximately thirty percent of working-age adults with disabilities are employed full or part-time, compared with eighty percent of adults without disabilities. Median earning of people with severe disabilities is about sixty percent of that of people without disabilities (Batavia & Beaulaurier, 2001: 140-142; Freedman, Martin, & Schoeni, 2004: 6; ADA of 1990). In Canada, there are frequent complaints that both the national and local governments have been slow to act on implementing a comprehensive disability policy to remove barriers to those with disabilities and include them as equal participants in all aspects of society (Pushing doors open, 2003: 24). Using the public policy perspective, this research presupposes that the poor disability situation is due to the fact that there are disparate and, perhaps, contradicting perspectives on the disability issue, particularly

on disability rights and disability as a social problem, which becomes the framework of the study.

This research, then, draws on the public policy theory on issue and problem definition. Problem definition is a matter of strategic representation of situations because every description of situation is a portrayal from only one of many points of view (Stone, 2002: 133). According to Kingdon (2003: 168-170), problem definition is important as a determinant of a policy window that may open or close. Disagreements and conflicting views on a problem, albeit common in any democratic society, can delay an issue from reaching the agenda of the State. Blankenau (2001: 45-46) discusses the disagreement on the issue of national health insurance in the United States, in the sense that it is the cost or access issue. Such different views on the issue result in a divided problem stream, in turn, causing the policy window to close. Thus, in the present study, its contribution is to make use of this idea of a divided problem stream by examining similarities and/or differences in the perceptions among the three groups of people on the disability issue.

Issue definition is also important, since how it is defined usually determines the alternative policy solutions proposed. In modern societies, there has been evolution in disability issue definitions from medical, to economic, and finally to sociopolitical. The biomedical perspective emphasizes certain physical limitations and, therefore, attempts to treat those disabilities. The policy implication of this definition is increased expenditures for health care, research, and treatment (Kirby, 2004: 229-230). The economic definition emphasizes a health-related inability or a person's functional limitation on the amount or kind of work that disabled people can perform. Therefore, functional limitations and a lack of adequate work skills are regarded as the main barriers preventing disabled people from engaging in most jobs. Specific policy solutions, then, focus on income stabilization and job training. The new sociopolitical definition or minority / civil rights perspective suggests that disability stems from the failure of a structured social environment to adjust to the need and aspiration of disabled citizens. In this sense, this perspective shifts emphasis from the individual to the

external environment in which those with disabilities may face discrimination. The policy solution, then, is the extension of civil rights to disabled people and the altering of physical and social environment that better meets the need of those with disabilities (Jeon & Haider-Markel, 2001: 216-217). This solution is opposite to that of the medical perspective that attempts to treat those with disabilities so as to better fit the social and physical environment. And it is unlike the economic perspective that also attempts to change the disabled people – their occupational skills, in particular – again, so that they conform more to the society.

Kirby (2004: 231-233) refers to sociopolitical definition of the disability issue as the perspective of disability as a social construction. The disability condition and the extent of disability depend on how the society deals with the disability issue. On a more complicated note, Batavia (1993: 735-736) distinguishes three closely related concepts from one another. Impairment is a loss or abnormality of psychological, physiological, or anatomical structure. Only sometimes does it lead to a disability condition, when it manifests itself in a specific functional limitation. Once such limitation exists, there is a handicap, which is a disadvantage for a given individual, resulting from impairment or limitation that limits or prevents the fulfillment of a role. There is a reason for distinguishing among the three terms, in that impairment does not necessarily have to result in a disability or limitation and handicap or disadvantaged condition. This, then, relates to the social construction model discussed by Kirby (2004), since, in theory, once the social environment is properly adjusted, the disability and handicap could disappear, albeit the existing impairment. For instance, if a person with some kinds of mobility impairment can commute to places, via the public transportation system that is adjusted to suit people with disabilities, both the disability and handicap could theoretically disappear. With the sociopolitical or social construction perspective, much of the disadvantage experienced by people with disabilities is due to inappropriate social arrangement. During the industrialization and urbanization of developed countries, societies were systematically organized to accommodate people without disabilities (Kirby, 2004: 233). Therefore, the biomedical and economic perspectives

comprise the primary attempt to care for the disability issue by fixing the impairment. The sociopolitical perspective is, then, more rights-based, since the disabled people are entitled to an appropriate environment, just as those without disabilities are. According to the empirical result of this study in Table 4 and Table 5, the disabled people have more positive view on both the disability rights and social construction perspective of disability than the general public and public officials, hence, suggesting a disparity in the rights perspectives. In turn, this does not fare very well in the problem stream, discussed by Kingdon (2003: 168-170), due to the divided perspective on disability rights.

The perspective of disability as a social construction is related to the view of disability as difference. The latter makes a distinction between people without disabilities, who constitute the majority and those with disabilities, who are the minority with specific needs, owing to their different physical conditions. In other words, this view has a negative result in stigmatization of disabled people, as well as cultural imperialism and sense of oppression of non-disabled people over those with disabilities. However, such a view can be mitigated by a policy solution of accountable representatives of such minority. Through the democratic process of policy making, those representatives would protect the interest of the minority, while advocating and delivering public policies that lessen the degree of majority domination (Kirby, 2004: 240). According to the empirical result of this study, the disabled people see most social arrangements as more responsive to the need of the non-disabled majority than the disabled minority. The other two groups in this study, on the other hand, view such cultural domination in a lesser degree. Moreover, those with disabilities believe that there exists a high degree of hate crimes, reflecting their perception of oppression by the majority over those with disabilities. The other two groups, on the other hand, tend to perceive the existence of hate crimes in a lesser degree. Even though the perception of disability as difference advocate the policy solution that mitigate the negative effect or domination and oppression, the contradicting perceptions or the divided issue

definitions among the three groups in this study makes it difficult for such solution to form (Kingdon, 2003: 169; Blankenau, 2001: 45-46).

The policy solutions derived from both the perceptions of disability as social construction and as difference strongly involve the rights issue in disability. The concept of multiculturalism advocates the coexistence of the dissimilarities or different groups and culture in one same society. It addresses the political, social, and cultural issues that arise from the pluralistic nature of most modern societies with growing communal diversity, commonly seen in age, social class, and gender or sexuality. As Freedman, Martin, and Schoeni (2004: 19) state, the increase in life expectancy translates into an increase in ill health and disability, making the sheer number of people with disabilities to rise. The disabled people, then, constitute a group with its own distinct culture. Multiculturalism not only recognizes the cultural diversity, but also holds that such difference should be respected and publicly affirmed. It practices the politics of recognition, with identity politics and politics of difference as related terms (Heywood, 2004: 46 & 214). Social cleavage becomes another term used to distinguish one culture from another culture in a diverse society. Marxists view the social cleavage between the bourgeoisie and the proletariat as two distinct classes in a society in a negative way, due to the oppression of the former over the latter (Heywood, 2004: 47). This is similar to the domination of non-disabled people over those with disabilities, empirically suggested by the perception of hate crimes among disabled people.

Prenatal testing for deformed fetuses also relates, negatively however, to the concept of multiculturalism. The testing followed by an abortion is against the concept of cultural diversity, in that they suggest a discriminatory attitude against both impairments and those who carry them. They also imply an intolerance of diversity as well as a social intention not to create environments that accommodate a wide range of ability. As stated earlier, some people with certain impairments might not face any disability and handicap, with proper adjustment of the social environment (Batavia, 1993: 736). Opponents of prenatal testing would suggest that the burden confronting the impairment is simply part of a life, not the whole (Purdy, 2001: 683). On the other

hand, the advocacy of prenatal testing and abortion is derived in part by the feminist perspective, which advocates choices of pregnant women. According to the feminist perspective, prenatal testing followed by an abortion should not be considered selfish on the women's part, since it is usually the women, rather than men, who care for disabled children. In so doing, they typically give up not only their professional careers, but also their personal pleasure (Tong: 1999: 527). Therefore, women should have a choice as to what they want to do. In the present study, the general public constitutes the group that votes against prenatal testing the most, followed by people with disabilities, albeit negligible difference between these two groups. But in any case, this suggests that people with disabilities are not totally against prenatal testing, hence, moving away from the idea of cultural diversity. This is probably because such testing is mostly part of prenatal care nowadays. And as stated earlier, they tend to sense hate crimes inflicted upon them. In addition, in another part of empirical finding of the present study, people with disabilities tend to perceive that the society has little regard on those with disabilities. As Purdy (2001: 685) also says, all good parents like to ensure that their children receive good care, when they cannot be present. Some impaired children might need such care from skilled nursing for their whole life. Therefore, it might be hard for some of those with disabilities to reject the idea of prenatal testing and even abortion in case of fetal deformity.

In other aspects of their relation to the society, people with disabilities reveal positive attitude on their integration into a community or a society as full members. One core feature of a social member constitutes the right to participate in the affairs and activities of a society or community (Stone, 2002: 18-19). The empirical result of this study shows that disabled people perceive that they could well engage in work and school along with other non-disabled people and children. They also perceive that they could well engage in other personal and social domains, particularly dating and marriage. The general public and public officials reveal a much less positive view on such integration. The difference in perspective, then, adversely affects the disability rights policies in social integration and inclusion, in particular.

A part of empirical finding in this study tends to indicate that frequent or routine contact between people with and without disabilities leads to some positive results, with respect to the idea of multiculturalism. For example, such contact tends to go along with positive view on disability rights and an acceptance of people with disabilities into society. The contact also tends to instigate the perception of disability as a social problem as well as more understanding about the disability condition. These findings, which can be found toward the end of the Result Section, tend to suggest that the concepts of multiculturalism and cultural diversity are rather reasonable.

As this study intends to apply various theories on rights to the disability issue, the radical rights are, therefore, distinguished from the general rights. The latter kind of rights has been discussed above, such as the right to engage in usual activities of a society such as work, school, and marriage. The radical rights are strongly associated with social rights which are solid, in the sense that they allow disabled people access to social resources. Such access is usually known as income distribution of various forms. Social rights are directly related to the concept of social citizenship. As citizens or members of a society, they are guaranteed freedom from poverty, ignorance, and despair (Heywood, 204: 210). As discussed earlier that disability is usually connected to poverty, disadvantage, and despair (Batavia & Beaulaurier, 2001: 142-143; Freedman, Martin, & Schoeni, 2004: 8), those with disabilities should somehow be protected from such ordeals. Twine (1994: 104) also discusses social rights as entitlement to material resources, particularly in health and education. As persons with disabilities, social rights should protect their labor from being treated as things. Hence, he develops the concept of decommodification of labor. Especially when people are sick, retired, and disabled, social rights should protect them from having to sell their labor as a commodity. Such decommodification of labor is usually part of a system of welfare (Twine, 1994: 19). The notion of market failure could provide a basic rationale for the decommodification of labor. The failure of the market is due to the fact that by itself, it has no mechanism to distinguish the labor of people with disabilities from that of non-disabled people (Theodoulou & Kofinis, 2004: 10-11). Welfare policies, then, are to

correct such failure. Taylor (2004: 30-44) raises the idea of the right not to work, which is definitely a radical form of rights. Due to disabled people's physical condition, applying the standard of those without disabilities, which is the ability to produce certain work results, to people with disabilities would be considered unfair.

In applying these concepts related to radical rights, this study examines attitude on the disability right not to work. Surprisingly, people with disabilities do not score the highest or do not reveal the most positive perception on this kind of disability rights. Instead, the general public ranks the highest with respect to this perception, followed by those with disabilities and public officials, respectively. Taylor (2004: 30-31) would explain such finding as non-working guilt, which is common among people with disabilities. In other words, it would be hard even for those with disabilities, to be used to the idea of the right not to work as well as the decommodification of labor. Taylor might also explain the finding that those with disabilities would feel ashamed to reveal a highly positive attitude on such radical right. The comments and opinion perceived from disabled people seem to confirm the quantitative analysis and finding. Those with disabilities frequently mention the strong intention to work and request that the State help them find the jobs. In Taylor's line of thought, then, the society is used to applying the standard of the non-disabled people to those with disabilities. Other empirical findings in this study further support the finding on this radical right. Although the disability generally suggest a poor health condition among people with disabilities (Freedman, Martin, & Schoeni, 2004: 9; Batavia & Beaulaurier, 2001: 145-146), the group with disabilities in this study reports the lowest rating of their health problem, compared to the other two groups. They also score the lowest on the perception of limitation in daily life. In addition, this group has the highest score on the efficiency perspective of disability welfare. People with disabilities tend to view that the disability welfare, such as vocational training and job placement could help them contribute to the productivity of the nation. These empirical findings seem to suggest the belief among disabled people that they confront much less limitation than non-disabled people might

imagine. And with little or no limitation, they are ready to be at workplaces, if only they are provided with some opportunities, namely vocational training and job placement.

Many other ideas and concepts help support the social rights concept. The primary rationale for social rights is justice based on access to social resources. Since equality can partially lead to justice, the social rights policy is needed, as it helps provide equality, as the end result by certain means of resource distribution (Theodoulou & Kofinis, 2004: 15). Therefore, the social rights involve with justice under the principle of equality in the distribution of social resources. Under this principle, people in a society should not be different in their acquisition of social resources, hence, implying equality in distribution. However, since not everyone has the same need and condition, resources should be distributed unequally in order to achieve equality at the end (Hurst, 1992: 289-290). People with disabilities usually have higher needs, mostly due to higher expenses on health care; assistive technologies; alteration of environment, such as home adaptation; other alteration, especially transportation and communication; personal assistance services; as well as adaptation to jobs and rearrangements of job placements (Winter & Williams, 2001: 676-677; ADA of 1990; Freedman, Martin, & Schoeni, 2004: 6-12; Batavia & Beaulaurier, 2001: 142-144; Colbridge, 2002: 27-30). Thus, in order for disabled and non-disabled people to be equal, the latter must have more access to social resources than the former. In this way, the end result of equality can be achieved by equity in distribution. Stone (2002: 45-46) discusses various rationales and means of equitable resource distribution. The claim for group-based distribution holds that some divisions or groups deserve more resources, as preferential treatments, generally for the purpose of compensation for disadvantages and deprivation confronting such groups. In the United States, an affirmative action policy in education, for example, gives a preferential treatment to African American school children by way of an early start in schooling or other special education programs. Usually, the preferential treatments relate back to needs for the necessities in life, hence, entitling certain groups to special rights (Heywood, 2004: 213-214; Theodoulou & Kofinis, 2004, 13-14). Obviously, extra needs for the necessities provide the rationale

for the preferential treatment and special rights, which are definitely social rights, considering their relation to the use of distribution of social resources. Rawls, as one major advocate of the principle of equality in resource distribution, maintains that disadvantaged people in society must always be included in all distribution consideration (Hurst, 1992: 290).

Additional perceptions on radical rights, which directly relate to social rights, are shown in Table 4 and Table 5. With respect to the perception on income distribution by the system of tax, there is no difference among the three groups, although a highly favorable attitude is expected from those with disabilities. For the perspective on special rights given to people with disabilities, the result shows a significantly positive attitude among disabled people, while the other two groups, especially the public officials, reveal less favorable attitude. The perspective on the right not to work is considered by this study as most concrete in delivering the disability welfare result. However, the empirical result of this study tends to show that the radical nature of such perception possibly makes it difficult for the policy target group to reveal a favorable attitude and press a demand on the related policy solution. However, with respect to another perception on social rights, the disability welfare policy, people with disabilities show a highly positive attitude on the State as the most appropriate source for disability welfare, in comparison to private sources such as friends, family, foundations, and other charitable organizations. The other two groups, on the other hand, both reveal a significantly less positive attitude on the State as the major source for disability welfare.

To summarize, the empirical findings have shown rather disparate disability issue definitions. People with disabilities reveal the most positive view on the disability as a rights issue, as compared with the other two non-disabled groups. As shown in Table 5, the perception of disabled people on disability rights and other related concepts, such as social integration and disability welfare, seems to be clearly distinguished from the other two groups, whose perceptions on those issues tend not to separate very much from each other. Public officials should generally be more related to the welfare issue than the general public; however, they do not reveal any more

positive attitude on disability rights. This could adversely affect the delivery of welfare services, while partially explaining the inadequacy, inefficiency, and ineffectiveness of disability welfare policy. As Van Meter and Van Horn (1975: 472-473) suggest, the dispositions of people implementing policies, such as their value system and sense of self interest could very well affect the policy performance.

Issue status of disability as personal / private or social / public problem

Earlier, this study discusses the various definitions of the disability issue. The debate and disagreement could continue with the disability issue as a social or personal problem. In order for it to compete with other issues within the purview of the State, Jeon and Haider-Markel (2001: 216-217) argue that the definition of disability as a rights issue is to be credited for the policy change, resulting in ADA of 1990. By the same token, the perspective on disability as a personal or social problem goes through the same kind of debate, argument, and disagreement. Chambers and Wedel (2005: 8) state that, "Understanding a social problem is not quite the same thing as understanding the truth of 'how things really are.' It is not quite the same thing as understanding how highways are built or trees grow. To understand a social problem is to understand how and what another person (or group) thinks and believes about the social events being defined as a problem." Therefore, a social problem is usually seen and understood through various perspectives; it is not something that readily receives a full agreement. The discussion, therefore, turns to the social problem perspective of disability. Such perception is important and instrumental in terms of public policy, since the State policy respond to social problems, not personal problems. Thus, only when disability is perceived as a social problem will there be a policy response to it.

Theories on social problems perspectives abound. One of the main factors determining a social problem status is the sheer number of people affected (Chambers & Wedel, 2005: 7. Along that line of logic, the expansion of an issue to catch the attention of the larger public also has a positive effect in social problem status. Thus, many theories base their discussion on the dynamic of issue expansion as a primary

step in public policy formation. The expansion of an issue, usually facilitated by the media attention and news making, in turn, catches the attention of policy makers. The attention and interest of policy makers on a particular issue is, by all means, essential as they constitute the main and formal players in the policy making process. An issue that receives a high attention from policy makers also tends to secure the government agenda status (Kraft & Furlong, 2004: 80).

Even if the number of individuals affected by a problem well determines the social problem status, other factors matter as well in inciting issue expansion. For example, problem severity, the crisis status of a problem, as well as available and acceptable solution to a problem also lead to issue expansion (Cobb & Coughlin, 1998: 416-417). Moreover, problems with long term consequence as well as the cost factor, both the cost of problem neglect and problem solving, all determine the public's attention or disinterest on the issue (Gerston, 2004: 22-27; Cobb & Elder, 1983: 112-123). The detailed discussion on factors instigating issue expansion is in the literature review of this study. In the empirical assessment of perception on disability as a social problem, the present study uses the crucial factors as described in the social problems literature that can be well applied to people's perception, as explained in the Procedure Section of this study. The analysis result suggests that people with disabilities tend to view disability more as a social problem than do the other two groups. Especially the perception of those with disabilities and the general public can be clearly distinguished, in that the latter group tends to perceive the issue as less of a social problem. Again, such divided perception on the social problem status suggests a difficulty for the disability issue to be on the State agenda (Kingdon, 2003: 166-167; Blankenau, 2001: 45-46). Viewing the issue as a social problem, those with disabilities would like the State policies to care for it. On the other hand, the general public does not have as strong a perception on the issue as a social problem. Such difference in perception creates a dilemma on the part of the State, possibly leading to a slow down in State action. Such delay is confirmed by another empirical finding of this study, while examining the sources of general assistance received by disabled people, illustrated in Table 8.

Seventy-four percent of those with disabilities receive assistance from personal sources, such as friends, family, and relatives. Only sixteen percent indicate the State as the main source providing the assistance. This is despite the fact that those with disabilities tend to view the disability issue as a social problem, suitable for the State to take action.

Social problems and public interest

In public policy terms, the State or government has a function in caring for social problems. The main reason for the State role is that social problems affect the public, not one particular individual. The prevalence of a problem usually determines the social problem status (Chambers & Wedel, 2005: 7; Gerston, 2004: 22). For such issues as national security and environmental pollution, the nature of social problem can be easily determined, simply by assessing the number of people affected. But for other issues, such determination might not be as simple. Even the issue of cigarette smoking might not be as readily distinguishable as a social problem as some might imagine. Until the last few decades, most levels of government in the United States had perceived the issue as, at best, a personal vice that did not warrant specific regulation by the State. However, as there has been an increase in public costs in treating illnesses known to have resulted from smoking, many governments' position on this issue has changed considerably, such as regulating the selling and packaging as well as restricting smoking in certain public areas (Theodoulou & Kofinis, 2004: 10-11). The public interest is another public policy concept that provides a rationale for government intervention. In General, the State intervenes in order to generate a greater good for a society, which constitute the public interest (Stone, 2002: 21). At other times, the State intervention is necessary in case of commons problems – situations where there are conflicts among individuals' interest or when individuals inflict harm both intentionally and unintentionally on the society as a whole (Stone, 2002: 21-23).

In applying the concepts of social problems and public interest to the issue of disability, it might not be unreasonable to invite State intervention. The living proof would be public laws in various states that deal with the issue – ADA of 1990 in the

United States; the Disability Rehabilitation Act of 1991 in Thailand, along with its related provisions; Article 55 of the rescinded 1997 Thai Constitution; and Article 53 of the 2007 Draft of Thai Constitution, for instance. One particular State function and responsibility in response to essential public purposes is supporting persons who are unable to care for themselves, such as those with certain kinds and extent of disability (Johnson, 2004: 5). However, the disadvantaged condition among those with disabilities still exists, as described in Hongladarom (1998, 1999, 2000, & 2002); Batavia (2001); and freedman, Martin, and Schoeni (2004). Perhaps, theories on social problems and public interest could help explain it.

More specifically, the nature of public interest within the disability issue could be considered. First, most disabilities are not contagious, unlike some illnesses that can spread throughout the society. The nature of prevalence or scope of the problem is, then, not large in most of the times (Cobb & Coughlin, 1998: 417), as most disabilities do not spread from those with disabilities to those without disabilities. Second, according to Chambers and Wedel (2005: 18-19), there are always ideologies and values embedded in all social problems. In the present study, the idea of rights and other related concepts, such as equity, equality, and radical rights, possibly shape the perception on the disability issue. Also, the perception on disability as a social problem, in itself, should also be considered as another ideology involved with the issue. The empirical result of this study shows a disagreement in the value regarding disability as a social problem. Particularly the general public tends to perceive the issue as a lesser degree of a social problem than do disabled people. Again the divided perception causes a slow down in State action, as suggested by Kindon (2003) and Blakenau (2001). Third, Chambers and Wedel (2005: 20-22) raise the issue of gainers and losers in social problems. Losers in a social problem bear the cost of an existing problem. The cost, however, is not shared equally among people in a society. In the disability issue as a social problem, those with disabilities tend to face high expenses in life, such as medical expenses and high transportation cost, while also having difficulty finding and adapting to jobs (Comments to the open-ended question (survey item); Batavia &

Beaulaurier, 2001: 140-143). People without disabilities, on the other hand, generally do not have to confront such costs. Not only that, but those without disabilities also somewhat benefit from the existing disability problem. The disability welfare policies, constituting the general response to the disability problem, are usually considered a redistributive policy. It generally takes resources from the non-disabled people and redistributes them to those with disabilities, mostly due to social rights / special rights reason (Ripley & Franklin, 1986: 178). On the contrary, without such policies or little extent of policies in most non-welfare states, such resources for the purpose of redistribution are not taken from them. Fourth, the concept of public interest would justify State action whenever it can uphold a common goal or consensus as well as the general benefit for the whole society (Stone, 2002: 21). In the disability issue, most of the times, the empirical findings of the present research suggest distinguishable perceptions among the three groups in the study, hence, indicating a general lack of consensus on the disability rights and disability as a social problem. Fifth, another notion of public interest refers to the things that benefit the society as a whole (Stone, 2002: 21). There could be some debate and disagreement on such societal benefit in the State action on the disability issue and policy. By nature, the issue and policy seem to incorporate a particularly narrow or limited scope of societal interest, since people with disabilities constitute a minority population, hence, a low level of prevalence. Therefore, this study is trying to make a point on the particular nature of disability issue and policy regarding their relation to the public interest, which could possibly explain the delay in a stronger State action. In turn, the disadvantaged condition among disabled people persists.

Society / Collectivism / Cooperation vs. Individualism / Self-reliance / Competition

The concept of public interest relates to the notion of collectivism, which is to be distinguished from the idea of individualism. The consideration of these additional ideas and concepts could lead to further understanding of the disability issue – the disability rights and disability as a social problem. The idea of collectivism closely relates to the

concept of society. Both show a preference for community action, rather than self-striving individuals. Even though some individuals are resilient and independent, most of the times, human existence outside society is unthinkable. At heart, collectivism stresses the capacity of human beings for collective action, emphasizing their willingness and capacity to pursue goals by coexisting together, rather than striving for personal self-interest. This is in contrast to the concept of individualism, which extols the intrinsic value of the individual, emphasizing the value, worth, and property of individuals in being self-reliant. While collectivism operates under the socialist philosophy, individualism is rooted in liberalism and libertarianism. The distinct and separate values within the two concepts have further implications. Since individualism values personal worth and self-reliance, it also places a high value on competition and ability to compete, leading to further acceptance of capitalism and laissez-faire economic doctrines. Collectivism, by its nature, not only puts a high value on cooperation, but also sees it as a necessity. By cooperating among individuals in societal affairs, a greater good or social benefit will result (Heywood, 2004: 23-45).

There has been a discussion in this study on multiculturalism and social cleavage in most modern societies. The culture of disabled people and that of those without disabilities may be part of such cleavage. The distinction between collectivism / cooperation and individualism / competition might further explain the disparate perceptions on disability rights and disability as a social problem. With the acceptance of the idea of competition, the sale of labor power in the market is also accepted and welcomed. Within the disability issue, these ideas are rejected by Twine (1994) and Taylor (2004), since they both believe in social rights of citizenship, decommodification of labor, and the right not to work. They would see the free competition between people with and without disabilities as unfair. On the other hand, cooperation is relates more to the collectivist idea, suggesting a more just society. Taylor (2004: 35) and Watson (1993: 758-759) also discuss the concept of interdependence, which means that people of all groups in the society, including those with and without disabilities, depend on one another. In fact, prior to the notion of interdependence, there has been a series of

development in the social cleavage of disabled and non-disabled people. It was first assumed that the former depended on the latter, usually through both resource distribution and charity. Then, those with disabilities tried to live more independently, by way of rehabilitation, personal assistance services, assistive technologies, as well as environment alteration to suit their needs. The idea of interdependence develops with the recognition that the disabled people do not necessarily always need to be independent. There is certain boundary beyond which both physical disabilities and social environment cannot be fixed or altered (Watson, 1993: 758). At times, people with disabilities still need to depend on those without disabilities. But at other times, the direction of dependence could be the reverse.

The empirical findings in this study, however, would suggest that there might not necessarily be an agreement on the notion of interdependence between those with and without disabilities. Even nowadays, that is still rather too ideal a situation. The general public, in particular, tends to perceive limitation and health problems among those with disabilities, while disabled people perceive a much lesser degree of limitation and health problem among themselves. Disabled people also perceive more hate crimes but less supportive attitude and practice toward them than do the non-disabled groups. Those without disabilities also have a less positive view than disabled people on disability as a universal experience, which suggests the fact that most people would be disabled at some points in their life. The one common perception among people with and without disabilities is the conservative perspective on disability welfare, stating that the lack of disability welfare would possibly lead to social disunity. Yet, the average score on this perspective among the three groups are not at all very high, as indicated in Table 3. Within the discussion of collectivism / cooperation and individualism / competition, these concepts are abstract and value-laden, suggesting that people are often biased against one or the other. And everybody, disabled or not, is entitled to have his or her own opinion. However, according to various empirical results of this study, non-disabled people tend to perceive limitation among those with disabilities. It would be improbable for them to have a very positive perception on the notion of

cooperation or interdependence between people with and without disabilities. Therefore, a more realistic view on the evolution of the disability issue could be for those with disabilities to be independent, rather than dependent. And it probably would take a much longer time before the interdependence between people with and without disabilities can come into being. Before hand, there must be a change in perception of non-disabled people to be more accepting and welcoming those with disabilities.

Actual limitation of disability welfare or discriminatory attitude and practice

In a country with mediocre welfare policy like Thailand, a reflection on the perception of the target group would indicate both inadequate and inefficient social welfare policy. The empirical result of this study shows that the disabled people perceive the disability welfare to be inadequate. The Thai disability literature describes those with disabilities to lack essential elements in life, while portraying the disability welfare policy as inefficient and ineffective (e.g., Hongladarom, 1998, 1999, 2000 & 2002). In terms of the welfare effort, yearly budget allocations to Ministry of Social Development and Human Security from fiscal years 2004 to 2007 are .3%, .4%, .4%, and .6%, respectively, of the total budget allocations to all ministries (The Bureau of the Budget, 2005: 77; 2007: 69). In applying the public policy theory of problem definition, this research states that a more congruence in perception among social members, direct target group or not, on disability rights and disability as a social problem would lead to stronger disability welfare policies, with more emphasis on the rights issue (Blankenau, 2001: 45; Kingdon, 2003: 166-167; Jeon & Haider-Markel, 2001: 215-216). Given the stronger State action, the disadvantaged condition among those with disabilities should at least ameliorate.

There is a notion of discrimination in both the attitude and practice toward people with disabilities. Since it is strongly related to disability rights, many variables in this study involve discriminatory attitude and practice. For example, the perspective on integration of disabled people in the work and school settings, physical limitation of those with disabilities, and hate crimes toward disabled people are all perspectives on

discrimination against people with disabilities. This study empirically shows that people with disabilities do feel the discrimination against them through their perception on hate crimes, for example. Authors in the disability literature who are themselves disabled people, such as Hongladarom (1998, 1999, 2000 & 2002), and Taylor (2004), describe many times that they feel the discrimination against them. Taylor (2004: 42-44) states that every school to which she has applied has discriminated against her, in spite of the ADA of 1990. Even progressive institutions and people have discriminated against her more times that she can count. People with disabilities usually face a hard time competing for jobs. It is, therefore, not very difficult to imagine frequent discrimination against people with disabilities in societies with social cleavages. Nevertheless, the concept of discrimination is again value-laden, always depending on perception. Even the present study, as stated throughout, is an attitude study; the results of the research comprise analyses of perception as reported by the three groups of interest.

More concrete than the concept of discrimination is what is actually happening to the disability issue and policy. For example, the ADA of 1990 has a provision on access to public transportation among people with disabilities. Certain alteration and adjustment in public modes of transportation, such as buses, must be made in order for such access to be possible. Also, another provision is on the employment issue, requiring employers to make arrangements including workplace alteration and job / position rearrangement for employees with disabilities, if the cost of such arrangements is not excessive (Percy, 2001: 639). Therefore, the cost issue is concrete, in that the actual number could be assessed. There are other services to those with disabilities, such as personal assistance services, assistive technologies, as well as alteration of public places for access among those with disabilities. Again, the cost involved in these services can be observed.

This study, then, is raising a point of distinction between the discrimination against people with disabilities and the actual happening in the disability issue and policy. The actual happening usually refers to difficulty and constraints that confront the disability issue and policy, mostly involving costs and implementation problem. For

instance, the social construction / sociopolitical perspective as discussed by Kirby (2004: 231-242) and Jeon & Haider-Markel (2001: 216-217) proposes the disability policy solution of adjusting the social environment to suit the need of those with disabilities, as this perspective is very much based on disability rights. But in practice, the actual cost in arranging social environment, workplaces, as well as transportation in order to accommodate disabled people could be so substantial that such policies might never be translated into full action. As a comparison, the solution of repairing the impairments as proposed by the biomedical perspective might be more realistic and achievable. Such cost comparison is by the logic of fixing the many to fit the few, in the former perspective, whereas fixing the few to fit the many, in the latter perspective. However, since the latter perspective is based on the disability rights in a lesser degree than the social construction perspective, its proposed solution might be perceived as a discrimination against disabled people, while not welcoming and integrating the disability culture in to a society with social cleavages (Heywood, 2004: 45-46 & 215-217).

Therefore, the discrimination, which is based on perception, and the actual happening should, then, be considered, compared, and weighed simultaneously. But such consideration and comparison might not be very simplistic, mostly due to the nature of discrimination, which is perception-oriented. Put another way, a discrimination act, while affecting the disability rights, might not be simple to prove. For the ADA of 1990, for instance, it actually does not create a statutory preference for people with disabilities. An employer is not required to hire an unqualified disabled person. He / she does not even have to hire a less qualified disabled person, if a more qualified non-disabled person is competing for the same position. The purpose of the ADA is actually to ensure that those with disabilities receive the same employment opportunities as those with disabilities, not to give them an advantage (Colbridge, 2000: 27). "How many employers who do not otherwise wish to hire a person who is blind or deaf or brain-injured will do so solely due to the ADA? It is easy enough for an employer simply to

conclude that the individual was not the most qualified person for the job" (Batavia & Schriner, 2001: 699).

Main conclusion of the study

The results of quantitative analyses seem to exhibit patterns that support the hypotheses of the study. People with disabilities, public officials involving with social welfare policies, and the general public in the middle class or above have disparate perceptions on disability rights and disability as a social problem. In the detailed study of various perception variables, a pattern seems to emerge. People with disabilities reveal positive perception on rights and view disability as a social problem; at the same time, most of the perspectives are distinct from the other two groups. The rights and social problem perspectives of public officials and the general public, on the other hand, seem not to vary very much from each other. The differing perceptions between disabled people and public officials should also be noted, since the attitude of bureaucracies could affect the policy implementation (Van Meter & Van Horn, 1975: 472-473). All these results are empirically shown in Table 5. It is also well noticeable that the perception of the general public tends to be least positive among the three groups toward disability rights and disability as a social problem. These findings conform to the "underdog" principle that the policy target group, while feeling disadvantaged, would desire more State action in disability welfare policy (Hurst, 1992: 287). Some disability policy literature indicates that if there were a change in disability policy, it might be more in line with sociopolitical or minority / civil rights perspective, rather than biomedical and economic perspective, which are already in the past (Jeon & Haider-Markel, 2001: 215-216). Again, with the policy change toward upholding more of the disability rights, the empirical findings of this research also show that life condition of the disabled minority could improve. For example, with more rights come along social integration in work, school, and personal settings. These results are shown toward the end of the result section of this study.

The study of perception on radical right, however, produces a somewhat surprised finding. Particularly for the most radical rights perspective – the right not to work – the policy target group does not reveal the most positive attitude toward this perspective, as compared to the other two groups. The general public, on the other hand, scores highest on this perception variable. But those with disabilities still exhibit a desire for special rights, in order to compensate for their disability condition. They also view the State to be the primary source for disability welfare, as opposed to other private sources, such as friends, family, relatives, and charitable organizations. In considering these results, this research reasons that the Thai society is not used to the idea of welfare state originated in the West, which offers more generous welfare, through some sophisticated welfare systems, than do non-welfare, non-Western states. Eighty percent of all participants in the study believe that people with disabilities should stay at home with family, rather than at welfare institutions. And such perspective is strongest among those with disabilities themselves. Moreover, other empirical findings help explain the low score from the policy target group on the most radical rights variable. People with disabilities perceive themselves as viable, productive citizens, with few limitations in life. With some opportunity such as vocational training and job placement, they could well contribute to the economy, just as those without disabilities.

In applying the public policy theory on issue definition (Kingdon, 2003: 166-167; Blankenau, 2001: 45-46; Jeon & Haider-Market, 2001: 215-218), this study concludes that there is a divided perception both on disability rights and disability as a social problem. According to Kingdon (2003: 94-97), the recognition of an issue is essential in allowing its entrance to the State agenda, while triggering the interest of State institutions – mainly the parliament and government. A commonality in the perception of an issue would increase its clarity. On the other hand, different viewpoints on an issue serve like a shadow over an issue barricading public understanding of the issue. In discussing the issue of national health insurance in the United States, Blankenau (2001: 45-46) states that there is a disagreement in the public on the particular issue of access. While some people see it as the main problem in the American health insurance system,

others disagree, arguing that eighty-six percent of the population has health insurance. Then, there is the cost issue, in which large companies that provide health insurance to employees are frustrated at the increasingly expensive benefit of health insurance. There is also a concern on the U.S. health care financing system that is believed to be unsatisfactory. Such divided points of concern provide a partial explanation for the tardiness in the U.S. universal health care coverage, as compared to its neighbor, Canada. Jeon and Haider-markel (2001: 215-217) discuss various perspectives on disability issue. Contradictory perspectives bring along differing and, possibly, conflicting policy solutions. In the present study, the disabled people prefer a stronger disability welfare policy which would entitle them to a higher level of social rights as citizens. Also, they tend to perceive discrimination against them, such as hate crimes, which adversely affect their rights. They perceive the disability issue as a social problem, welcoming a bolder intervention by the State, through a more efficient, effective, and adequate disability welfare services. The other two groups without disabilities seem to view the issue differently, having a less positive view on both the disability rights and disability as a social problem. Such differing views could, then, thwart the issue from entering the State agenda, while maintaining the status quo or the current policy and level of disability welfare.

In fully developed democracies like the United States, public policies must be, at least partially, based on the consent of the governed. Van Horn, Baumer, and Gormley (2001: 231-241) refer to the general public opinion as living room politics. The living room is usually the place where people receive information on public policies, through television and newspapers. People who are politically attentive may voice opinion back to decision makers – their representatives and national and local governments – through various means such as letters and e-mails. However, not everybody is equally political. Generally, when the public has no opinion or soft opinion, elected officials have some freedom to determine the direction of an issue and, in turn, public policy solutions. On the other hand, strongly held public opinion limits the freedom of politicians, while making them act correspondingly to such opinion. Also in general, elected officials will

gravitate to issues that are salient to the public. Therefore, politicians usually cannot neglect public opinion for the reason of electoral benefit. Crone (1993: 55) refers to political will as an important factor that would affect a change in social welfare policy. It is the willingness of politicians to make changes to existing social welfare policies. Therefore, the public opinion, especially a strong one, could boost such political will.
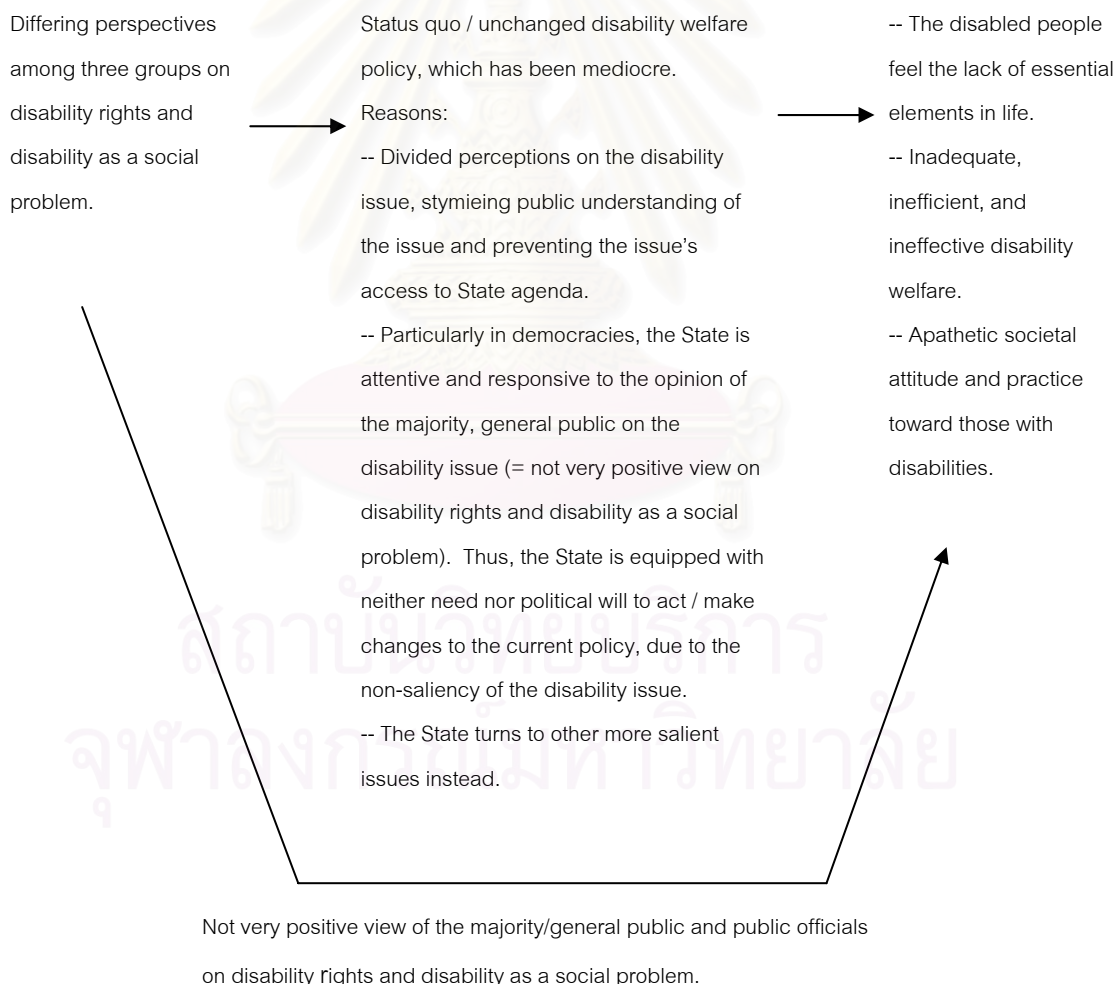
Even in less democratic and non-democratic countries, at times, the State must seriously take the perspectives of the public into consideration, while formulating public policies. Ramesh (2000: 534-545) shows that the State action in social security in both Thailand and Indonesia is, most of the times, in line with the public's sentiment. During the time of military rule or the time of bureaucratic polity, both Indonesia and Thailand had a particularly well-developed, comprehensive social security system for public sector workers in order to reinforce the bureaucracy and military's loyalty to the regime. But the situation started to change. There has been an expansion of the social security coverage to private sector employees when the regime shifted toward democracy, bringing along electoral challenges to both states. Especially in Thailand in the 1980s and after, more democratic elections have forced governments to device policies to appeal to voters. For a non-democratic example, Hong Kong, it has always put economic policy ahead of social policy, stressing economic growth and low tax rate in order to induce investment and secure capital accumulation. But the State always has to maintain a certain level of social services, mainly for the reason of securing the legitimacy of the government's status. As a non-democratic state, the government maintains the legitimacy of the government's rule by ensuring prosperous economic condition, while at the same time, improving the social condition of the public through social welfare. Therefore, in this way, the Hong Kong government is not very much unlike its democratic counterparts, in that it cannot neglect the perception and needs of the public (Yu, 1996: 419-421).

The discussion above is on the relationship between the State action in public policy and its people. To some extent, the State has to be responsive to the needs, desire, and value of the public, in the sense that it usually cannot authorize a public

policy against the wish of the public. The State attention to the public can also be partially explained by the fact that the general public constitutes the majority. In the present study, the perception of the general public on disability rights and disability as a social problem is informative for the State. The general public and public officials do not perceive disability rights as positively as the direct target group of the disability welfare policy – those with disabilities. Also, the general public, in particular, views the disability issue as a social problem in a lesser degree than do disabled people. Due to the public's attitude on disability rights and disability as a social problem as well as the divided perceptions among the three groups in the disability issue, the status quo or the current level of disability welfare remains. The State has neither the need nor political will to change the status quo, since the majority public tends not to view the disability issue very much as a social problem, which is the main reason for State action. In one example of the empirical results, the general public tends to have a more positive view on private sources of disability welfare than do disabled people. Also, the public does not perceive a very high level of discrimination against those with disabilities, such as hate crimes, in comparison to the perception of those with disabilities. Therefore, in the view of the general public, there seems to be no problem with the disability issue and welfare rights of disabled people. In turn, there would be no demand from the general public for the State to change the status quo of the disability welfare. The disability issue, therefore, seems to be a non-salient issue for the State. As Taylor (2004: 32) states, disability remains a fringe issue and rarely merits a mention. The rights issue on other minority groups, such as African Americans, women, and gays and lesbians is more in the attention and interest of the general public. With little interest of the State on the disability issue, it gravitates to more salient issues. The current policies and level of disability welfare that remain and have been mediocre could, then, explain the perceived lack of essential elements in life among those with disabilities, as well as inadequate, inefficient, and ineffectiveness of the disability welfare. Also, within the different perspectives, as empirically shown, on the disability issue, people in the general public tend to have a less positive view on disability rights and disability as a

social problem. They, for instance, tend not to have a very positive view on social integration of people with disabilities and see the limitation and health problems among disabled people. These perceptions and some others could be interpreted by disabled people as a discrimination against them. Therefore, this study concludes also that the different perceptions on the disability issue also explain the fact that disabled people perceive apathetic societal attitude and practice toward them. Figure 3 below summarizes this conclusion.

<u>Figure 3</u>. Summary of the main conclusion.

Differing perspectives among three groups on disability rights and disability as a social problem.

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Status quo / unchanged disability welfare policy, which has been mediocre.
Reasons:
-- Divided perceptions on the disability issue, stymieing public understanding of the issue and preventing the issue's access to State agenda.
-- Particularly in democracies, the State is attentive and responsive to the opinion of the majority, general public on the disability issue (= not very positive view on disability rights and disability as a social problem). Thus, the State is equipped with neither need nor political will to act / make changes to the current policy, due to the non-saliency of the disability issue.
-- The State turns to other more salient issues instead.

→

-- The disabled people feel the lack of essential elements in life.
-- Inadequate, inefficient, and ineffective disability welfare.
-- Apathetic societal attitude and practice toward those with disabilities.

Not very positive view of the majority/general public and public officials on disability rights and disability as a social problem.

Politicizing and publicizing the disability issue

The empirical finding of this study indicates that those with disabilities tend to desire more rights and disability welfare. This is coupled with their perception of discriminatory action against them. Of course, discrimination is, on a large part, perception-based, which may or may not be in line with the actual happening within the disability issue and policy, as discussed earlier. But in democracies, simply sensing a problem should justify some movement to demand the State action. Such demand is regularly made both directly and indirectly through the public policy process. As Taylor (2004: 33) states, "Disablement is a political state and not a personal one and thus needs to be addressed as a civil rights issue." Therefore, if disabled people desire more disability rights and welfare, there are theoretically a few things that can be done to break the apathy of both the State and the non-disabled, majority public. However, most of these things generally require more political action of people with disabilities. Such political action takes place in the political context, designated as the political stream by Kingdon (2003: 146-150). It is expected that such action would help create a favorable political context or political stream, leading, in turn, to the possible change of disability policy and welfare. There is also the policy context or the policy stream, representing viable policy solutions to the problem. Such solutions should be acceptable to all parties involved, technically feasible in implementation, and affordable (Blankenau, 2001: 38-39; Kingdon, 2003: 168-169).

First, people with disabilities could learn to be more active, mostly in a group setting. A distinction must be made between the target group and players or actors of a public policy. The former refers to people or groups that are subject to the application of government authority (Bickers & Williams, 2001: 170). The terminology in itself implies passivity of the target group. Players or actors in an issue, on the other hand, take action within an issue and public policy that concern them. Policy actors can also be the target group of a policy. As such, they are usually designated as stakeholders of a policy, who take action in a policy, because it directly affects them. Thus, in order to

demand a change to an existing policy, people with disabilities would need to be more than simply the target group of the disability policy.

Usually, an individual policy actor will not find very much success in his/her action but must work with others in a group. A group that desires to acquire benefit out of a public policy is denoted as an interest group, such as the group of disabled people. In group theory, individuals with common interests band together formally or informally to press their demand on the State. The group, then, becomes the essential bridge between individuals and the State or government (Dye, 2002: 21). Authors in the disability literature who are disabled themselves, such as Hongladarom (1998, 1999, 2000, & 2002), and Namsiripongpan (1996) well recognize the necessity for people with disabilities to act as a group. Hongladarom (1999:9) states that the demand for justice must be made by disabled people themselves, as they must be the ones presenting their needs. The demand made by non-disabled people on behalf of those with disabilities could lead to welfare policies that do not correspond to the need and desire of people with disabilities. In Thailand there are existing disability groups, such as Association of the Physically Handicapped o Thailand, Council of Disabled People of Thailand, Thai Disabled Development Foundation, and Thailand Association of the Blind (www.cdpt.or.th). Such disability group effort could build up from these already existing ones.

Therefore, it is recommended that in order to demand a change in the existing disability policy, people may not remain passive, but need to take some action as a group. This is particularly true when disability groups demand for radical rights policies. The empirical finding of this study does not reveal particularly positive attitude among those with disabilities toward the right not to work, which represents a radical rights perspective. However, they express a favorable attitude toward special rights in order to compensate for their disability condition. Moreover, they prefer the State as the primary source of disability welfare over private sources. They also tend to perceive inadequacy in the current disability welfare. Many people with disabilities, in the open-ended question, express their hope that the current monthly stipend for the disabled

people would increase from 500 to 1,000 baht. These perceptions seem to correspond to the concept of social rights, which are resources dependent, usually in the form of access to welfare (Heywood, 2004: 208). Hence, they are more radical than civil and political rights. Given the fact that the other two non-disabled groups do not exhibit a particularly positive a view on the rights which require some redistribution of social resources, the disability groups must be prepared to allocate some effort to the issue. However, the disability groups could increase the viability of the demand pressed on the State by attaching some suggestions to the demand. The groups could derive some policy suggestions that are favorable within the policy context, which has the characteristics of acceptability, technical feasibility, and affordability (Blankenau, 2001: 38-39; Kningdon, 2003: 168-169).

The disability group action and effort, however, need not be only in the policy making context; action and active roles are also possible at the policy implementation stage of the public policy process. In policy implementation, bureaucracies can exercise discretion whenever the effective limits on their power leave them free to make a choice among possible courses of action and inaction. Therefore, the discretionary power allows bureaucracies to make judgments, such as interpretation of rules and wordings in the laws (Ham & Hill, 1993: 151-152). Some people even consider the discretionary power as the ability for bureaucracies to make decisions, just as those made at the stage of policy making. Of course, decisions made at the policy implementation stage by bureaucracies may not contradict the relevant policies and laws. Therefore, being awarded the discretion, bureaucracies are somewhat released from a restraint by law to have some room to maneuver in putting a policy to work. In this way, contact and communication between the bureaucracy and disability groups may be possible. They can work together, communicate to each other, share information, and learn from each other's information. For instance, part of the inefficiency and ineffectiveness in the disability welfare discussed earlier comprises interruption in disability welfare policies, due to the lack of well coordinated and follow up services (Wimonkanchana, 1998: 62; Hongladarom, 1998: 32-33). The disability

groups may work with the bureaucracy in deriving ways to correct such problems. In taking a more active role, disability groups may arrange for possible volunteers, who are possibly disabled people themselves, to be part of the follow-up teams. This, however, by no means suggests that taking such active role would be without trouble. It usually requires consciousness, contribution, and commitment on the part of people with disabilities. But such active role of the disability groups within policy implementation could be part of the favorable policy context suggested by Blankenau (2001: 38-39) and Kingdon (2003: 168-169). The cooperation, information sharing, and consultation between the bureaucracy and the disability groups could positively affect the acceptability, technical feasibility, and affordability of the disability policy implementation. Also, the cooperation between the public / bureaucracy and the private sector in delivering public services has been theoretically possible in various ways. The cooperation, as described above, refers to co-provision and co-production of public policy, usually comprising private, voluntary assistance in carrying out a public function, which is the disability welfare in this particular case (Johnson, 2004: 77-78). Among disabled people and disability groups, volunteers, especially those with disabilities themselves, should be found without difficulty. A more likely barrier, however, could be the bureaucracy unwelcoming the idea of co-production and co-provision. Again, persuading the bureaucracy to be receptive to such idea could be part of the creation of a favorable policy context and also challenging for the disability groups.

Part of the active role of the disabled people could be in response to their perception of disability issue as a social problem. While non-disabled public tends to perceive the issue as less of a social problem, the disability group could combine their resources and try to expand the disability issue. Expanding an issue is publicizing it to different groups in the population in the hope of energizing them to become involved. The expanders – those with disabilities in this case -- are the issue innovators. They support an issue not currently being addressed by the State and want to place it on the State agenda (Cobb & Coughlin, 1998: 416). This study draws on public policy theory and literature discussing problem characteristics that make an issue a social problem as

well as expand, at the same time. The main literature consists of Cobb and Coughlin, 1998; Cobb and Elder, 1983; and Gerston, 2004 and 2002. Each characteristic becomes a questionnaire item in Table 1. A total of ten items represent social problems characteristics, namely items 7, 8, 9, 10, 12, 13, 14, 15, 19, and 34. While disabled people reveal more social problem attitude on the disability issue than do non-disabled people, the disability groups may maneuver around these characteristics in order to expand the issue to catch public attention and the State attention after that. The public policy theory on problem definitions suggests that in most democracies, the State is responsive to the opinion of the general public (Van Horn, Baumer, & Gormley, 2001; Ramesh, 2000; Crone, 1993; Yu, 1996).

In using problem characteristics in defining disability as a social problem, disability groups could communicate such characteristics to the general public possibly in the following ways. They could publicize the prevalence and severity of the problem. For instance, they could include the elderly population into the population of people with disabilities, since most elderly people also have some kinds of impairments. They could find ways to promote social / public interest in the disability welfare. Disability groups in the forms of foundations and associations as well as their activities and accomplishments could be advertised. Perhaps, information on activities that relate both directly and indirectly to the disability issue would catch more attention than those that relate only directly with the issue. That is because other non-disability groups and the public are generally not related directly to the disability issue. The disability groups cold communicate to the general public that the disability welfare policy has a long-term effect to the life of those with disabilities, such as the positive effect on their children's quality of life. There could be a promotion of the idea that disability condition is not exactly related to bad luck; but everybody would face some kinds of impairment some time in their life. For instance, pregnancy is sometimes designated as the condition of temporary disability in need of the same social environment as those with some kinds of disabilities. Moreover, the close relationship between disability and poverty or disability and unjust income distribution could be made known to the general public. In addition,

some means of justification could be devised to illustrate that the disabled population and disability issue need public attention before other groups of people and other issues. A point could also be made that the disability problem, without correction, could have other negative social consequences, particularly poverty and social disunity.

Thus far, the recommendation has concerned the increase in the pro-active role of those with disabilities, as a group, in politicizing and publicizing the disability issue. One other way to increase the importance of the disability issue is to locate policy entrepreneurs to the disability issue. According to Chambers and Wedel (2005: 7), other than the sheer number of people affected that determines the importance of a social problem, its level of social significance also depends on the power and social status of those who define the problem and urge the spending of public resources toward a solution. For instance, after Ms. Rose Kennedy, mother of U.S. President John F. Kennedy, became a public advocate of the mental disability issue, federal appropriation for the problem increased tremendously. Kingdon (2003: 122) would designate Ms. Kennedy as a policy entrepreneur in the mental disability issue, as policy entrepreneurs are advocates of the prominence of an issue. These entrepreneurs could come from anywhere in the society – in or outside the government, elected or appointed positions, interest groups, non-governmental organizations (NGOs), or research organizations, for example. But their main characteristic is their willingness to invest their resources – time, energy, reputation, and sometimes money – in hope of a future return. That return might come to them in the form of policies which they approve, satisfaction from active participation in the issue, or even personal aggrandizement by way of job security or career promotion. Thus, one incentive that prompts advocacy is the promotion of personal interest. This could mean a protection of bureaucratic turf -- keeping one's job, expanding one's agency, or promoting one's personal career. Or people sometimes advocate issue because they want to promote their values or affect the shape of public policy. Some other people simply enjoy issue advocacy, as they like being part of the public policy process or being at or near the seat of power (Kingdon, 2003: 122-123).

The public policy literature suggests that most of the times, policy change is difficult, confronting opposition forces. The role of policy entrepreneur is found to be instrumental in catalyzing the change. Ho (2002) describes the agenda setting process for the regulation of traditional Chinese medicine (TCM) in Hong Kong, using Kingdon's (1995) multiple stream model as the framework of discussion. Prior to the change to TCM regulation policy, TCM had always received less recognition and respect than Western medicine. Within the national mood, there are both proposition and opposition to change. TCM practitioners are mostly proponents to change, since recognition usually follows regulation. On the other hand, the attitude of Western-trained doctors toward the regulation of TCM was ambivalent. Those with a positive view on regulation liked to see the systematic screening for only qualified TCM practitioners. Those opposing the regulation foresaw more competition, due to the more recognition and acceptance of TCM after the regulation. Another propellant of change was considered the focusing event of TCM intoxication, which would lead the general public to see the necessity of regulation. With such ambivalent status of TCM and its regulation, policy entrepreneurs seemed to have a pivotal role in the policy change. These are TCM practitioners who always express their pro-regulation attitude, mostly in the press, by identifying positive results of regulation. A few Western-trained doctors who were in the Legislative Council believe that regulation of TCM was essential to public health. Since these doctors are in the Legislative Council, their effort and role in pushing the issue toward change carried some weight. There are also government officials who had been considered passive; however, there were some who were critical of the development of TCM. These comprise policy entrepreneurs who were actively involved in the formulation of TCM regulation policy.

In another literature, Seto (2002) discusses the change in leprosy isolation policy in Japan. But it is the change in the direction of policy termination. Advocating a policy change in the termination direction is at least equally difficult as the initiation direction. In this case, leprosy and patient isolation policy or Leprosy Prevention Law had been in effect since the early 20th century, by seclusion of patients at homes, hospitals, and

leprosaria. Especially patients residing in leprosaria, these became their homes, due to the nature of the disease and its care, which require a long or forever institutionalization. With some advancement in medical technology resulting in a more effective cure, institutionalization of patients is known within the medical community to be no longer necessary. However, the abolition of Leprosy Prevention Law would have impact on some people. Particularly those who had resided in leprosaria never developed working skills to compete with other workers in society. They became seriously concerned about their future and feared that they would not be welcomed into communities. On the other hand, the general public, not being adequately informed of medical development and cure of the disease, would be reluctant in fully accepting the patients into society. At the same time, the staff at leprosaria, fearful of losing their jobs, substituted the original goal of residential care and cure to that of rehabilitation and leprosy research. Also, the Ministry of Health and Welfare (MHW) officials seemed to share the concern of these people. After retirement from many positions in the public health sector, Fugio Otani became the Director General of Tofu Kyokai Foundation established to serve patients with leprosy. Mainly due to his belief in the termination of the law, he assumed the role of policy entrepreneur while putting his medical knowledge and familiarity of public health issues into good use. He held series of symposia on leprosy to familiarize both the medical communities and certain public with technologies and development in caring for leprosy. A few symposia, in particular, were designed to convey the struggle of patients to fight against their disease and social stigma. These media attracted much public attention. His other moves and strategies were directed at persuading patients to be more open to the termination goal. One important message that he tried to send to the public, especially the patients, was that the termination of the law would help shatter social stigma against leprosy. He, however, was also sensitive to the patients' fear of losing their residence in leprosaria. Thus, he promised to secure their continuous residence, as the former patients may choose to maintain their residency. With the termination of leprosy prevention policy, the leprosaria switched to the mere provision of residential places for patients and ex-patients as well as rehabilitation services.

Eventually, a program of residency provision survived the abolition of the law, while giving a new, formal goal to previous leprosaria, which abated much of the possible opposition from those previous leprosaria. His other effort was geared toward building consensus among academics. Otani was also skillful in maneuvering his termination moves at appropriate times, such as when there was increased competition among political parties. With such competition, politicians could easily be induced to pay more attention to the issue potentially attracting public concern.

For the disability issue, the disabled people and disability groups could benefit from policy entrepreneurs. They could help boost the prominence and recognition of the issue, hence, expediting changes to the existing disability welfare policy by catching more attention of the general public and, in turn, policy makers. As the literature suggests, policy entrepreneurs could come from many places – public, private, and social sectors. And they themselves might not have to be disabled persons. Therefore, trying to find them might be worthy of the effort. In the cases of policy change discussed above, people interested in or are involved with the issue and policy came to take the role of policy entrepreneurs by themselves. But the disability groups could also take an active role in locating and inviting people with appropriate and favorable characteristics, as discussed above, to assume such role.

Conclusion

This study starts with a general observation on the disadvantaged condition and life situation of those with disabilities. With some compassion and empathy, one might not find difficulty in realizing these facts. The observation is confirmed by some disability literature and particularly the one whose authors are disabled themselves. A closer look in the literature allows this research to identify existing problems with the disability issue, especially in the perception of people with disabilities -- the lack of essential elements in the life of disabled people, perhaps, stemming from inadequate, inefficient, and ineffective disability welfare policy. Also, the disability literature tends to indicate a sense of apathy of the society on the disability issue. Aside from the literature, public policy theories suggest that issue definition comprises an important part of public policy initiation. Therefore, having observed general and specific problems regarding the disability issue, this research also applies the framework of issue definition to the disability problem in order to explain the existing disability condition and situation. This research hypothesizes that the disability issue definition is responsible for the current disability situation and policy. More specifically, this study has identified three groups of people that relate both directly and indirectly to the disability issue and policy. People with disabilities are strongly involved with the issue as the policy target group. Public officials in the Ministry of Social Development and Human Security could affect the adequacy efficiency, and effectiveness of the disability welfare. Also, even though people in the general public does not relate directly with the disability issue and policy, they do live in the same society and share social resources with disabled people. Most states, democratic or not, to some extent, cannot neglect the view of the public in policy making. Therefore, the opinion of the general public in the disability issue usually becomes of concern to the State. Therefore, the research sets out to examine the perception on disability rights and disability as a social problem among these three groups of interest. As the public policy theory on issue definition suggests (Van Horn, Baumer, & Gormley, 2001: 231), public policies operate in accordance with the view of the public. This research, therefore, states that there is a

difference in perceptions among the three groups on disability rights and disability as a social problem, hence, minimizing any responsive disability policy.

The three identified groups become three samples of interest in the study. Their perception on disability rights and disability as a social problem is assessed through a survey research methodology. Within the framework of disability issue definition, this research applies political and public policy theories on rights and social problems to the questionnaire design. Other related concepts, such as equity, equality, and social justice are also included in the questionnaire content.

The empirical finding suggests that there is a variation in the perception of the three samples on disability rights and disability as a social problem. People with disabilities strongly exhibit a positive view on disability rights and many other rights-related concepts and also view the issue as a social problem. On the other hand, public officials and the general public tend to have a less positive view on disability rights and disability as a social problem. This study, then, tries to discuss the implication of such findings.

The issue of rights is much related to the disability issue, since the social rights concept would offer people with disabilities some access to social resources. The idea of multiculturalism is also related to disability rights, since it tends to see modern States as social cleavages of diverse culture. And disabled people are a part of that cultural diversity. An acceptance of a heterogeneous society means garnering disability rights within society. The concepts of social justice and resource distribution are also related to disability rights. Part of these concepts involves the recognition of special needs among people with disabilities. In order to fulfill those needs, social resources must be directed to them. Many people see this as social justice.

The perception of the disability issue as a social problem also affects the disability policy and welfare. The public policy theory would suggest that the government policy is only responsive to social problems, not personal ones. This research discusses a possibly narrow view and scope of public interest in nature of the disability issue, which could negatively affect the perception of the issue as a social

problem. Theories on social problems abound, discussing various ways that lead to designate the issue as a social problem.

The fact that there are different perceptions among the three groups on disability rights and disability as a social problem results in a divided problem stream or a divided perception (Kingdon, 2003: 167-169; Blankenau, 2001: 38-39). Disagreement on the issue is believed to cause a delay in policy change. Therefore, the conclusion of this study is that the current condition and situation of disability will linger. In other words, the status quo of both the issue and policy is maintained. Since the general public does not show a strongly positive view on disability rights and disability as a social problem, the State, then, moves away to care for other more salient issues. These results and discussion somewhat explain the mediocre disability policy – inadequacy, inefficiency, and ineffectiveness – and in turn, the lack of essentialities in the life of those with disabilities.

With the non-promising problem stream, this research suggests that people with disabilities move to the political and policy streams (Kingdon, 2003: 167-169; Blankenau, 2001: 38-39) and create a window of opportunity for themselves. In order to do this, people with disabilities may not remain the policy target, but must become policy actors. These actors usually band together in groups – the disability groups -- to press demand on the State regarding a more developed disability policy that fulfills the rights of those with disabilities. They could attach some policy options and solutions to the demand in order to derive a viable disability welfare policy. Also, the disability groups can volunteer and cooperate with the bureaucracy, possibly creating a more viability within the disability policy implementation context. The disability groups may also try to expand the disability issue, enlarging its image as a social problem. Or they could locate policy entrepreneurs who are capable of expediting the change of the status quo.

Suggestion for further work

As stated throughout, this research is an attitudinal study on the perception of disability rights and disability as a social problem. There could, by all means, be some degree of bias within the study on perception. For instance, perceptions on welfare adequacy, dignity among people with disabilities, and even hate crimes are all value-laden. Perceiving the dignity problem among disabled people and inadequate disability welfare, one could easily conclude that there is some discriminatory act against people with disabilities. This study, therefore, devoted one part of the Discussion Section in elaborating the need to consider the possible discriminatory act and the actual happening in the disability issue. Both the perception on discrimination and the actual happening to the issue can be empirically examined. The former is like to the present study, whereby attitude can be studied as it is revealed and reported. In the latter, the actual happening that is both empirical and somewhat more concrete would be the cost issue. Upholding the disability rights, especially radical rights as well as the social construction perspective calling for an accommodation of social environment to fit the need of those with disabilities, could be rather expensive. To put in another word, rights are not cost-free, especially social rights that are resources dependent. Further studies on the cost issue and disability could shed some light on part of the actual happening within the disability issue.

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Appendix A (Survey instrument directed to public officials)

วันที่ 29 กันยายน 2549

คำอธิบายแบบสอบถาม

        แบบสอบถามที่ขอความอนุเคราะห์จากท่านให้ช่วยตอบนี้ จัดทำโดย ดร. พิษณุ เสงี่ยมพงษ์ ตำแหน่งผู้ช่วย
ศาสตราจารย์ ระดับ 8 ประจำภาควิชาการปกครอง คณะรัฐศาสตร์ จุฬาลงกรณ์มหาวิทยาลัย เพื่อประโยชน์สำหรับโครงการวิจัย
ที่ศึกษาประเด็นเรื่องความพิการและคนพิการในปัจจุบัน ภายใต้การสนับสนุนโครงการวิจัยจากกองทุนรัชดาภิเษกสมโภช
จุฬาลงกรณ์มหาวิทยาลัย   แบบสอบถามนี้ มีวัตถุประสงค์หลัก ในการศึกษาความคิดเห็นของหลายกลุ่มคนในกรุงเทพมหานคร
เกี่ยวกับความพิการ และคนพิการในประเทศไทย โดยที่คำตอบ ซึ่งก็คือความคิดเห็นที่ได้จากแบบสอบถาม จะถูกปิดเป็นความลับ
และจะไม่มีการตัดสินในเรื่องความถูก หรือผิดของความคิดเห็นแต่อย่างใด **หากแต่โครงการวิจัยขอให้ผู้ตอบระบุความคิดเห็น
ที่แท้จริง** จะเป็นประโยชน์ยิ่งสำหรับโครงการวิจัย   และหวังเป็นอย่างยิ่งว่าผลการวิจัยจะเป็นประโยชน์แก่สังคมไทย และวิชาการ
ในหลายสาขาวิชาด้านสังคมศาสตร์

        แบบสอบถามนี้ ประกอบด้วยคำถามเกี่ยวกับข้อมูลเบื้องต้นของผู้ตอบ และคำถามหลักสองส่วน ซึ่งคาดว่าผู้ตอบจะใช้
เวลาในการตอบคำถามประมาณ 15-20 นาที

ขอขอบคุณในความอนุเคราะห์ตอบแบบสอบถามมา ณ ที่นี้

ผู้ช่วยศาสตราจารย์ ดร. พิษณุ เสงี่ยมพงษ์
ภาควิชาการปกครอง คณะรัฐศาสตร์ จุฬาลงกรณ์มหาวิทยาลัย
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คำถามเกี่ยวกับข้อมูลเบื้องต้น   กรุณาระบุข้อมูลลงในช่องว่าง (____)

เพศ   ชาย ____   หญิง ____

อายุ   ____ ปี

การศึกษาขั้นสุดท้าย _____

หน่วยงานที่สังกัด _____

คำถามหลัก ส่วนที่ 1 ประกอบด้วยข้อ 1 ถึงข้อ 49 ในแต่ละข้อ จะเป็นคำกล่าวที่ขอให้ผู้ตอบระบุความ คิดเห็นที่มีต่อคำกล่าว โดย จะมีช่องคำตอบ 7 ช่อง จัดเตรียมไว้ให้ ซึ่งเป็นระดับความคิดเห็นต่อคำกล่าว เช่น "มาก" (7) ถึง "น้อย" (1) ทั้งนี้ ส่วนใหญ่จะเป็นระดับของความเห็นด้วย หรือไม่เห็นด้วยกับคำกล่าว คือ "เห็น ด้วย" (7) ถึง "ไม่เห็นด้วย" (1) ในแต่ละข้อคำกล่าว ขอให้ผู้ตอบกากบาท (X) ลงในช่องคำตอบ**เพียงช่อง เดียว** ที่ตรงกับความเห็นมากที่สุด สำหรับข้อคำกล่าวที่ไม่ทราบคำตอบ หรือไม่มีความเห็นต่อคำกล่าว ให้ ตอบช่องกลาง (4)

---

1. ผู้พิการที่ช่วยเหลือตัวเองได้ยาก ควรได้รับสวัสดิการจากรัฐ อย่างพอเพียงที่จะดำรงชีวิตอยู่ได้อย่างดี โดยไม่จำเป็นต้อง ทำงาน

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

---

2. คนพิการควรได้โอกาสประกอบอาชีพ มีหน้าที่การงาน

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

---

3. เป็นเรื่องที่เข้าใจได้ ที่นายจ้าง ต้องการจ้างงานคนปกติ มากกว่า คนพิการ เพราะจำเป็นต้องคำนึงถึงคุณภาพของงานด้วย

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

---

4. คนพิการมีข้อจำกัดในการดำเนินชีวิตประจำวัน มากกว่า คนปกติ

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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5. สังคมให้ความเห็นใจคนพิการ

เห็นใจมาก   ค่อนข้างเห็นใจ   ไม่เห็นใจ

7	6	5	4	3	2	1

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6. คนในสังคมให้ความช่วยเหลือคนพิการ

ช่วยเหลือมาก   ช่วยเหลือบ้าง   ไม่ช่วยเหลือ

7	6	5	4	3	2	1

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7. ปัญหาเกี่ยวกับการดำเนินชีวิตของคนพิการ เป็นปัญหา ที่รุนแรง

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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8. รัฐจำเป็นต้องแก้ไขปัญหาคนพิการ ไม่เช่นนั้นจะเกิด ปัญหาอื่นตามมา

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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9. ความพิการ เป็นปัญหาที่กระทบคนจำนวนมาก

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

10. ท่านมีความเกี่ยวข้องกับสมาคม มูลนิธิ หรือชมรมด้าน
ความพิการ

เกี่ยวข้องมาก เกี่ยวข้องบ้าง ไม่เกี่ยวข้องเลย

7	6	5	4	3	2	1

11. รัฐควรมีสวัสดิการให้แก่คนพิการ เช่นการฝึกงาน เพื่อให้
โอกาสแก่คนพิการได้สามารถช่วยตัวเองได้ในอนาคต

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

12. นโยบายของรัฐด้านคนพิการ มีผลในระยะยาวต่อคุณภาพ
ชีวิตของคนพิการ

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

13. ในระยะยาว สังคมจะได้ประโยชน์จากสวัสดิการคนพิการ

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

14. ความพิการ นับเป็นเรื่องของโชคชะตา หรือบาป กรรม

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

15. ความพิการ เป็นเรื่องเกี่ยวกับการกระจายรายได้ของคน
ในสังคม

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

16. นับเป็นความยุติธรรม ที่จะเก็บภาษีจากคนปกติ
มากระจายสู่คนพิการ เป็นสวัสดิการ

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

17. มีข้อจำกัด ในการปฏิบัตินโยบายด้านสวัสดิการคนพิการ

มีข้อจำกัดมาก มีข้อจำกัดบ้าง ไม่มีข้อจำกัด

7	6	5	4	3	2	1

18. ควรปรับสภาพแวดล้อมของสังคม ให้คนพิการสามารถใช้
ประโยชน์ได้อย่างคนปกติ เช่นรถประจำทาง และถนน ที่
คนพิการใช้ได้สะดวก

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

19. มีคนกลุ่มอื่น ๆ เช่นคนไร้บ้าน หรือกลุ่มเด็ก ที่ควรได้รับ
สวัสดิการ ก่อนกลุ่มคนพิการ

เห็นด้วย กลาง ๆ ไม่เห็นด้วย

7	6	5	4	3	2	1

20. ผู้ที่ประสบความพิการจากความประมาทของตนเอง สมควร
ได้รับความช่วยเหลือจากสังคม น้อยกว่าผู้พิการตามธรรมชาติ
เช่นผู้ที่พิการแต่กำเนิด

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

21. ผู้ต้องโทษที่พิการ ควรได้รับสวัสดิการน้อยกว่าผู้พิการอื่น ๆ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

22. หากเป็นไปได้ ควรฟื้นฟูคนพิการให้เหมือนคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

23. คนพิการควรมีสิทธิ เสรีภาพ ภายใต้กฎหมาย เหมือน
คนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

24. คนพิการควรมีสิทธิที่จะมีบทบาททางการเมือง เช่นลงสมัคร
รับเลือกตั้งเป็นผู้แทนราษฎร เหมือนคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

25. คนพิการควรได้รับสิทธิพิเศษในหลาย ๆ เรื่อง มากกว่า
คนปกติ จะได้ชดเชยความพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

26. เหตุผลของการมีสวัสดิการของรัฐแก่คนพิการ เช่นการจัด
หางาน เพื่อคนพิการจะได้ช่วยเพิ่มผลผลิตทางเศรษฐกิจ
แก่ประเทศ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

27. การขาดสวัสดิการคนพิการ จะทำให้เกิดความแตกแยก
ในสังคม

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

28. ความพิการ ถือเป็นเรื่องปกติ ธรรมดา ของชีวิตมนุษย์

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

29. สิ่งต่าง ๆ ในสังคม เอื้อประโยชน์แก่คนปกติ มากกว่า
คนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

30. ในสังคม มีความรังเกียจคนพิการ

รังเกียจมาก			รังเกียจบ้าง			ไม่รังเกียจ
7	6	5	4	3	2	1

31. ในสังคม มีการล้อเลียนคนพิการ

ล้อเลียนมาก　　ล้อเลียนบ้าง　　ไม่ล้อเลียน

7	6	5	4	3	2	1

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32. ในสังคม มีการทำร้ายคนพิการ ด้วยเหตุของความรังเกียจ

มีมาก　　มีบ้าง　　ไม่มี

7	6	5	4	3	2	1

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33. ท่านเคยมี หรือมีการติดต่อกับคนพิการ เช่นทำงานร่วมกัน

มาก　　มีบ้าง　　ไม่เคย

7	6	5	4	3	2	1

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34. มีเรื่องอื่น ๆ เช่นการก่อการร้าย มลพิษในสิ่งแวดล้อม ที่
ควรได้รับการแก้ไข ก่อนเรื่องความพิการ

เห็นด้วย　　กลาง ๆ　　ไม่เห็นด้วย

7	6	5	4	3	2	1

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35. เป็นเรื่องธรรมดา ที่คนพิการจะทำงานร่วมกันกับคนปกติ

เห็นด้วย　　กลาง ๆ　　ไม่เห็นด้วย

7	6	5	4	3	2	1

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36. เด็กพิการ ควรได้เรียนหนังสือในห้องเรียนเดียวกันกับ
เด็กปกติ

เห็นด้วย　　กลาง ๆ　　ไม่เห็นด้วย

7	6	5	4	3	2	1

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37. สำหรับคนพิการ การมีชีวิตเป็นโสด น่าจะคล่องตัว
มากกว่าที่จะแต่งงาน มีครอบครัว

เห็นด้วย　　กลาง ๆ　　ไม่เห็นด้วย

7	6	5	4	3	2	1

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38. เป็นเรื่องธรรมดา ที่คนพิการจะแต่งงาน มีครอบครัว
กับคนปกติ

เห็นด้วย　　กลาง ๆ　　ไม่เห็นด้วย

7	6	5	4	3	2	1

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39. เหตุผลของการมีสวัสดิการของรัฐแก่คนพิการอย่างพอเพียง
เพื่อให้เกิดความเป็นธรรม

เห็นด้วย　　กลาง ๆ　　ไม่เห็นด้วย

7	6	5	4	3	2	1

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40. เมื่อมีการตั้งครรภ์ ควรมีการแนะนำให้ตรวจเช็คความ
ผิดปกติของทารก

เห็นด้วย　　กลาง ๆ　　ไม่เห็นด้วย

7	6	5	4	3	2	1

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41. เมื่อมีการตั้งครรภ์ ควรมีกฎหมายบังคับให้มีการตรวจเช็ค
ความผิดปกติของทารก

เห็นด้วย　　กลาง ๆ　　ไม่เห็นด้วย

7	6	5	4	3	2	1

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42. หากตรวจพบความผิดปกติของทารกในครรภ์ ควรแนะนำ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

43. หากตรวจพบความพิการของทารกในครรภ์ ควรมีกฎหมาย
บังคับให้ทำแท้ง

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

44. คนพิการส่วนใหญ่ ดูแล้วน่าจะมีปัญหาด้านเศรษฐกิจ
มากกว่าคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

45. คนพิการน่าจะมีค่าใช้จ่ายในการดำรงชีวิตสูงกว่าคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

46. คนพิการส่วนใหญ่ น่าจะมีปัญหาด้านสุขภาพ มากกว่า
คนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

47. สวัสดิการของรัฐแก่คนพิการ พอเพียงที่จะทำให้คุณภาพ
ชีวิตคนพิการเท่าเทียมกับคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

48. (ข้าม)

49. คนพิการได้ใช้ชีวิตอย่างมีศักดิ์ศรี เท่าเทียมกับคนปกติ

เท่าเทียมมาก			ค่อนข้างเท่าเทียม			ไม่เท่าเทียม
7	6	5	4	3	2	1

คำถามหลัก ส่วนที่ 2 ประกอบด้วยข้อ 50 ถึงข้อ 53   ในแต่ละข้อ จะเป็นคำถาม ที่ให้ผู้ตอบระบุความคิดเห็น โดยมีตัวเลือกความคิดเห็นจัดเตรียมไว้ให้   **ขอให้ผู้ตอบเลือกตอบเพียงตัวเลือกความเห็นเดียว** ที่ตรงกับความคิดเห็นของผู้ตอบมากที่สุด โดยกากบาท (X) ลงในช่องแสดงความเห็น (____) ที่หน้าตัวเลือก   สำหรับข้อสุดท้ายนั้น เป็นคำถามที่ให้ผู้ตอบระบุความคิดเห็นเช่นกัน แต่ผู้ตอบสามารถระบุความเห็นได้มากกว่า 1 ตัวเลือก โดยให้กากบาท (X) ลงในช่องแสดงความเห็น (____) ที่หน้าตัวเลือก และ/หรือเขียนระบุความเห็นลงในเนื้อที่ ๆ จัดเตรียมไว้ให้

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50.   (ข้าม)

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51.   ใคร หรือหน่วยงานใด ควรเป็นผู้ให้ความช่วยเหลือคนพิการ**มากที่สุด**: **(ตอบเพียง 1 ตัวเลือก)**

____ 1. ตนเอง / ครอบครัว / ญาติ / เพื่อน

____ 2. หน่วยงานประเภท มูลนิธิ สมาคม วัด และหน่วยงานการกุศล

____ 3. หน่วยงานของรัฐ เช่นกระทรวงการพัฒนาสังคมและความมั่นคงของมนุษย์ โรงพยาบาลของรัฐ

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52.   ในสวัสดิการคนพิการ 2 รูปแบบต่อไปนี้ ท่านคิดว่าอย่างใดเหมาะสมกว่ากัน: **(ตอบเพียง 1 ตัวเลือก)**

____ 1. คนพิการอาศัยอยู่ที่สถานสงเคราะห์ของรัฐที่ได้มาตรฐานสากล

____ 2. คนพิการอาศัยอยู่ที่บ้าน โดยรัฐมอบเงินสวัสดิการอย่างพอเพียง ให้คนพิการเป็นค่าใช้จ่าย

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53.   อะไรเป็นข้อจำกัดของการปฏิบัติงานด้านสวัสดิการคนพิการบ้าง: **(ตอบได้มากกว่า 1 ตัวเลือก)**

____ 1. ไม่มีข้อจำกัด / การปฏิบัติภารกิจดีแล้ว

____ 2. ขาดงบประมาณ

____ 3. ขาดกำลังคน

____ 4. ขาดองค์ความรู้

____ 5. ไม่ทราบ

____ 6. อื่น ๆ – โปรดระบุ _____

Appendix B (Survey instrument directed to people with disabilities)

วันที่ 29 กันยายน 2549

คำอธิบายแบบสอบถาม

        แบบสอบถามที่ขอความอนุเคราะห์จากท่านให้ช่วยตอบนี้ จัดทำโดย ดร. พิษณุ เสงี่ยมพงษ์ ตำแหน่งผู้ช่วย
ศาสตราจารย์ ระดับ 8 ประจำภาควิชาการปกครอง คณะรัฐศาสตร์ จุฬาลงกรณ์มหาวิทยาลัย เพื่อประโยชน์สำหรับโครงการวิจัย
ที่ศึกษาประเด็นเรื่องความพิการและคนพิการในปัจจุบัน ภายใต้การสนับสนุนโครงการวิจัยจากกองทุนรัชดาภิเษกสมโภช
จุฬาลงกรณ์มหาวิทยาลัย แบบสอบถามนี้ มีวัตถุประสงค์หลัก ในการศึกษาความคิดเห็นของหลายกลุ่มคนในกรุงเทพมหานคร
เกี่ยวกับความพิการ และคนพิการในประเทศไทย โดยที่คำตอบ ซึ่งก็คือความคิดเห็นที่ได้จากแบบสอบถาม จะถูกปิดเป็นความลับ
และจะไม่มีการตัดสินในเรื่องความถูก หรือผิดของความคิดเห็นแต่อย่างใด **หากแต่โครงการวิจัยขอให้ผู้ตอบระบุความคิดเห็น
ที่แท้จริง** จะเป็นประโยชน์ยิ่งสำหรับโครงการวิจัย และหวังเป็นอย่างยิ่งว่าผลการวิจัยจะเป็นประโยชน์แก่สังคมไทย และวิชาการ
ในหลายสาขาวิชาด้านสังคมศาสตร์

        แบบสอบถามนี้ ประกอบด้วยคำถามเกี่ยวกับข้อมูลเบื้องต้นของผู้ตอบ และคำถามหลักสองส่วน ซึ่งคาดว่าผู้ตอบจะใช้
เวลาในการตอบคำถามประมาณ 15-20 นาที

ขอขอบคุณในความอนุเคราะห์ตอบแบบสอบถามมา ณ ที่นี้

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คำถามเกี่ยวกับข้อมูลเบื้องต้น กรุณาระบุข้อมูลลงในช่องว่าง (____)

เพศ ชาย ____ หญิง ____

อายุ ____ ปี

การศึกษาขั้นสุดท้าย _____

อาชีพ _____

ลักษณะความพิการ _____ (1. ทางร่างกายและการเคลื่อนไหว 2. ทางการมองเห็น
3. ทางการได้ยิน 4. ทางจิตใจและพฤติกรรม 5. ทางสติปัญญาและการเรียนรู้)

คำถามหลัก ส่วนที่ 1 ประกอบด้วยข้อ 1 ถึงข้อ 49   ในแต่ละข้อ จะเป็นคำกล่าวที่ขอให้ผู้ตอบระบุความคิดเห็นที่มีต่อคำกล่าว โดย จะมีช่องคำตอบ 7 ช่อง จัดเตรียมไว้ให้ ซึ่งเป็นระดับความคิดเห็นต่อคำกล่าว เช่น "มาก" (7) ถึง "น้อย" (1)   ทั้งนี้ ส่วนใหญ่จะเป็นระดับของความเห็นด้วย หรือไม่เห็นด้วยกับคำกล่าว คือ "เห็นด้วย" (7) ถึง "ไม่เห็นด้วย" (1)   ในแต่ละข้อคำกล่าว ขอให้ผู้ตอบกากบาท (X) ลงในช่องคำตอบ**เพียงช่องเดียว** ที่ตรงกับความเห็นมากที่สุด   สำหรับข้อคำกล่าวที่ไม่ทราบคำตอบ หรือไม่มีความเห็นต่อคำกล่าว ให้ตอบช่องกลาง (4)

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1. ผู้พิการที่ช่วยเหลือตัวเองได้ยาก ควรได้รับสวัสดิการจากรัฐ
   อย่างพอเพียงที่จะดำรงชีวิตอยู่ได้อย่างดี โดยไม่จำเป็นต้อง
   ทำงาน

   เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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2. คนพิการควรได้โอกาสประกอบอาชีพ มีหน้าที่การงาน

   เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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3. เป็นเรื่องที่เข้าใจได้ ที่นายจ้าง ต้องการจ้างงานคนปกติ มากกว่า
   คนพิการ เพราะจำเป็นต้องคำนึงถึงคุณภาพของงานด้วย

   เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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4. คนพิการมีข้อจำกัดในการดำเนินชีวิตประจำวัน มากกว่า
   คนปกติ

   เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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5. สังคมให้ความเห็นใจคนพิการ

   เห็นใจมาก   ค่อนข้างเห็นใจ   ไม่เห็นใจ

7	6	5	4	3	2	1

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6. คนในสังคมให้ความช่วยเหลือคนพิการ

   ช่วยเหลือมาก   ช่วยเหลือบ้าง   ไม่ช่วยเหลือ

7	6	5	4	3	2	1

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7. ปัญหาเกี่ยวกับการดำเนินชีวิตของคนพิการ เป็นปัญหา
   ที่รุนแรง

   เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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8. รัฐจำเป็นต้องแก้ไขปัญหาคนพิการ ไม่เช่นนั้นจะเกิด
   ปัญหาอื่นตามมา

   เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

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9. ความพิการ เป็นปัญหาที่กระทบคนจำนวนมาก

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

10. ท่านมีความเกี่ยวข้องกับสมาคม มูลนิธิ หรือชมรมด้าน
ความพิการ

เกี่ยวข้องมาก			เกี่ยวข้องบ้าง			ไม่เกี่ยวข้องเลย
7	6	5	4	3	2	1

11. รัฐควรมีสวัสดิการให้แก่คนพิการ เช่นการฝึกงาน เพื่อให้
โอกาสแก่คนพิการได้สามารถช่วยตัวเองได้ในอนาคต

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

12. นโยบายของรัฐด้านคนพิการ มีผลในระยะยาวต่อคุณภาพ
ชีวิตของคนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

13. ในระยะยาว สังคมจะได้ประโยชน์จากสวัสดิการคนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

14. ความพิการ นับเป็นเรื่องของโชคชะตา หรือบาป กรรม

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

15. ความพิการ เป็นเรื่องเกี่ยวกับการกระจายรายได้ของคน
ในสังคม

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

16. นับเป็นความยุติธรรม ที่จะเก็บภาษีจากคนปกติ
มากระจายสู่คนพิการ เป็นสวัสดิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

17. (ข้าม)

18. ควรปรับสภาพแวดล้อมของสังคม ให้คนพิการสามารถใช้
ประโยชน์ได้อย่างคนปกติ เช่นรถประจำทาง และถนน ที่
คนพิการใช้ได้สะดวก

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

19. มีคนกลุ่มอื่น ๆ เช่นคนไร้บ้าน หรือกลุ่มเด็ก ที่ควรได้รับ
สวัสดิการ ก่อนกลุ่มคนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

20. ผู้ที่ประสบความพิการจากความประมาทของตนเอง สมควร
    ได้รับความช่วยเหลือจากสังคม น้อยกว่าผู้พิการตามธรรมชาติ
    เช่นผู้ที่พิการแต่กำเนิด

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

21. ผู้ต้องโทษที่พิการ ควรได้รับสวัสดิการน้อยกว่าผู้พิการอื่น ๆ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

22. หากเป็นไปได้ ควรฟื้นฟูคนพิการให้เหมือนคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

23. คนพิการควรมีสิทธิ เสรีภาพ ภายใต้กฎหมาย เหมือน
    คนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

24. คนพิการควรมีสิทธิที่จะมีบทบาททางการเมือง เช่นลงสมัคร
    รับเลือกตั้งเป็นผู้แทนราษฎร เหมือนคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

25. คนพิการควรได้รับสิทธิพิเศษในหลาย ๆ เรื่อง มากกว่า
    คนปกติ จะได้ชดเชยความพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

26. เหตุผลของการมีสวัสดิการของรัฐแก่คนพิการ เช่นการจัด
    หางาน เพื่อคนพิการจะได้ช่วยเพิ่มผลผลิตทางเศรษฐกิจ
    แก่ประเทศ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

27. การขาดสวัสดิการคนพิการ จะทำให้เกิดความแตกแยก
    ในสังคม

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

28. ความพิการ ถือเป็นเรื่องปกติ ธรรมดา ของชีวิตมนุษย์

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

29. สิ่งต่าง ๆ ในสังคม เอื้อประโยชน์แก่คนปกติ มากกว่า
    คนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

30. ในสังคม มีความรังเกียจคนพิการ

รังเกียจมาก			รังเกียจบ้าง			ไม่รังเกียจ
7	6	5	4	3	2	1

31. ในสังคม มีการล้อเลียนคนพิการ

	ล้อเลียนมาก			ล้อเลียนบ้าง			ไม่ล้อเลียน
	7	6	5	4	3	2	1

32. ในสังคม มีการทำร้ายคนพิการ ด้วยเหตุของความรังเกียจ

	มีมาก			มีบ้าง			ไม่มี
	7	6	5	4	3	2	1

33. (ข้าม)

34. มีเรื่องอื่น ๆ เช่นการก่อการร้าย มลพิษในสิ่งแวดล้อม ที่ควรได้รับการแก้ไข ก่อนเรื่องความพิการ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

35. เป็นเรื่องธรรมดา ที่คนพิการจะทำงานร่วมกันกับคนปกติ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

36. เด็กพิการ ควรได้เรียนหนังสือในห้องเรียนเดียวกันกับเด็กปกติ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

37. สำหรับคนพิการ การมีชีวิตเป็นโสด น่าจะคล่องตัวมากกว่าที่จะแต่งงาน มีครอบครัว

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

38. เป็นเรื่องธรรมดา ที่คนพิการจะแต่งงาน มีครอบครัวกับคนปกติ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

39. เหตุผลของการมีสวัสดิการของรัฐแก่คนพิการอย่างพอเพียง เพื่อให้เกิดความเป็นธรรม

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

40. เมื่อมีการตั้งครรภ์ ควรมีการแนะนำให้ตรวจเช็คความผิดปกติของทารก

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

41. เมื่อมีการตั้งครรภ์ ควรมีกฎหมายบังคับให้มีการตรวจเช็คความผิดปกติของทารก

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

42. หากตรวจพบความผิดปกติของทารกในครรภ์ ควรแนะนำ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

43. หากตรวจพบความพิการของทารกในครรภ์ ควรมีกฎหมาย
บังคับให้ทำแท้ง

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

44. คนพิการส่วนใหญ่ ดูแล้วน่าจะมีปัญหาด้านเศรษฐกิจ
มากกว่าคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

45. คนพิการน่าจะมีค่าใช้จ่ายในการดำรงชีวิตสูงกว่าคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

46. คนพิการส่วนใหญ่ น่าจะมีปัญหาด้านสุขภาพ มากกว่า
คนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

47. สวัสดิการของรัฐแก่คนพิการ พอเพียงที่จะทำให้คุณภาพ
ชีวิตคนพิการเท่าเทียมกับคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

48. ท่านมีโอกาสได้ใช้อุปกรณ์ เพื่อช่วยเหลือความพิการ

มีโอกาสมาก			มีโอกาสบ้าง			ไม่มีโอกาส
7	6	5	4	3	2	1

49. คนพิการได้ใช้ชีวิตอย่างมีศักดิ์ศรี เท่าเทียมกับคนปกติ

เท่าเทียมมาก			ค่อนข้างเท่าเทียม			ไม่เท่าเทียม
7	6	5	4	3	2	1

คำถามหลัก ส่วนที่ 2 ประกอบด้วยข้อ 50 ถึงข้อ 53   ในแต่ละข้อ จะเป็นคำถาม ที่ให้ผู้ตอบระบุข้อมูล หรือ
ความคิดเห็น โดยมีตัวเลือกข้อมูล หรือความคิดเห็นจัดเตรียมไว้ให้ 2-3 ตัวเลือก **ขอให้ผู้ตอบเลือกตอบเพียง
ตัวเลือกข้อมูล หรือความเห็นเดียว** ที่ตรงกับความเป็นจริง หรือความคิดเห็นของผู้ตอบมากที่สุด โดย
กากบาท (X) ลงในช่องว่างสำหรับระบุข้อมูล หรือความเห็น (____) ที่หน้าตัวเลือก   สำหรับข้อสุดท้ายนั้น
ให้ผู้ตอบเขียนระบุความเห็นลงในเนื้อที่ ๆ จัดเตรียมไว้ให้

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50.   ท่านได้รับความช่วยเหลือจากใคร หรือหน่วยงานใด**มากที่สุด: (ตอบเพียง 1 ตัวเลือก)**

____ 1. ตนเอง / ครอบครัว / ญาติ / เพื่อน

____ 2. หน่วยงานประเภทมูลนิธิ สมาคม วัด และหน่วยงานการกุศล

____ 3. หน่วยงานของรัฐ เช่นกระทรวงการพัฒนาสังคมและความมั่นคงของมนุษย์ โรงพยาบาล
ของรัฐ

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51.   ใคร หรือหน่วยงานใด ควรเป็นผู้ให้ความช่วยเหลือคนพิการ**มากที่สุด: (ตอบเพียง 1 ตัวเลือก)**

____ 1. ตนเอง / ครอบครัว / ญาติ / เพื่อน

____ 2. หน่วยงานประเภทมูลนิธิ สมาคม วัด และหน่วยงานการกุศล

____ 3. หน่วยงานของรัฐ เช่นกระทรวงการพัฒนาสังคมและความมั่นคงของมนุษย์ โรงพยาบาล
ของรัฐ

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52.   ในสวัสดิการคนพิการ 2 รูปแบบต่อไปนี้ ท่านคิดว่าอย่างใดเหมาะสมกว่ากัน: **(ตอบเพียง 1 ตัวเลือก)**

____ 1. คนพิการอาศัยอยู่ที่สถานสงเคราะห์ของรัฐที่ได้มาตรฐานสากล

____ 2. คนพิการอาศัยอยู่ที่บ้าน โดยรัฐมอบเงินสวัสดิการอย่างพอเพียง ให้คนพิการเป็นค่าใช้จ่าย

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53.   โปรดเขียนระบุความคิดเห็นอื่น ๆ เกี่ยวกับความพิการ และ/หรือสวัสดิการคนพิการ

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Appendix C (Survey instrument directed to general public)

วันที่ 29 กันยายน 2549

คำอธิบายแบบสอบถาม

      แบบสอบถามที่ขอความอนุเคราะห์จากท่านให้ช่วยตอบนี้ จัดทำโดย ดร. พิษณุ เสงี่ยมพงษ์ ตำแหน่งผู้ช่วย
ศาสตราจารย์ ระดับ 8 ประจำภาควิชาการปกครอง คณะรัฐศาสตร์ จุฬาลงกรณ์มหาวิทยาลัย เพื่อประโยชน์สำหรับโครงการวิจัย
ที่ศึกษาประเด็นเรื่องความพิการและคนพิการในปัจจุบัน ภายใต้การสนับสนุนโครงการวิจัยจากกองทุนรัชดาภิเษกสมโภช
จุฬาลงกรณ์มหาวิทยาลัย   แบบสอบถามนี้ มีวัตถุประสงค์หลัก ในการศึกษาความคิดเห็นของหลายกลุ่มคนในกรุงเทพมหานคร
เกี่ยวกับความพิการ และคนพิการในประเทศไทย โดยที่คำตอบ ซึ่งก็คือความคิดเห็นที่ได้จากแบบสอบถาม จะถูกปิดเป็นความลับ
และจะไม่มีการตัดสินในเรื่องความถูก หรือผิดของความคิดเห็นแต่อย่างใด **หากแต่โครงการวิจัยขอให้ผู้ตอบระบุความคิดเห็น
ที่แท้จริง** จะเป็นประโยชน์ยิ่งสำหรับโครงการวิจัย และหวังเป็นอย่างยิ่งว่าผลการวิจัยจะเป็นประโยชน์แก่สังคมไทย และวิชาการ
ในหลายสาขาวิชาด้านสังคมศาสตร์

      แบบสอบถามนี้ ประกอบด้วยคำถามเกี่ยวกับข้อมูลเบื้องต้นของผู้ตอบ และคำถามหลักสองส่วน ซึ่งคาดว่าผู้ตอบจะใช้
เวลาในการตอบคำถามประมาณ 15-20 นาที

ขอขอบคุณในความอนุเคราะห์ตอบแบบสอบถามมา ณ ที่นี้

ผู้ช่วยศาสตราจารย์ ดร. พิษณุ เสงี่ยมพงษ์
ภาควิชาการปกครอง คณะรัฐศาสตร์ จุฬาลงกรณ์มหาวิทยาลัย
ถนนอังรีดูนังต์ กรุงเทพ 10330
โทร: 02-218-7230, 02-218-7204, 08-5-124-4617   E-mail: spisanu@chula.ac.th

คำถามเกี่ยวกับข้อมูลเบื้องต้น กรุณาระบุข้อมูลลงในช่องว่าง (____)

เพศ   ชาย ____   หญิง ____

อายุ   ____ ปี

การศึกษาขั้นสุดท้าย _____

อาชีพ _____

คำถามหลัก ส่วนที่ 1 ประกอบด้วยข้อ 1 ถึงข้อ 49 ในแต่ละข้อ จะเป็นคำกล่าวที่ขอให้ผู้ตอบระบุความ
คิดเห็นที่มีต่อคำกล่าว โดย จะมีช่องคำตอบ 7 ช่อง จัดเตรียมไว้ให้ ซึ่งเป็นระดับความคิดเห็นต่อคำกล่าว เช่น
"มาก" (7) ถึง "น้อย" (1) ทั้งนี้ ส่วนใหญ่จะเป็นระดับของความเห็นด้วย หรือไม่เห็นด้วยกับคำกล่าว คือ "เห็น
ด้วย" (7) ถึง "ไม่เห็นด้วย" (1) ในแต่ละข้อคำกล่าว ขอให้ผู้ตอบกากบาท (X) ลงในช่องคำตอบ**เพียงช่อง
เดียว** ที่ตรงกับความเห็นมากที่สุด สำหรับข้อคำกล่าวที่ไม่ทราบคำตอบ หรือไม่มีความเห็นต่อคำกล่าว ให้
ตอบช่องกลาง (4)

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1. ผู้พิการที่ช่วยเหลือตัวเองได้ยาก ควรได้รับสวัสดิการจากรัฐ
อย่างพอเพียงที่จะดำรงชีวิตอยู่ได้อย่างดี โดยไม่จำเป็นต้อง
ทำงาน

เห็นด้วย		กลาง ๆ			ไม่เห็นด้วย	
7	6	5	4	3	2	1

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2. คนพิการควรได้โอกาสประกอบอาชีพ มีหน้าที่การงาน

เห็นด้วย		กลาง ๆ			ไม่เห็นด้วย	
7	6	5	4	3	2	1

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3. เป็นเรื่องที่เข้าใจได้ ที่นายจ้าง ต้องการจ้างงานคนปกติ มากกว่า
คนพิการ เพราะจำเป็นต้องคำนึงถึงคุณภาพของงานด้วย

เห็นด้วย		กลาง ๆ			ไม่เห็นด้วย	
7	6	5	4	3	2	1

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4. คนพิการมีข้อจำกัดในการดำเนินชีวิตประจำวัน มากกว่า
คนปกติ

เห็นด้วย		กลาง ๆ			ไม่เห็นด้วย	
7	6	5	4	3	2	1

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5. สังคมให้ความเห็นใจคนพิการ

เห็นใจมาก		ค่อนข้างเห็นใจ			ไม่เห็นใจ	
7	6	5	4	3	2	1

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6. คนในสังคมให้ความช่วยเหลือคนพิการ

ช่วยเหลือมาก		ช่วยเหลือบ้าง			ไม่ช่วยเหลือ	
7	6	5	4	3	2	1

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7. ปัญหาเกี่ยวกับการดำเนินชีวิตของคนพิการ เป็นปัญหา
ที่รุนแรง

เห็นด้วย		กลาง ๆ			ไม่เห็นด้วย	
7	6	5	4	3	2	1

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8. รัฐจำเป็นต้องแก้ไขปัญหาคนพิการ ไม่เช่นนั้นจะเกิด
ปัญหาอื่นตามมา

เห็นด้วย		กลาง ๆ			ไม่เห็นด้วย	
7	6	5	4	3	2	1

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9. ความพิการ เป็นปัญหาที่กระทบคนจำนวนมาก

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

10. ท่านมีความเกี่ยวข้องกับสมาคม มูลนิธิ หรือชมรมด้าน
    ความพิการ

เกี่ยวข้องมาก			เกี่ยวข้องบ้าง			ไม่เกี่ยวข้องเลย
7	6	5	4	3	2	1

11. รัฐควรมีสวัสดิการให้แก่คนพิการ เช่นการฝึกงาน เพื่อให้
    โอกาสแก่คนพิการได้สามารถช่วยตัวเองได้ในอนาคต

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

12. นโยบายของรัฐด้านคนพิการ มีผลในระยะยาวต่อคุณภาพ
    ชีวิตของคนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

13. ในระยะยาว สังคมจะได้ประโยชน์จากสวัสดิการคนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

14. ความพิการ นับเป็นเรื่องของโชคชะตา หรือบาป กรรม

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

15. ความพิการ เป็นเรื่องเกี่ยวกับการกระจายรายได้ของคน
    ในสังคม

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

16. นับเป็นความยุติธรรม ที่จะเก็บภาษีจากคนปกติ
    มากระจายสู่คนพิการ เป็นสวัสดิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

17. (ข้าม)

18. ควรปรับสภาพแวดล้อมของสังคม ให้คนพิการสามารถใช้
    ประโยชน์ได้อย่างคนปกติ เช่นรถประจำทาง และถนน ที่
    คนพิการใช้ได้สะดวก

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

19. มีคนกลุ่มอื่น ๆ เช่นคนไร้บ้าน หรือกลุ่มเด็ก ที่ควรได้รับ
    สวัสดิการ ก่อนกลุ่มคนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

20. ผู้ที่ประสบความพิการจากความประมาทของตนเอง สมควร ได้รับความช่วยเหลือจากสังคม น้อยกว่าผู้พิการตามธรรมชาติ เช่นผู้ที่พิการแต่กำเนิด

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

21. ผู้ต้องโทษที่พิการ ควรได้รับสวัสดิการน้อยกว่าผู้พิการอื่น ๆ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

22. หากเป็นไปได้ ควรฟื้นฟูคนพิการให้เหมือนคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

23. คนพิการควรมีสิทธิ เสรีภาพ ภายใต้กฎหมาย เหมือน คนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

24. คนพิการควรมีสิทธิที่จะมีบทบาททางการเมือง เช่นลงสมัคร รับเลือกตั้งเป็นผู้แทนราษฎร เหมือนคนปกติ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

25. คนพิการควรได้รับสิทธิพิเศษในหลาย ๆ เรื่อง มากกว่า คนปกติ จะได้ชดเชยความพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

26. เหตุผลของการมีสวัสดิการของรัฐแก่คนพิการ เช่นการจัด หางาน เพื่อคนพิการจะได้ช่วยเพิ่มผลผลิตทางเศรษฐกิจ แก่ประเทศ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

27. การขาดสวัสดิการคนพิการ จะทำให้เกิดความแตกแยก ในสังคม

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

28. ความพิการ ถือเป็นเรื่องปกติ ธรรมดา ของชีวิตมนุษย์

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

29. สิ่งต่าง ๆ ในสังคม เอื้อประโยชน์แก่คนปกติ มากกว่า คนพิการ

เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
7	6	5	4	3	2	1

30. ในสังคม มีความรังเกียจคนพิการ

รังเกียจมาก			รังเกียจบ้าง			ไม่รังเกียจ
7	6	5	4	3	2	1

31. ในสังคม มีการล้อเลียนคนพิการ

ล้อเลียนมาก   ล้อเลียนบ้าง   ไม่ล้อเลียน

7	6	5	4	3	2	1

32. ในสังคม มีการทำร้ายคนพิการ ด้วยเหตุของความรังเกียจ

มีมาก   มีบ้าง   ไม่มี

7	6	5	4	3	2	1

33. ท่านเคยมี หรือมีการติดต่อกับคนพิการ เช่นทำงานร่วมกัน

มาก   มีบ้าง   ไม่เคย

7	6	5	4	3	2	1

34. มีเรื่องอื่น ๆ เช่นการก่อการร้าย มลพิษในสิ่งแวดล้อม ที่
ควรได้รับการแก้ไข ก่อนเรื่องความพิการ

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

35. เป็นเรื่องธรรมดา ที่คนพิการจะทำงานร่วมกันกับคนปกติ

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

36. เด็กพิการ ควรได้เรียนหนังสือในห้องเรียนเดียวกันกับ
เด็กปกติ

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

37. สำหรับคนพิการ การมีชีวิตเป็นโสด น่าจะคล่องตัว
มากกว่าที่จะแต่งงาน มีครอบครัว

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

38. เป็นเรื่องธรรมดา ที่คนพิการจะแต่งงาน มีครอบครัว
กับคนปกติ

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

39. เหตุผลของการมีสวัสดิการของรัฐแก่คนพิการอย่างพอเพียง
เพื่อให้เกิดความเป็นธรรม

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

40. เมื่อมีการตั้งครรภ์ ควรมีการแนะนำให้ตรวจเช็คความ
ผิดปกติของทารก

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

41. เมื่อมีการตั้งครรภ์ ควรมีกฎหมายบังคับให้มีการตรวจเช็ค
ความผิดปกติของทารก

เห็นด้วย   กลาง ๆ   ไม่เห็นด้วย

7	6	5	4	3	2	1

42. หากตรวจพบความผิดปกติของทารกในครรภ์ ควรแนะนำ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

43. หากตรวจพบความพิการของทารกในครรภ์ ควรมีกฎหมาย
บังคับให้ทำแท้ง

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

44. คนพิการส่วนใหญ่ ดูแล้วน่าจะมีปัญหาด้านเศรษฐกิจ
มากกว่าคนปกติ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

45. คนพิการน่าจะมีค่าใช้จ่ายในการดำรงชีวิตสูงกว่าคนปกติ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

46. คนพิการส่วนใหญ่ น่าจะมีปัญหาด้านสุขภาพ มากกว่า
คนปกติ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

47. สวัสดิการของรัฐแก่คนพิการ พอเพียงที่จะทำให้คุณภาพ
ชีวิตคนพิการเท่าเทียมกับคนปกติ

	เห็นด้วย			กลาง ๆ			ไม่เห็นด้วย
	7	6	5	4	3	2	1

48. (ข้าม)

49. คนพิการได้ใช้ชีวิตอย่างมีศักดิ์ศรี เท่าเทียมกับคนปกติ

	เท่าเทียมมาก			ค่อนข้างเท่าเทียม			ไม่เท่าเทียม
	7	6	5	4	3	2	1

คำถามหลัก ส่วนที่ 2 ประกอบด้วยข้อ 50 ถึงข้อ 53 ในแต่ละข้อ จะเป็นคำถาม ที่ให้ผู้ตอบระบุข้อมูล หรือ ความคิดเห็น โดยมีตัวเลือกข้อมูล หรือความคิดเห็นจัดเตรียมไว้ให้ 2-3 ตัวเลือก **ขอให้ผู้ตอบเลือกตอบเพียง ตัวเลือกข้อมูล หรือความเห็นเดียว** ที่ตรงกับความเป็นจริง หรือความคิดเห็นของผู้ตอบมากที่สุด โดย กากบาท (X) ลงในช่องว่างสำหรับระบุข้อมูล หรือความเห็น (____) ที่หน้าตัวเลือก สำหรับข้อสุดท้ายนั้น ให้ผู้ตอบเขียนระบุความเห็นลงในเนื้อที่ ๆ จัดเตรียมไว้ให้

50. (ข้าม)

51. ใคร หรือหน่วยงานใด ควรเป็นผู้ให้ความช่วยเหลือคนพิการ**มากที่สุด**: **(ตอบเพียง 1 ตัวเลือก)**

    ____ 1. ตนเอง / ครอบครัว / ญาติ / เพื่อน

    ____ 2. หน่วยงานประเภท มูลนิธิ สมาคม วัด และหน่วยงานการกุศล

    ____ 3. หน่วยงานของรัฐ เช่น กระทรวงการพัฒนาสังคมและความมั่นคงของมนุษย์ โรงพยาบาล

          ของรัฐ

52. ในสวัสดิการคนพิการ 2 รูปแบบต่อไปนี้ ท่านคิดว่าอย่างใดเหมาะสมกว่ากัน: **(ตอบเพียง 1 ตัวเลือก)**

    ____ 1. คนพิการอาศัยอยู่ที่สถานสงเคราะห์ของรัฐที่ได้มาตรฐานสากล

    ____ 2. คนพิการอาศัยอยู่ที่บ้าน โดยรัฐมอบเงินสวัสดิการอย่างพอเพียง ให้คนพิการเป็นค่าใช้จ่าย

53. โปรดเขียนระบุความคิดเห็นอื่น ๆ เกี่ยวกับความพิการ และ/หรือสวัสดิการคนพิการ

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