

Disability Issue Perceptions: Disability Rights and Disability as a Social Problem

การรับรู้ประเด็นความพิการ: สิทธิคนพิการและ
ความเป็นปัญหาสังคม

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Abstract

The primary interest of this research paper concerns the life condition experienced by the current Thai disabled population. Reviewing the Thai disability literature, this paper has identified the much disadvantaged life condition among people with disabilities, which reflects three specific patterns. People with disabilities feel the lack of essentialities in life, which probably relates to inadequate, inefficient, and ineffective disability welfare services. Also, the general public, while living in the same society as those with disabilities, seems to show very little concern regarding the disability issue. This paper, therefore, identifies three groups of people—people with disabilities, public officials responsible for social welfare, and the general public—as relevant to the three patterns. Using an issue definition as the conceptual framework, this research, then, hypothesizes different perceptions on the disability issue among the three groups of people to be the main reason for the current disability situation. In particular, this research expects to discover varying perceptions on disability rights and disability as a social problem.

In terms of research methodology, this research uses a cross-sectional survey to study such perceptions. One-way analysis of variance, follow-up Tukey post hoc tests, some chi square, goodness-of-fit tests, along with a cross-tabulation are pursued to make a distinction between the perceptions.

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The empirical results mostly confirm the research hypotheses. People with disabilities exhibit a significantly more positive view on disability rights as social, special rights as well as perceive disability as more of a social problem than do the other two non-disability groups. Applying public policy theory on issue identification, particularly in Kingdon (2003 & 2005) and Blankenau (2001), this paper argues that the conflicting or divided perceptions on the disability issue are primarily responsible for the unfocused attention to the disability issue and the problem correction on the part of the State. In addition, in its response to the general public's apathetic view of the disability issue, the State overlooks the disability issue's saliency and gravitates toward other more salient issues for probably more political benefit (Van Horn, Baumer, & Gormley, 2001; Ramesh, 2000; Yu, 1996; Crone, 1993). As a consequence, the status quo or mediocre disability welfare and ultimately the disadvantaged life condition among disabled people remain. Again applying the discussion in Kingdon (2003 & 2005) and Blankenau (2001), this paper suggests that those with disabilities turn to the political and policy environments of the disability issue. Within the disability group setting, they could try to expand the issue in order to make it more publicly known. They could try to be part of the disability policy implementation. They may also try to locate and acquire further assistance from people of high social status, acting as policy entrepreneurs. All these efforts of the disability population are for the purpose of amending problems regarding the disability issue within the public policy process.

Keywords: Disability, Issue Identification, Public Policy, Social Problem

บทคัดย่อ

บทความวิจัยนี้ ให้ความสนใจแก่สภาพชีวิตของประชากรคนพิการไทย จากวรรณกรรมด้านคนพิการไทย บทความนี้ฉายภาพชีวิตที่ด้อยโอกาสของคนพิการ ซึ่งน่าจะสะท้อนรูปแบบสามประการ กล่าวคือ คนพิการมีความรู้สึกขาดสิ่งจำเป็นในการดำรงชีวิตประจำวัน ที่น่าจะเป็นผลมาจากสวัสดิการคนพิการที่ไม่เพียงพอ ขาดประสิทธิภาพ และคุณภาพ นอกจากนี้ สาธารณชนที่แม้จะอยู่ในสังคมเดียวกันกับคนพิการ แต่ขาดความสนใจในประเด็นความพิการ งานวิจัยนี้จึงได้ระบุบุคคลสามกลุ่ม

คือ คนพิการ บุคลากรในภาครัฐที่ปฏิบัติงานด้านสวัสดิการสังคม และสาธารณชนทั่วไป ว่ามีส่วนเกี่ยวข้องกับรูปแบบสามประการข้างต้น จากการใช้กรอบแนวคิดนโยบายสาธารณะเรื่องการนิยามประเด็นปัญหา บทความนี้มีสมมติฐานว่า การที่บุคคลสามกลุ่มนี้มีมุมมองแตกต่างกันในประเด็นความพิการ เป็นที่มาของสภาวะการณ์ และสภาพชีวิต คนพิการไทย หรือกล่าวอย่างจำเพาะเจาะจงได้ว่า บทความนี้จะคาดว่าจะค้นพบความแตกต่างในมุมมองด้านสิทธิคนพิการ และความเป็นปัญหาสังคมในประเด็นความพิการ

สำหรับระเบียบวิธีวิจัย งานวิจัยนี้ใช้วิธีการสำรวจแบบตัดขวาง เพื่อศึกษา มุมมองในประเด็นความพิการในหนึ่งช่วงเวลา และใช้การวิเคราะห์เชิงปริมาณด้วย *One-way analysis of variance* และ *Tukey post hoc tests* ตลอดจน *Chi square*, *goodness-of-fit tests* และ *Cross-tabulation* เพื่อพิสูจน์ความแตกต่างของมุมมองดังกล่าว

ผลการศึกษาเชิงประจักษ์ส่วนใหญ่ตรงกับสมมติฐาน กล่าวคือ คนพิการมี มุมมองเชิงบวกกับสิทธิคนพิการ ในฐานะเป็นสิทธิพิเศษทางสังคม และมองความพิการ เป็นปัญหาสังคม มากกว่ากลุ่มคนที่ไม่พิการอีกสองกลุ่ม อย่างมีนัยสำคัญทางสถิติ จากการประยุกต์ใช้ทฤษฎีนโยบายสาธารณะเรื่องการนิยามปัญหา โดยเฉพาะใน *Kingdon* (2003 และ 2005) และ *Blankenau* (2001) งานวิจัยนี้อภิปรายว่า มุมมองที่แตกแยกในประเด็นความพิการ เป็นที่มาของการขาดจุดศูนย์รวมในความ สำคัญแก่ประเด็นความพิการ และการแก้ไขปัญหาโดยภาครัฐ นอกจากนี้ ภาครัฐจะ ตอบสนองมุมมองของสาธารณชนที่เฝ้าติดตามประเด็นความพิการ โดยมองข้าม ความสำคัญของประเด็นความพิการไป พร้อมกับหันไปให้ความสำคัญแก่ประเด็นอื่น ๆ ที่สังคมจะให้ความสำคัญมากกว่า ซึ่งการกระทำดังนี้ จะทำให้รัฐได้ประโยชน์เชิง การเมือง มากกว่าที่จะตอบสนองประเด็นความพิการ ที่สังคมไม่ได้ให้ความสำคัญ เท่าใดนัก (*Van Horn, Baumer, & Gormley, 2001; Ramesh, 2000; Yu, 1996; Crone, 1993*) สำหรับผลที่ตามมา ก็คือ สภาพการณ์ด้านความพิการ และสภาพชีวิต ที่ด้อยโอกาส ตลอดจนสวัสดิการคนพิการที่ด้อยคุณภาพ จึงยังคงอยู่ และจากการ อภิปรายของ *Kingdon* (2003 และ 2005) และ *Blankenau* (2001) บทความวิจัย นี้เสนอแนะว่า คนพิการน่าจะหันไปให้ความสำคัญแก่สิ่งแวดล้อมเชิงการเมืองและ นโยบาย ภายในประเด็นความพิการให้มากขึ้น ทั้งนี้อาจผ่านกลุ่มที่คนพิการจัดตั้งขึ้น เช่น สมาคมต่าง ๆ ที่เกี่ยวกับความพิการ คนพิการอาจจะพยายามแพร่ขยายประเด็น ความพิการให้เป็นที่รับรู้สาธารณะให้มากขึ้น หรืออาจพยายามเข้าไปเป็นส่วนประกอบ ของการปฏิบัตินโยบายสาธารณะด้านความพิการ ตลอดจนอาจอาศัยความช่วยเหลือ

ของบุคคลสำคัญเชิงสังคม ในฐานะเป็นผู้ประกอบการนโยบายด้านความพิการ โดยความพยายามของประชากรคนพิการนี้ ก็เพื่อประโยชน์ในการแก้ไขปัญหาในประเด็นความพิการ ภายในกระบวนการนโยบายสาธารณะ

คำสำคัญ: ความพิการ การระบุประเด็น นโยบายสาธารณะ ปัญหาสังคม สิทธิ

I. General Description of Research

Disability represents both social and physical phenomena, making those experiencing it naturally different from non-disabled people. The World Health Organization 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 culture, social status, and environment to which one belongs (Kanhawatana, 2003: 9 & 14). Associated with the disadvantage experienced by people with disabilities is probably the fact that they constitute a marginal or minority group. The National Statistical Office (2004: 13) reports that the Thai disability population of all types comprises 1.7 percent of the total population. This research paper makes note of the disadvantaged condition of the life of people with disabilities in Thailand. For example, Hongladarom (1999: 37, translated) expresses the idea that

“There should be laws requiring all public hospitals, the Department of Social Welfare [currently Ministry of Social Development and Human Security], as well as foundations to have a well-defined and properly planned system of welfare, geared toward people with disabilities, as opposed to relying 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.”

With an aim to study the disability issue, this research paper pays attention to the life condition among the disabled population in Thailand, while looking closely into disability literature, particularly in Thailand (e.g., Hongladarom, 1998, 1999, 2000, & 2002; Paewking and Ornopas, 2003; Klincharoen, 1995;

Wimonkanchana, 1998). The literature suggests the general disadvantaged life condition experienced by Thai disabled people; three patterns of disadvantage tend to surface. First, they feel the lack of many essential elements in life. One major difficulty confronting them seems to be transportation and commuting, where, in most cases, they are unable to use public transportation. In order to commute, most disabled people have to turn to taxis, which are expensive, adding more to the cost of living, which is already high in general, due to their extraordinary expenses, such as health care and rehabilitation (Kwanchuen & Mongkolswasdi, 2003: 18). Second, the lack of essentialities in life among disabled people possibly relates to disability policies that are unresponsive to their needs. The current services seem to be inadequate, inefficient, and ineffective. In the view of Hongladarom (2002: 86), the State picks and chooses to care for only easy matters. For instance, the State's rehabilitation facilities refuse to offer services to people with a high degree of disability. Also, in releasing patients with disabilities from hospitals, there is no coordinated effort among doctors, nurses, physical therapists, and social workers in discussing future plans for the patients and their families, such as courses of rehabilitation and possible problems that could emerge in the future (Hongladarom, 1998: 32-33). Third, there is a sense of apathy on the part of the general public toward the disability issue and people with disabilities. For instance, Pitakmahaket (1994: 43) found that some people with disabilities are fired from jobs for the reason that they negatively affect a company's image. In most cases, employers prefer not to hire disabled people for economic reasons (Tapawpong, 1994: 135-138). In an illustration of Hongladarom (2000: 87-88), a hairdresser refuses service for Thongtien Hongladarom, who is disabled, since her wheelchair seems to cause an inconvenience in the shop. The wheels of the wheelchair make the shop's floor dirty, and the fee for the hairdo seems to be unworthy of such inconvenience.

From the above observation concerning the disability condition in Thailand, three parties are identified to be involved with it. Primarily, there are people with disabilities sensing a lack of essentials in life. Second, there are public officials, mostly in the Ministry of Social Development and Human Security, whose main function is social welfare policy. The third party comprises people

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without disabilities. Even though they are neither directly involved with nor affected by the disability issue, they live in the same society and share the society's resources with those with disabilities. It is primarily surmised that these three relevant parties have contradictory views of the disability issue.

With the above discussion, this research paper focuses more on disability issue identification as one important element of public policy. The main function of a public policy is to solve a problem. With problem identification, there is a demand for the State to resolve the problem, and sometimes by making it realize opportunities to care about a problem. In Rushefsky's discussion, "Perception is the 'registering or receiving of an event' that has consequences for people or groups. Definition is the interpretation of those events. ... 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, so it is important to understand who is doing the perceiving and how that perception is defined" (Rushefsky, 2002: 6). Chambers and Wedel (2005: 8), along the same line, states that "Understanding a social problem 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." In other words, the "reality" of a social issue or a problem, if ever existing, is a social construct, derived from perception, belief, experience, as well as other factors, such as religious, ethnic, racial, gender, cultural, and regional backgrounds. Thus, identifying and defining issues of public concern have always been an incredibly subjective enterprise (Theodoulou & Kofinis, 2004: 101-103). And there is an intimate connection between perception, which is mostly subjective, and issue identification and definition.

More specifically, this research paper aims at inquiring into two major aspects of perception on the disability issue. First, a large part of the issue involves the rights of those with disabilities. The disability literature constantly mentions the fact that people with disabilities feel the discrimination against them, negatively affecting their rights. For example, in Hongladarom (2000: 55, translated) it is stated that "We are people with disabilities, facing a lot of

disadvantages in life. I [Thongtien Hongladarom] always feel discriminated against, as if we were second-classed citizens.” And in Hongladarom (1998: 117-118, translated), “More times than I [Thongtien Hongladarom] can count, Thai banks have 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 out and sign certain forms.” One other important aspect of the disability issue is the perception of it as a genuine social problem. In public policy terminology, a public policy is the State’s course of action in dealing with social problems (Anderson, 2006: 6). However, not all problems are considered social problems, in that some problems could be viewed as personal in nature. “The distinction between private and public issues is important to the policy process. Before the 1930s New Deal programs, for example, issues such as poverty, failing to save for retirement, and unemployment were more readily considered as private problems. Similarly, before the Great Society initiatives of the 1960s, issues such as family hunger and unaffordable housing were not easily identified as public problems” (Theodoulou & Kofinis, 2004: 100). Also, according to Gerston’s discussion, “Even though children in some families may watch television or be ‘on line’ until late at night, it is not the task of public policymakers to set standards or rules for such matters. Only in cases of child endangerment do authorities even consider stepping in, and only if there is a clear case of violated law such as child abandonment” (Gerston, 2002: 6). Therefore, with the perception of disability as a non-social problem, an effort to ameliorate the disadvantaged condition among disabled people would be easily considered luxurious and thwarted.

As the literature on issue identification and definition abounds, this research paper pays particularly close attention to Kingdon (2003 & 2005) and Blankenau (2001). Kingdon (2003: 90-91) refers to the problem that rouses the attention of the public and government as the problem stream: “There is a difference between a condition and a problem. We put up with all kinds of conditions everyday, and conditions do not rise to prominent places on public agendas. Conditions come to be defined as problems, and have a better chance

of rising on the agenda, where we come to believe that we should do something to change them.” (Kingdon, 2005: 148-149). Along the lines of Kingdon (2003 & 2005), Blankenau (2001: 38 & 45-46) states that several problems exist within the purview of the government, yet only a select few can be afforded attention at any one time. A divided problem stream stymies an issue from becoming the government’s agenda, as there is disagreement on issue identification and definition. For instance, in the late 1980s and early 1990s in the U.S., some disagreement on the issue of health insurance as a problem of cost of or access to the insurance slowed down the attempt to introduce more universal coverage as compared to Canada, which had adopted its national health insurance much sooner-in the 1960s. Such a divided problem stream reflects a disagreement on the health care issue definition in the U.S., causing somewhat of a delay in its reaching the agenda of the government.

II. The Study Framework, Objective, and Hypotheses

This research, then, applies the above overview of perception on disability rights and the perception of disability as a social problem, as well as the theory of issue identification and definition, to the disability issue. The specific objective of this research paper is to examine the perceptions of the three relevant parties — people with disabilities, public officials responsible for social welfare policies, and the general public — regarding disability rights and disability as a social problem. As the research hypothesizes, different perceptions among these three parties are expected. In particular, disabled people are hypothesized to have the most positive view regarding disability welfare as disability rights, while the other two groups have a less positive view. Also, while people with disabilities are expected to view disability as a social problem, the other two groups would perceive it to a lesser degree of a social problem. The “underdog” principle helps construct the research hypotheses. According to this principle, African Americans and women in the U.S., for example, would call for public policies that guarantee equality in job situations, such as equal pay among races and genders (Hurst, 1992: 287). By the same token, with the minority and disadvantaged condition of those with disabilities, they would welcome public policies that

uphold their rights and call for the State's action through public policy in responding to disability as a social problem. On the other hand, the other two groups, since they are better-off, would be less receptive to the view of disability rights and disability as a social problem. Figure 1 shows the framework for the research paper. The contradictory perceptions or divided problem stream could well be significant. According to Blankenau (2001: 45-46), the divided problem stream would cause a delay in State's action in ameliorating the current disadvantaged condition among people with disabilities. In other words, not much policy effort, particularly regarding policy implementation, which is where most State's action takes place, is foreseeable in the attempt to correct the disability condition.

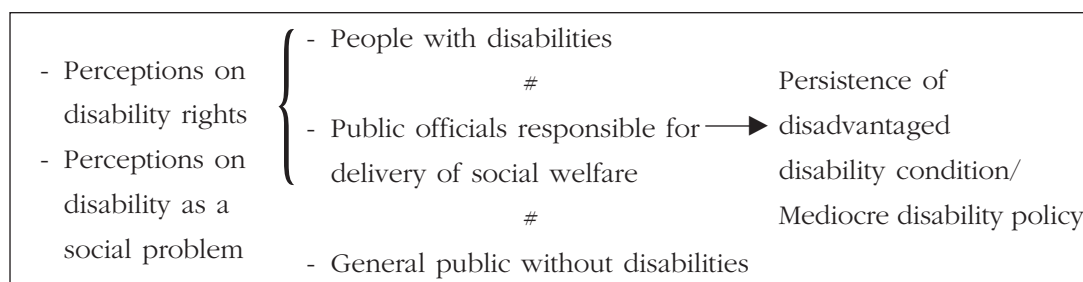


Figure 1 The research framework

III. Methodology and Procedure

Populations, samples, and sampling procedure

A survey research method is pursued in examining the perception of the disability issue among the three parties discussed above. These three groups of people, therefore, constitute the three populations in the study. The first population comprises people with disabilities in the Bangkok Metropolitan Area. Public officials in the Ministry of Social Development and Human Security in the central administration in Bangkok, as the second population, represent the State in delivering disability policy and welfare. The third population comprises the general public or people in the middle class or above in the 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, disability welfare, as a redistributive policy, usually involves the transfer of private revenue,

through the system of progressive taxation, from the more well-to-do to the less wealthy (Ripley & Franklin, 1986: 178). For disability welfare, the relocation of resources, if any, would be from these people in the middle class or above to those with disabilities. For practical reasons, this study identifies people with at least a bachelor's degree as constituting those in the middle class or above, as educational attainment should relate well to other factors that also determine social class. According to Rothman (2002: 99), formal education credentials are a prerequisite to accessing most higher-paying jobs, while low education generally closes doors to job opportunities and other economic rewards.

The sample sizes of the three groups or samples are based on the sizes of their corresponding populations identified in Table 4 of Yamane (1967: 398) at a 95 percent level of confidence and a ± 10 level of precision. The population of people with disabilities in the Bangkok metropolitan area comprises 77,444 (www.service.nso.go.th). That of public officials in the Ministry of Social Development and Human Security in the central administration in Bangkok comprises 1,753 (Personnel Information of Ministry of Social Development and Human Security, 2005). People with a university education within the Bangkok metropolitan area are chosen to represent middle class people, comprising 1,473,000 (Data on Social Development and Quality of Life, National Economic and Social Development Board, 2002 [2545] — www.nesdb.go.th). These populations yield the samples of 100 disabled people, 95 public officials, and 100 middle class people of the general public who are non-disabled. These three samples constitute the respondents to the survey, which examines their perceptions of interest.

Multiple techniques of non-probability sampling were used (Babbie, 2004: 182-185). Some judgments were made to determine appropriate, possible locations of each population. Some judgments were also made on certain quotas of respondents in each population, such as the proportion of male and female respondents. Also, disability is usually classified into five type — mobility, vision, hearing, mental and behavioral, as well as intellectual and learning (Yaemyue, 2005: 10). However, it was further determined that a much larger proportion of people with mobility, vision, and hearing impairments than that of people with mental and intellectual disabilities should constitute the sample of disabled people;

only those understanding and being able to respond well to the survey are included in this particular sample. In addition, some prior respondents, especially in the sample of people with disabilities, were asked for help in identifying latter ones. Some other respondents were chosen and approached on the basis of their availability and willingness to participate in the survey.

Non-probability sampling is believed to solicit quality respondents and responses, which should mitigate and compensate for its weakness in non-representation. In probability sampling, some identified and selected respondents from various techniques, such as simple random sampling or systematic sampling, might not wish to take part in a study. Such respondents cannot be forced to cooperate and, by all means, can refrain from participating in the survey. Most survey research simply asks for people's cooperation. Even if identified respondents agree to participate in the study, some may be rather busy at the time of survey and, therefore, can 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 believed to be a viable method of data collection.

Questionnaire design, pretest, variables, and data collection

Within the research framework, a survey instrument is constructed via the help of literature and theories on rights and social problems. There are fifty-three items in the instrument, mostly for the purpose of scrutinizing the perception of disability rights and disability as a social problem among the three groups of people identified in the study. Most of the questionnaire items have seven scales of opinion as response options, ranging from highest (7) to lowest (1) on each opinion or from agreement to disagreement with each item. A few items have a shorter scale of response options than seven. Within each item, the meanings of response options are clearly marked, with proper answer slots to be chosen

by the respondents.

All questionnaire items benefit from theories of rights and social problems, as well as the disability literature. In terms of rights theory, there are three forms of rights — civil rights, political rights, and social rights. Social rights are most progressively related to disability rights, since they entitle people with disabilities to disability welfare (Manning, 2003: 46; Heywood, 2004: 210 & 298). Other rights-related concepts are also amalgamated to help examine the perception of disability rights. The concept of social citizenship justifies the social rights of disabled people, entitling them to social resources, and calls for the State's role in disability welfare provision (Manning, 2003: 66; Heywood, 2004: 211). For purposes of equity, special treatment is given to disadvantaged groups, hence, the idea of group-based resource distribution. Special needs of people with disabilities justify special or more resource distribution to them in most modern and especially welfare states (Heywood, 2004: 213 & 295-297; Stone, 2002: 43-47; Blakemore, 2003: 29-30). More radical ideas of disability welfare comprise the decommodification of labor (Twine, 1994: 19) and the right not to work (Taylor, 2004: 42), possibly giving social support to disabled people, hence, freeing them from work. The concepts of multiculturalism, social integration, and social cleavages suggest a positive endorsement of communal and cultural diversity, ending the discrimination against minorities (Heywood, 2004: 306 & 215-216); Farrah, 1994: 56; Gartner & Lipsky, 1998: 73; Namsiripongpan, 1996: 120; Purdy, 2001: 682).

Similar to the theory of issue definition, social problem theories suggest that the identification of a social problem depends on perception. Many factors distinguish social problems from personal or private problems, such as scope, intensity, and the consequence of a problem (Chambers & Wedel, 2005: 7; Cobb & Coughlin, 1998: 417-418; Cobb & Elder, 1983: 84, 110, & 97-101; Gerston, 2004: 25-28 & 36). Related to social problem theories are the ideas of the public sphere, collectivism, and the public interest, realizing the inter-relationship and inter-dependence among individuals, disabled and non-disabled alike, in society (Heywood, 2004: 400; Sangiampongsa, 2003: 303-308; Chatterjee, 2002: 375; Twine, 1994: 105-107; Theodoulou & Kofinis, 2004: 10-13; Gerston, 2002: 5).

A few other concepts also relate to perspectives on the disability issue. Kirby (2004) discusses four perspectives on disability — the biomedical perspective, the social construction perspective, the perspective on disability as difference, and the perspective on disability as a universal experience. Heywood (2004: 306-311) discusses four justifications for the State's social welfare — the liberal case of welfare, the economic efficiency reason, the conservative perspective, and the social democratic perspective. These perspectives on the disability issue and social welfare imply that there are various, different perceptions on the disability issue and policy, perhaps causing the divided problem stream in the disability issue studied in this research.

The above discussion on the literature and theories is instrumental in the derivation of the questionnaire items and design. Generally, a few items are combined to form variables on disability rights and social problem perspectives in order to examine differences and/or similarities in the perceptions among the three groups of interest. The scales of certain items are reversed, so that variables are properly formed from composite scores of items. Some single items, by themselves, suffice to become separate variables. After the questionnaire was designed, 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. After the pretest, variables that are composite scores of items went through a reliability test, using alpha coefficients or Cronbach's Alpha. For a few variables with low alpha coefficients, items are separated and given particular variable names. In the survey process, there are actually three versions of the survey instrument directed to each of the three groups; however, all but a few items are identical among the three versions. The last item in the survey instrument is an open-ended item soliciting general comments, if any, on the disability issue and identifiable limitations in the implementation of disability welfare on the part of public officials. Table 1 lists all of the perception variables on disability rights and disability as a social problem with appropriate meaning on low and high scores.

Table 1 List of variables[†] and their meanings

Variables	Meaning
Rights	Max (28) = Pro-disability rights. Min (4) = Not pro-disability rights.
Right not to work	Max (7) = Pro-right not to work (radical, social rights) / Perceiving that the disabled are entitled to the right not to work. Min (1) = Not pro-right not to work.
Distribution by tax	Max (7) = Pro-distributive justice / Believing in relocation of social resources from the non-disabled to the disabled (radical, social rights). Min (1) = Not pro-distributive justice.
Special rights	Max (7) = Pro-special, disability rights / Believing in the entitlement of people with disabilities to special rights (radical, social rights). Min (1) = Not pro-special, disability rights.
Social problems	Max (70) = Perception of disability as a social problem. Min (10) = Perception of disability as a personal problem.
Integration/work	Max (14) = Pro-social integration among disabled and non-disabled people in work and school settings / Pro-rights. Min (2) = Not pro-social integration in work and school settings / Not pro-rights.
Integration/personal	Max (14) = Pro-social integration among disabled and non-disabled people in social and personal domains (e.g., marriage) / Pro-rights. Min (2) = Not pro-social integration in social and personal domains / Not pro-rights.

Table 1 List of variables[†] and their meanings (continued)

Variables	Meaning
Inclusion	<p>Max (28) = Pro-social inclusion / Pro-rights / Against prenatal testing and abortion but for inclusion of disability in society.</p> <p>Min (4) = Not pro-social inclusion / Not pro-rights / Pro-prenatal testing and abortion to eradicate disability.</p>
Hate crimes	<p>Max (21) = Perceiving hostility toward disabled people / Perceiving the non-existence of disability rights.</p> <p>Min (3) = Perceiving no hostility toward disabled people / Perceiving the existence of disability rights.</p>
Economic problem	<p>Max (14) = Perceiving economic problems among people with disabilities / Perceiving the non-existence of disability rights.</p> <p>Min (2) = Perceiving no economic problems among people with disabilities / Perceiving the existence of disability rights.</p>
Health problem	<p>Max (7) = Perceiving health problems among people / Perceiving that there should be more disability policies.</p> <p>Min (1) = Perceiving no health problem among people with disabilities / No disability policy is perceived to be necessary.</p>
State/private	<p>Max (3) = Social problem perspective / Perceiving disability as a social problem in need of State's action.</p> <p>Min (1) = Personal problem perspective / Perceiving disability as a personal problem unnecessary for State's action.</p>

Table 1 List of variables[†] and their meanings (continued)

Variables	Meaning
Limitation	<p>Max (14) = Perceiving that disabled people have limitations in daily life.</p> <p>Min (2) = Perceiving that disabled people have no limitation in daily life.</p>
Societal attitude	<p>Max (7) = Perceiving positive societal attitude toward disabled people.</p> <p>Min (1) = Perceiving negative societal attitude toward disabled people.</p>
Societal practice	<p>Max (7) = Perceiving positive societal practice toward disabled people.</p> <p>Min (1) = Perceiving negative societal practice toward disabled people.</p>
Welfare adequacy	<p>Max (7) = Perceiving that the disability welfare is adequate / Higher extent of disability policy is unnecessary.</p> <p>Min (1) = Perceiving that the disability welfare is inadequate.</p>
Disability dignity	<p>Max (7) = Perceiving that disabled people have dignity in daily life.</p> <p>Min (1) = Perceiving no dignity in daily life among disabled people.</p>
Liberal	<p>Max (7) = Pro-liberal perspective on welfare / Perceiving that the disability welfare is offered so that the disabled can help themselves in the future.</p> <p>Min (1) = Not pro-liberal perspective on welfare.</p>
Efficiency	<p>Max (7) = Pro-economic efficiency perspective on welfare / Perceiving that the disability welfare is offered, so that disabled people may be productive for the economy.</p> <p>Min (1) = Not pro-economic efficiency perspective on welfare.</p>

Table 1 List of variables[†] and their meanings (continued)

Variables		Meaning
Conservative	Max (7)	= Conservative perspective on welfare / Perceiving that the disability welfare contributes to social unity.
	Min (1)	= Non-conservative perspective on welfare.
Social justice	Max (7)	= Pro-social justice perspective on welfare / Perceiving that the disability welfare is for the purpose of social justice.
	Min (1)	= Not pro-social justice perspective on welfare.
Social construction	Max (7)	= Social construction perspective on disability / Perceiving that the social environment should better accommodate the disabled.
	Min (1)	= Non-social construction perspective on disability.
Biomedical	Max (7)	= Biomedical perspective on disability / Perceiving that disability should be corrected.
	Min (1)	= Non-biomedical perspective on disability.
Universal experience	Max (7)	= Perspective on disability as universal experience / Perceiving that everybody confronts disability sometime in life.
	Min (1)	= Not perceiving disability as a universal experience.
Difference	Max (7)	= Perspective on disability as difference / Perceiving the disability culture as being dominated by the non-disability culture.
	Min (1)	= Not perceiving that the disabled are dominated by the non-disabled.
Actual-state/private ^D	Max (7)	= High disability welfare attainment among people with disabilities from the State.
	Min (1)	= Low disability welfare attainment from the State / Disability welfare is obtained through private sources.

Table 1 List of variables[†] and their meanings (continued)

Variables	Meaning
Adaptable ^o	Max (7) = Difficulties in implementation of disability welfare / Difficult for the disability issue to expand. Min (1) = No difficulty in implementation of disability welfare / Probable for the disability issue to expand.
Disability contact ^{G&O}	Max (7) = Having much contact with disabled people. Min (1) = Having no / little contact with disabled people.
Institution/home	1 = Pro-State's institutions as source of the disability welfare. 2 = Pro-home care for the disabled with financial assistance from the State.
Last item (open-ended)	Areas of implementation problems of disability welfare / Opinion and comments on disability issue and disability welfare.

[†] Sample questionnaire items for the derivation of variables are: "Those with high degrees of disability should not have to work to earn a living" (single-item variable = Right not to work); "The disability issue constitutes a severe problem" (item within the composite score of variable = Social problem); "People mock those with disabilities" (item within the composite score of variable = Hate crime).

^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.

After the questionnaire design and construction, data collection was pursued through in-person, mostly structured interviews between September and November 2006. The survey team consists of a research assistant and three other data collectors, who are master's degree students in the Faculty of Political Science at Chulalongkorn University. Through non-probability sampling, the locations of the three samples were identified by the research assistant. In surveying people with disabilities, the survey team went to major places where disabled people could be easily located, such as the Thai Disabled Development Foundation, the Association of the Physically Handicapped, the Council of Disabled People of Thailand, the Thailand Association for the Blind, the Thailand Association for the Deaf, and various facilities for disability rehabilitation and vocational training, such as the Center for Vocational Training for People with Disabilities at Pak Kret and the Institution for Children with Disabilities at Pak Kret. The survey team also went to the Government Lottery Office. In interviewing public officials involved with social welfare policies, the survey team went to the 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 the survey. Responses came from most departments and divisions of the Ministry, such as the Office of the Permanent Secretary, the Department of Social Development and Welfare, and the Bureau of Welfare Promotion and Protection of Children, Youth, the Disadvantaged, Persons with Disabilities, and Older Persons. In surveying 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 these are probably the places where people in the middle class or above could be most conveniently located. A preliminary question regarding educational attainment was asked early in the survey in order to screen for only people in the middle class or above. At all survey sites, data collectors maintained their presence during the entire survey time in order to help clarify some items and meanings of their response options to the respondents, if necessary.

IV. Results

The survey administration primarily examined the perceptions of the three samples regarding disability rights and disability as a social problem. A one-way analysis of variance followed by Tukey *post hoc* means comparisons were used within each of the perception variables — the dependent variables in the statistical tests — in comparing the perceptions among the three samples. Nineteen of twenty-six ANOVA tests showed significant results. Tukey *post hoc* comparisons were pursued as follow-up tests among the nineteen dependent, perception variables with significant ANOVA test results. Table 2 shows the results of the Tukey tests on each of the dependent variables, with significant F values from ANOVA results in parentheses. As shown in Table 2, the pattern of variation in perceptions tends to support the hypotheses, with only a few exceptions.

Table 2 Tukey *post hoc* comparisons with significant ANOVA results

Variables	Groups & Means [‡]		
Rights (F = 5.45**)	Disabled people 5.19	Public officials <u>23.89</u>	General public <u>23.70</u>
Right not to work (F = 3.12*)	General public 5.38	Disabled people <u>4.89</u>	Public officials <u>4.72</u>
Special rights (F = 9.17**)	Disabled people <u>5.17</u>	General public <u>4.76</u>	Public officials 4.07
Social problem (F = 3.49*)	Disabled people <u>46.67</u>	Public officials <u>45.44</u>	General public <u>43.88</u>
Integration/work (F = 12.05**)	Disabled people 13.10	Public officials <u>11.82</u>	General public <u>11.67</u>
Integration/personal (F = 4.79*)	Disabled people 10.86	General public <u>10.05</u>	Public officials <u>9.76</u>
Inclusion (F = 4.55*)	General public 12.79	Disabled people <u>12.00</u>	Public officials <u>10.65</u>

Table 2 Tukey *post hoc* comparisons with significant ANOVA results (continued)

Variables	Groups & Means [‡]		
Hate crime (F = 16.89**)	Disabled people 12.99	Public officials <u>10.49</u>	General public <u>9.92</u>
Health problem (F = 11.36**)	Disabled people 4.56	General public <u>5.49</u>	Public officials <u>5.62</u>
State/private (F = 45.70**)	Disabled people 2.78	General public 1.96	Public officials 1.66
Limitation (F = 6.30**)	Disabled people 9.77	Public officials <u>10.67</u>	General public <u>11.14</u>
Societal attitude (F = 31.06**)	Disabled people 4.00	Public officials <u>5.33</u>	General public <u>5.47</u>
Societal practice (F = 13.25**)	Disabled people 4.12	Public officials <u>4.92</u>	General public <u>4.95</u>
Welfare adequacy (F = 5.86**)	Disabled people 3.45	General public <u>4.28</u>	Public officials <u>4.33</u>
Efficiency (F = 12.88**)	Disabled people 6.24	General public <u>5.57</u>	Public officials <u>5.31</u>
Social justice (F = 5.14**)	Disabled people 6.27	Public officials <u>5.86</u>	General public <u>5.69</u>
Social construction (F = 5.73**)	Disabled people 6.78	Public officials <u>6.51</u>	General public <u>6.37</u>
Universal experience (F = 9.09**)	Disabled people 5.66	General public <u>4.80</u>	Public officials <u>4.52</u>
Difference (F = 3.81*)	Disabled people 6.25	General public <u>5.93</u>	Public officials <u>5.66</u>

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

* $p < .05$ (One-way ANOVA).

** $p < .01$ (One-way ANOVA).

For a few variables, it is more appropriate to use chi square tests, mostly because they do not apply to all three groups of interest. But these tests can well supplement the ANOVA and Tukey tests. Table 3 shows the significant chi square, goodness-of-fit test result for the public officials' perception of the bureaucratic adaptability in responding to the disability issue. Public officials in the study could indicate the adaptability perception within a range of non-adaptability (7) to adaptability (1) (variable = Adaptable). This variable is analyzed alongside the social problem perspective (variable = Social problem), as suggested by Cobb & Coughlin, 1998: 418). The chi square, goodness-of-fit test in Table 4 shows the sources of assistance received by people with disabilities. The sources range from the public, consisting of State institutions associated with the Ministry of Social Development and Human Security, to the middle range, comprising foundations, associations, churches, and other charity organizations, and to private — the self, family, friends and relatives. Table 5 represents the cross-tabulation between the perspective on the appropriate institution as the type of disability care and the three groups of interest in the study (variables = Institution/home and Groups). The appropriate institutions or welfare types include either State institutions or home-care for those with disabilities. All chi square tests in Tables 3 to 5 show significant results, which are further discussed extensively along with ANOVA and Tukey tests.

Table 3 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
χ^2 (df = 6) = 67.92, $p < .01$							

Table 4 Chi square, goodness-of-fit test for the sources of general assistance among people with disabilities (variable = Actual-state/private)

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

Table 5 Contingency table of groups and perception on disability welfare types and the chi square test result (variables = Groups[§] & Institution/home)

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, $p < .01$					

[§] Variable that distinguishes the three groups / samples in the study.

Simple correlation analyses conclude the quantitative analyses of mostly perception variables. For instance, among the non-disabled people in the study (ns = 195) previous or routine contact with people with disabilities tend to be associated with a positive attitude regarding disability rights and the perception of disability as a social problem ($r_{\text{Contact, Right}} = .16, p < .05$; $r_{\text{Contact, Social problem}} = .27, p < .01$; $r_{\text{Contact, Integration/work}} = .22, p < .01$; and $r_{\text{Contact, Hate crime}} = .16, p < .05$). The perception on disability rights and disability as a social problem positively relate to each other ($r_{\text{Right, Social problem}} = .23, p < .01$). On the other hand, perception variables regarding radical rights, especially the perception of the right not to work, have more difficulty in significantly relating to other variables (e.g., $r_{\text{Right not to work, Right}} = .05, p > .05$; $r_{\text{Right not to work, Social problem}} = .08, p > .05$).

The last, open-ended item in the questionnaire garners general comments. As the direct target group of the disability policy, disabled people tend to give more detailed and specific comments on the disability issue and welfare than the other two groups. People of all disability types frequently mention transportation as the main obstacle in life and ask for the State's action in this particular aspect. There are also frequent requests for the disability allowance to increase from 500 to 1,000 baht per month. At the same time, there is much expressed desire for work, vocational training, and somewhat special treatment in regard to job opportunities. For public officials, the implementation problem of disability welfare is most frequently identified in terms of inadequate funding.

V. Discussion

Previous research has studied attitudes toward the disability issue. Chen, Brodwin, Cardoso, and Chan (2002), for example, compare the attitude among American, Taiwanese, and Singaporean college students regarding dating and marriage of people with disabilities. Hernandez, Keys, and Balkazar (2004) compare the attitude of people in the public and private sectors on disability rights, as endorsed by the Americans with Disabilities Act (ADA) of 1990. Along the same lines, this research hypothesizes and examines possibly varying perspectives toward disability rights and disability as a social problem. In the discussion of Blankenau (2001: 45-46), such contradictory perceptions or the divided problem stream could provide a plausible explanation for the mediocre disability welfare and disadvantaged condition among those with disabilities. The discussion below, then, turns to disability rights and disability as a social problem, in which different views are expected.

Perception on disability rights

The main objective of this research is to see if there is a disparity in disability rights perceptions. According to Table 2, people with disabilities have a significantly more positive view on disability rights than do those without disabilities (variable = Rights). The same pattern of perception is found for other

rights-related variables. The literature on rights suggests that attitude on the social integration of people with disabilities is generally more positive in vocational and educational settings than in personal domains, such as dating and marriage (Chen, Brodwin, Cardoso, & Chan, 2002: 5-7). The results of this research seem to show such a pattern. Whereas the attitude on integration in work and school domains of disabled people is clearly distinguished from those without disabilities (variable = Integration/work), such a finding is somewhat less clear in their integration attitude in the personal domain, especially marriage (variable = Integration/personal). People with disabilities also perceive more problems in the area of disability rights than do the other two groups. They tend to perceive a high degree of hate crimes of various forms inflicted on them — loathing, mocking, and harm (variable = Hate crime). They perceive an inadequacy in the Thai disability welfare policy (variable = Welfare adequacy) as well as unsupportive societal attitudes and practices toward them (variables = Societal attitude & Social practice, respectively). Disabled people are also distinguished from the other two groups in their perceptions of disability welfare as the duty of the State (variable = State/private). One single, slight exception is the fact that people with disabilities are not totally against prenatal testing for deformed babies (variable = inclusion). This is probably because such testing is mostly part of prenatal care nowadays. They also feel much difficulty in life from the lack of essentials as well as much discrimination against them (e.g., variables = Welfare adequacy, Hate crime, Societal attitude, & Societal practice). Therefore, as Purdy (2001: 685) says, all good parents like to ensure that their children receive good care when they cannot be present. It might be hard for those with disabilities to reject the idea of prenatal testing and even abortion in the case of fetal deformity.

Associated more with the idea of social rights (Manning, 2003: 66; Heywood, 2004: 211) are radical rights variables in this study. Analyses on these variables show somewhat interesting results. The general public exhibits the most positive attitude toward the right not to work. People with disabilities seem to be reluctant to indicate a positive non-working attitude (variable = Right not to work). Taylor (2004: 30-31) would explain such a finding in terms of non-working guilt, which is common among disabled people. They might also feel ashamed to reveal a highly

positive attitude on such radical rights. The same can be said for the perception on resource and income distribution to people with disabilities from non-disabled people (variable = Distribution by tax). There is no variation among people with or without disabilities in this perception. On the other hand, those with disabilities tend to believe that they deserve special treatment as a disability right (variable = Special rights).

This research can find some empirical explanations for a less positive view on radical rights among people with disabilities. They desire not only to be well-integrated into society (variables = Integration/work & Integration/personal), but also to be useful members of society. With the perception of physical limitations 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 they do not perceive limitations resulting from their health condition, as compared to the perceptions of the other two groups. In addition, disabled people have a significantly more positive attitude toward the economic efficiency reason of disability welfare than the other two groups (variable = Efficiency). Social welfare could be viewed as a mechanism that helps strengthen the workforce and, in turn, contributes to a prosperous economy (Heywood, 2004: 307). Those with disabilities perhaps view themselves as ready and equipped to contribute to the societal and economic well being if sufficiently supported by 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.

In most respects, this research reports a distinguishably positive view on disability rights among disabled people from those without disabilities. In some further illustrations, they perceive a higher extent of disability welfare as a contribution to social justice than does the general public (variable = Social justice). Table 2 also reports that people with disabilities reveal more a positive attitude toward disability as social construction than the other two groups (variable = social construction). This should be considered a rather strong rights perspective, as this perspective, seeing disability as social labeling, explains the disadvantage among disabled people as a result of the social environment (Kirby, 2004: 231).

On a similar note, Batavia (1993: 735-736) makes a distinction among three closely related terminologies. Impairment is a loss or abnormality of psychological, physiological, or anatomical structure. Only when such impairment manifests itself in functional limitation does it lead to a disability condition. Once such a limitation exists, there is a handicap, which is a disadvantage for an individual. Therefore, the social construction perspective of disability, within the social rights argument, calls for society to conform to those with disabilities, mostly by altering the social environment to suit them. This idea is contradictory to the biomedical perspective of disability, which suggests that people with disabilities should be made as similar as possible to those without disabilities. Also, the view of disability as difference discusses the stigmatization of disabled people as a result of cultural imperialism and the sense of oppression of non-disabled people over those with disabilities (Kirby, 2004: 231-242). The empirical results of this study in Table 2 indicate that disabled people perceive such cultural domination (variable = Difference) and would like the society to conform to their needs (variable = Social construction).

The social construction perspective of disability closely relates to the multiculturalism argument, which strongly involves social rights. It advocates the coexistence of the dissimilarities or different groups and culture in the same society. It not only recognizes cultural diversity, but also holds that such difference should be respected and affirmed. Social cleavage becomes the term used to distinguish one culture from another in a diverse society (Heywood, 2004: 46-47 & 214). Disability then should become one social cleavage, as the increase in life expectancy generally translates into ill health and disability, making the sheer number of people with disabilities rise (Freedman, Martin, & Shoeni, 2004: 19).

Some other ideas and concepts help support social rights as disability rights. The primary rationale for social rights is justice based on the access to social resources. Since equality partially leads to justice, a social rights policy is needed, as it helps to provide equality as the end result by certain means of resource distribution (Theodoulou & Kofinis, 2004: 15). Since people with disabilities usually have higher needs due to generally higher expenses for health care, assistive devices, and personal assistance services, as examples, they should have

more access to social resources than do people without disabilities so as to achieve some equality in society (Winter & Williams, 2001: 676-677; ADA of 1990; Martin & Schoeni, 2004: 6-12; Batavia & Beaulaurier, 2001: 142-144; Colbridge, 2002: 27-30; Hurst, 1992, 289-290). Stone (2002: 289-290) also discusses the specific and special needs of certain groups of people, usually the disadvantaged, leading to the idea of group-based distribution, such as affirmative action policy in education in the United States. Rawls, as one major advocate of the principle of equality in resource distribution, maintains that disadvantaged people must always be included in all distribution consideration (Hurst, 1992: 290). The empirical findings in Table 2 show that people with disabilities express a more positive view on disability as special rights (variable = Special rights) and on disability welfare as a contribution to social justice (variable = Social justice).

The perception of disability as a social problem

It was anticipated in this research that variation in social welfare perception in the disability issue among the three groups of interest. Similar to the generally varying issue definitions, the distinction of disability as a social problem, as opposed to a personal problem, depends on perspectives. Chambers and Wedel (2005: 7) state that a social problem involves the worsening of the life quality of many people. Likewise, Cobb and Coughlin (1998: 417-418), as well as Cobb and Elder (1983: 110), discuss issue expansion in affecting a large number of people as an important source of social problem recognition. But the literature discusses other factors, as well, in pushing for a social problem labeling. Gerston (2004: 25-28 & 36), for example, discusses resources as the price that a society has to pay if a problem lingers without correction. The higher the cost, the more likely a response to the problem will be initiated. On the other hand, resources also suggest the cost needed for the correction of a problem. Thus, the lower the cost of attacking the problem, the more probable the public policy will be initiated. Within this discussion, a social problem labeling is needed for the State's action in devising methods of response to a social problem.

Table 2 indicates that people with disabilities perceive disability more as a social problem than do non-disabled people (variable = Social problem).

For example, they tend to perceive a severity within the problem. This implies that they would call for public policies to respond to such a problem. The chi square, goodness-of-fit test result in Table 3 supplements the varying social problem perspectives among the three groups. Adaptability or administrative feasibility constitutes a survey item that could be directed only to public officials, since it is not applicable to the other two groups (Cobb & Coughlin, 1998: 418). Thus, this item, although it examines the perception of the disability issue as a social or private problem, is not included in the composite score of the social problem or one-way ANOVA. The perception on administrative feasibility or bureaucratic adaptability of the disability policy (variable = Adaptable) is analyzed separately in Table 3. According to Cobb and Coughlin (1998: 418), an issue likely expands to become a social problem when a solution to the problem exists. From Table 3, along with the significant test result, the high frequencies of counts fall in the direction of non-adaptability, hence, adding to the perception among public officials of the disability issue as less of a social problem. This further separates the social problem perspectives of disabled people and public officials indicated in Table 2 (variable = Social problem).

Contrary to the disability issue perception as a social problem would be the perception of it as a personal problem. For such issues as national security and environmental pollution, the nature of the problem as social can be easily determined, perhaps by the number of people affected (e.g., Chambers & Wedel, 2005: 7; Cobb & Coughlin, 1998: 417-418). But for other issues, such determination might not be as simple. The issue of cigarette smoking, as an example, had been perceived by most levels of governments as a personal vice that did not warrant any specific regulation by the State until the last few decades (Theodoulou & Kofinis, 2004: 10-11). Disability could be another issue whose social problem nature is debatable. Even in the United States, "Disability is most commonly perceived as a personal tragedy, isolated and spontaneous, and so rarely worthy of a second thought" (Taylor, 2004: 33). It therefore remains a fringe issue in Taylor's opinion. However, some statistical figures indicate otherwise. According to the 2000 Census in the U.S., 8.7 million adults and children with disabilities live in poverty. Twenty percent of disabled people do not complete high school,

compared with ten percent of those without disabilities. The median earning of people with disabilities is about sixty percent of that of people without disabilities (Batavia & Beaulaurier, 2001: 140-142; Freedman, Martin, & Schoeni, 2004: 6; ADA of 1990). Similarly in Canada, there are frequent complaints that both the national and local governments have been slow to implement a comprehensive disability policy to remove barriers to those with disabilities and to include them as equal partners in all aspects of society (Pushing doors open, 2003: 24). In Thailand, the disadvantaged condition among people with disabilities, as mentioned in Hongladarom (1998, 1999, 2000, & 2002), perhaps could be explained by the nature of the disability issue.

Disability and public interest

The nature of public interest within the disability issue may contribute to the difficulty in the social problem perception of the issue. Public interest generally provides a rationale for government intervention in society, as it generates a greater good for a society (Stone, 2002: 21). Following is the observation on the public interest within the disability issue. First, unlike some illnesses, most disabilities are not contagious; therefore, the spread and prevalence are somewhat contained. Second, Chambers and Wedel (2005: 20-22) mention gainers and losers in social problems. Losers with reference to a social problem bear the cost of an existing problem. People with disabilities confront such costs in, for instance, medical expenses, particularly high transportation costs, as well as adaptation to the social environment that mostly suits the non-disabled majority (Batavia & Beaulaurier, 2001: 140-143). On the other hand, non-disabled people tend to gain from the existing disability problem. Disability welfare policies are generally considered redistributive policies, as they take resource from people without disabilities and redistribute them to those with disabilities as social rights and special rights (Ripley & Franklin, 1986: 178). With the little extent of policy, not many resources are taken from non-disabled people, who therefore gain from the existing disability problem. Third, in public interest terminology, as the State's action is generally for the purpose of social benefit as a whole (Stone, 2002: 21), there could be some debate and disagreement as to such societal benefit within the disability policy. The issue and policy could be viewed as incorporating a

narrow or limited scope of social interest, since people with disabilities constitute a minority, hence, a low level of prevalence. The above discussion suggests a possible perception of disability policy as merely affecting private interest, as opposed to public interest.

The disparity in disability issue perception: Further theoretical application and analysis

The results of the quantitative analyses seem to exhibit patterns that support the hypotheses of the study. People with disabilities, public officials involved with social welfare policies, and the general public in the middle class or above have disparate perceptions of both disability rights and disability as a social problem. In particular, people with disabilities reveal a positive perception on rights and view disability as a social problem; at the same time, such a perspective is distinct from that of the other two groups. These findings conform to the “underdog” principle, in that the policy target group, while feeling disadvantaged, would desire more State action regarding disability welfare policy (Hurst, 1992: 287). The rights and social problem perspectives of public officials and the general public, on the other hand, seem not to vary much from each other, as indicated by the Tukey *post hoc* analyses in Table 2. Public officials, although more directly involved with the disability issue than the general public, do not view the issue more positively in terms of disability rights or disability as a social problem. This, perhaps in part, explains the mediocre, inefficient, and ineffective disability welfare as illustrated by disabled people in Hongladarom (1998, 1999, 2000, & 2002) and Kanhawatana (2003), for example. Empirically, Table 2 shows that those with disabilities perceive disability welfare to be less adequate than do the other two groups (variable = Welfare adequacy). Also, Table 4 shows that people with disabilities mostly receive welfare and assistance from private sources — self, friends, family, and relatives — rather than from the State. Van Meter and Van Horn (1975: 472-473) suggest that the attitudes of bureaucracies affect policy implementation.

The above discussion relates to the theory of issue definition, which is very dynamic. This is due to possibly varying perspectives on an issue, which

dictate how and the extent to which the issue is approached. Jeon and Haider-Markel (2001: 216) state that how an issue is defined determines alternative policy solutions. Only when the disability issue is defined in terms of the sociopolitical or minority/civil rights perspective, as opposed to medical and economic perceptions, stronger, more radical policy and action are pursued, such as the attempt to change the environment and social structure as sources of discrimination against those with disabilities. The empirical findings of this study, likewise, show such dynamics of disability issue perception. For example, there are various economic efficiency perspectives regarding disability welfare, as those with disabilities have a stronger view than the other two groups that the disability welfare policy will result in national economic benefit (variable = Efficiency in Table 2). By the same token, disabled people have a much more positive view of disability as a universal experience or fact of life than do the other two groups. Non-disabled people are less aware than disabled people that at some point in their life, they could face a disability condition, such as during old age (variable = Universal experience in Table 2). Much more extent of varying perspectives on the disability issue is shown in Table 2.

Applying the divided problem stream in Blankenau (2001: 45-46) and Kingdon (2003: 94-97), this research argues that the varying perceptions on disability rights and disability as a social problem represent a divided disability problem stream. This is similar to the divided problem stream within the health insurance system in the U.S., where both access and cost are perceived as major problems. Whereas a commonality in the issue perception increases its clarity as well as more focused attention and problem correction, different viewpoints are like a shadow over the issue, slowing down the State's action, since it would need more time to digest information on the issue. Contradictory perspectives bring along differing and, possibly, conflicting policy solutions. According to Kirby (2004: 237-244), the perception of disability as a universal experience suggests that each individual probably will face some types of disability at certain times in their life. This calls for an obligation that people, during their time of non-disability, must provide assistance to those with disabilities, such as by paying a disability tax. On the other hand, the perspective on disability as a social construction suggests that

the disadvantage facing people with disabilities is due to the structure of the social environment in that it fails to accommodate disabled people. This calls for a policy that brings the social environment closer to them, for example in the creation of more accessible public transportation. More time is then needed in deciding the appropriate State action in solving the disability issue.

In responding to social problems, the State generally pays particular attention to the public perception of those problems. In fully developed democracies like the U.S., public policies must be, at least partially, based on the consent of the governed, especially the majority public. Van Horn, Baumer, and Gormley (2001: 231-241) refer to general public opinion as living room politics. The living room is usually the place where people receive information on public issues and policies through television and newspapers. Politically attentive people may voice their opinion to decision makers — their representatives as well as national and local governments — through various means such as letters, telephone, and e-mails. Public opinions, especially strong ones, limit the politicians' freedom. Even in less democratic and non-democratic countries at times the State must seriously take the perspectives of the public at large into consideration while formulating public policies. In both Thailand and Indonesia, for instance, there had been a particularly well-developed, comprehensive social security system for public sector employees during the bureaucratic polity regime. But as the regime shifted toward democracy, bringing along electoral challenges, both governments were automatically forced to derive and expand their social security policies and coverage to include another segment of the public — private sector employees — mostly for electoral benefit (Ramesh, 2000: 534-545). For a non-democratic example, Hong Kong has always placed economic policy ahead of social policy. But the government secures its legitimacy within a non-democratic regime by ensuring a prosperous economic condition while at the same time improving the social condition of the public through social services (Yu, 1996: 419-421). These examples suggest that most governments, democratic and less democratic alike, feel the need to be pragmatic in upholding their survival by tending well to the general public.

Usually, politicians gravitate toward issues salient to the public, hence, responding to public opinion, generally for electoral benefit. Crone (1993: 55) states that a political will is needed for them to affect a social welfare policy. The empirical results of this research suggest a less positive view, especially among the general public, on disability rights. Table 2 indicates that the public does not perceive a very high level of discrimination against people with disabilities, such as hate crimes, in comparison to the perception of those with disabilities (variable = Hate crime). The non-disabled majority perceives both favorable societal attitude and practice toward people with disabilities (variables = Societal attitude & Societal practice). The general public also tends to perceive fewer social problems within the disability issue (variable = Social problem). From the perception of the general public, the disability issue and policy seem to have no or very little bearing on it; and it has been apathetic toward the disability issue. This perhaps, in turn, results in its support of private sources of disability welfare, such as the self, family, friends, and relatives, rather than the public source — the State (variable = State/private). From these findings, this research concludes that the general public perceives disability as a non-salient issue, hence, not necessitating any immediate State action or role. At the same time, Table 2 and Table 3 also suggest that, like the general public, public officials responsible for social welfare policy have a less positive view of disability rights and tend to perceive disability less as a social problem than do disabled people. This perhaps explains the mediocre disability policy, at least from the perspective of disabled people, such as their perception of the inadequacy of disability welfare (variable = Welfare adequacy in Table 2). As such, Van Meter and Van Horn (1975: 472-474) state that policy implementers' disposition affects their response to a social problem — policy implementation. With the disability issue's non-saliency, this paper argues that there exists not much political will for elected officials to affect any change in current disability welfare policy implementation. There would instead be a more political pay-off for them to turn to other more salient issues — those catching the interest of the general public. As a result, the *status quo* or mediocre disability welfare remains, while disabled people continue to experience a lack of essentials in life, as shown by their perception of inadequate, inefficient, and ineffective disability welfare. Simultaneously, with the discrimination

against disabled people, at least from their own perspective, they continue to perceive apathetic societal attitudes and practice toward them. Figure 2 summarizes the above discussion.

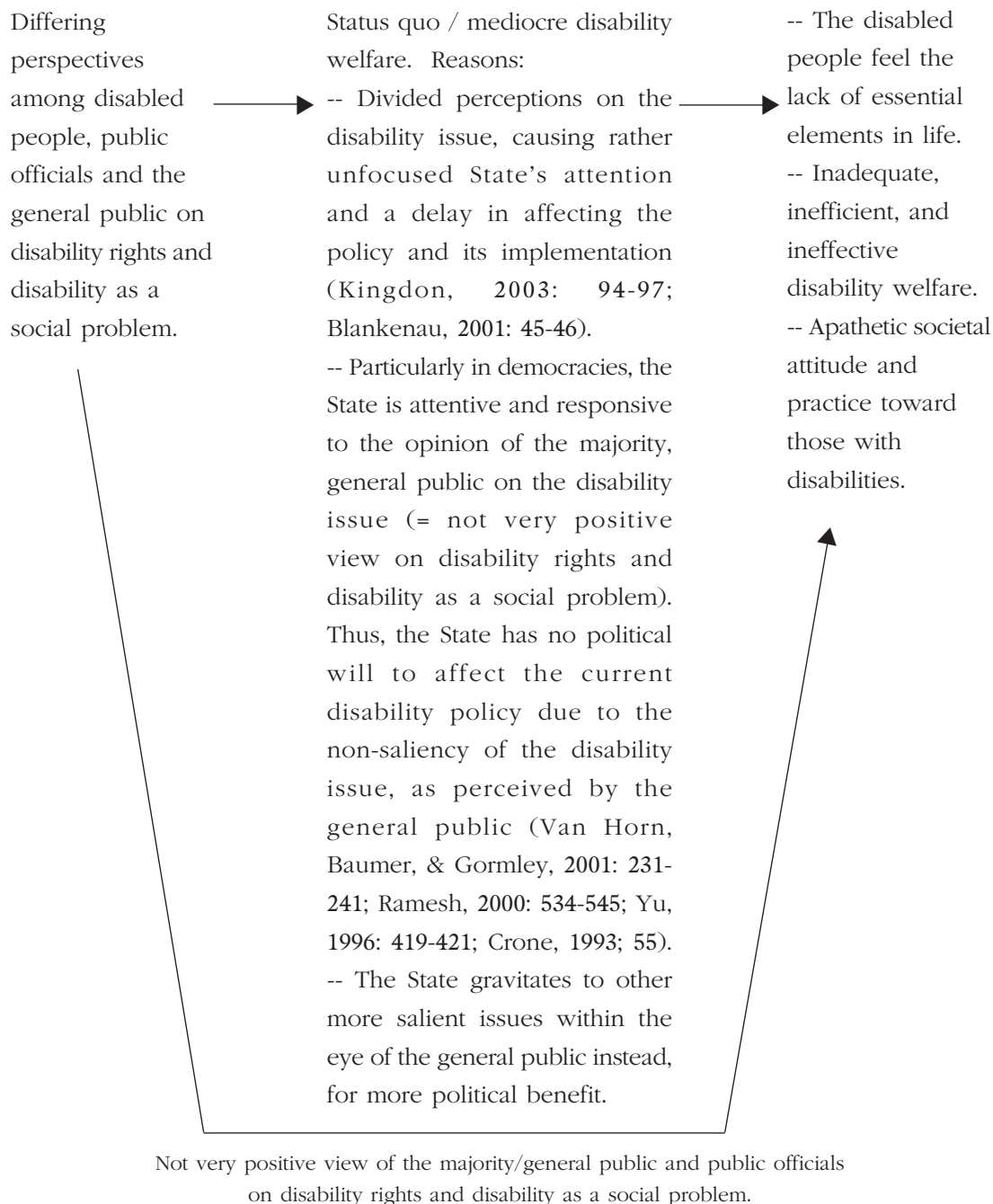


Figure 2 Summary empirical and theoretical analyses for the disability issue

Politicizing and publicizing the disability issue: Some recommendations

Among people with disabilities, their perception on disability rights and disability as a social problem reflects discrimination against them. Even though discrimination is, to a large extent, perception-based, in democracies, simply sensing a problem probably justifies some action or movement to demand the State's action within 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." According to Kingdon (2003: 146-150), other than the problem stream which has been discussed and analyzed in this research in terms of disability issue perception, there are also political and policy streams. The former constitutes the political atmosphere of an issue, while the latter suggests its possible solution — the public policy. In working within these two streams, where people with disabilities must become more politically active, they can theoretically increase disability issue saliency.

Within the political context of the disability issue, disabled people may become active through a group setting. They need to become players or actors of the disability policy, instead of simply the policy target group (Bickers & Williams, 2001: 170). Usually, demand for State action is more efficiently and successfully made in concert, probably through the disability group setting (Dye, 2002: 21), which is already discussed in some of the Thai disability literature, particularly Thongtien (1998, 1999, 2000, & 2002) and Namsiripongpan (1996). The existing disability groups, such as the Association of Physically Handicapped of Thailand (www.cdpt.or.th), could be used as the base for further expansion of their activities.

Within the political context, the Thai social welfare ideology, even through the eyes of those with disabilities, does not totally correspond to the welfare state ideology. Table 2 suggests that disabled people are perhaps guilty and/or ashamed of strongly expressing a positive view on the right not to work and distributive justice through the progressive tax system (variables = Right not to work & Distribution by tax, respectively). Table 5 also shows their preference of home-care over institutional-care for disability welfare. But they do express a favorable attitude toward special rights as compensation for their disability condition (variable = Special rights). They do prefer the State as the primary source of disability welfare

provision over private sources (variable = State/private). They also tend to perceive inadequacy in the current disability welfare (variable = Welfare adequacy). Many in the open-ended question express a wish that the current monthly disability stipend would increase from 500 to 1,000 baht (last survey item). These latter views seem to be somewhat in accordance with the concept of social rights, which are resource dependent (Heywood, 2004: 208). Usually, radical demand or the demand made via the use of radical ideology, such as the social rights concept within the disability issue, would more likely affect changes in the existing mediocre disability welfare. Yishai (1993) and Nossiff (1998) both state that only feminist thought, a radical ideology, would achieve comprehensive and concrete women's rights policies, such as the pro-choice policy, whereas religious or libertarian perspectives would not. More effort could be geared toward framing such a radical demand.

Not only can disability groups benefit from the radical demand and radical ideologies, but they can also take advantage of a favorable political atmosphere and setting. Political events do matter. According to Kingdon (2003: 153), "Administrations change, bringing with them marked changes in policy agendas. Seats change hands in Congress, creating opportunities to push some proposals and to bury others." The demand made at politically appropriate times more likely yield favorable results. Therefore, the disability groups should be attentive to changes in the political atmosphere for the benefit of affecting disability policy. The new constitution and the new administration after the upcoming general election, for example, may provide such a favorable political atmosphere and setting for the push for disability policy demand.

The more active role of people with disabilities within the political context could also include their attempt to expand the disability issue, increasing the public perception of the issue as a social problem. As suggested in Table 2, the general public tends not to perceive it as a social problem (variable = Social problem). Expanding an issue is publicizing it to different groups in order to energize them to become involved or at least to become aware of the problem, while perceiving it as a social problem (Cobb & Coughlin, 1998: 416). With such public awareness and perception comes the State's response to the social problem (Van Horn, Baumer, & Gormley, 2001: 231-241; Ramesh, 2000: 534-545; Crone,

1993: 55; Yu, 1996: 419-421). In the present research, social problem characteristics are incorporated into the survey items becoming a composite score of a variable that identifies the perception of disability as a social or private problem (variable = Social problem).

In expanding the disability issue, the disability groups can maneuver their effort around the social problems' characteristics, perhaps in the following ways. They could publicize the prevalence and severity of the problem by, for instance, including the elderly in the population of people with disabilities. In order to promote the public interest in disability welfare, activities and accomplishments of disability groups may be advertised to the public. They can also send a message to the general public that the disability welfare policy has a long-term effect on 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 almost everybody faces some kinds of impairment at some points in life, such as during pregnancy, illness, or old age. The close relationship between disability and poverty as well as disability and unjust income distribution could be emphasized to the general public. Some justification could be devised to promote the idea that the disabled population and disability issue deserve the State's attention ahead of other groups of people and other issues. A point could also be made that the disability problem, without correction, could have negative social consequences, especially poverty and social disunity (Cobb & Coughlin, 1998: 417-418; Cobb & Elder, 1983: 84-101; Gerston, 2004: 25-28 & 36).

Aside from the attempt to expand the disability issue to catch the interest of the public and the State, action and activities of disability groups could also be geared toward policy suggestions which constitute the policy stream or the policy context, as discussed by Kingdon (2003: 168-169) and Blankenau (2001: 38-39). For practicality reasons, such a role could be enacted at the policy implementation stage of the policy process. The discretion of bureaucracy at this stage is significant, in that it implies their ability to make decisions as well as interpretations of disability laws, such as determining the kinds, amount, as well as the extent and shape of disability programs (Ham & Hill, 1993: 151-152). As such, contact and communication between the bureaucracy and disability groups might

be possible and beneficial. They can work together as well as share and learn from each other's information. As the inefficiency and ineffectiveness, particularly with reference to interruptions, in disability welfare policies are possibly due to the lack of well-coordinated and follow-up services (e.g., Wimonkanchana, 1998: 62; Hongladarom, 1998: 32-33), the disability groups may work with the bureaucracy in deriving the means to correct such problems. Volunteers could be recruited, perhaps from the disability population itself, to form follow-up teams. Such cooperation between the bureaucracy and disability groups might create the favorable policy context discussed by Blankenau (2001: 38-39) and Kingdon (2003: 168-169). Within the process of sharing and consultation, the result could be an improved disability policy implementation. Such cooperation refers to co-provision and co-production of public policy in executing a public function (Johnson, 2004: 77-78). There is, however, a possibility that the bureaucracy might not welcome the idea of co-production or co-provision. The effort and commitment of the disability groups might be necessary, however, given the current inefficient and ineffective disability policy, at least from the perception of those with disabilities.

One other way of politicizing and publicizing the disability issue is to locate policy entrepreneurs concerned with the issue. Other than the sheer number of people affecting 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 (Chambers & Wedel, 2005: 7). For example, after Ms. Rose Kennedy, mother of U.S. President John F. Kennedy, had become a public advocate of the mental disability issue, the federal appropriation for the problem increased tremendously. Kingdon (2003: 122) would probably designate Ms. Kennedy as a policy entrepreneur within the mental disability issue. These entrepreneurs could come from many parts of society — inside or outside the government, elected or appointed positions, interest groups and certain disabled people themselves, non-governmental organizations (NGOs), or research organizations, as examples. But their main characteristics must be their willingness to invest their resources — time, energy, reputation, and sometimes money — in the hope of future returns, whether these

returns be policies that they approve, satisfaction from active participation in the issue, personal aggrandizement by way of job security or career promotion, and promotion of certain values reflected in the policy being advocated (Kingdon, 2003: 122-123).

The public policy literature suggests that policy entrepreneurs are usually instrumental in affecting a policy redirection, whenever it is needed. Ho (2002) discusses the attempt to change the practice of traditional Chinese medicine (TCM) in Hong Kong toward more regulation. Since regulation usually precedes recognition, TCM practitioners could benefit from the policy change and, therefore, become entrepreneurs of TCM regulation policy, along with a few Western-trained doctors who were also on the Legislative Council and believe that TCM regulation was essential to the public health. In another study, Seto (2002) discusses the termination of the leprosy isolation policy in Japan, where the Leprosy Prevention Law, since the early 20th century, secluded leprosy patients mostly in leprosaria. An individual, Otani, became the policy entrepreneur that advocated the termination of the Law, which is difficult, since patients and staff had depended on the operation of leprosaria for a long time. With strong experience from many positions in the public health sector, Otani was prudent in deriving the termination method and procedure while maneuvering the termination moves. Likewise, within the disability issue, such entrepreneurs, if located, could possibly affect some of the problems at least in the perception of disabled people — the discrimination as well as the inadequacy, inefficiency, and ineffectiveness of disability welfare.

VI. Conclusion

This research paper has proved that there is in fact a disparity in perceptions regarding major aspects of the disability issue — disability rights and disability as a social problem. Such divided perception complicates the understanding of the disability issue, slowing down the State's action in response to this issue. Furthermore, the State, being pragmatic, mostly pays close attention and responds to the general public's view on most issues. Since the non-disabled majority has a less than positive view on disability rights and does not quite view disability as

a social problem, these perceptions, then, negatively affect the State's attention and action on the issue. This research paper argues that the Thai State turns to other more salient issues for more political pay-off. On the part of bureaucracies involved with social welfare policy, their view on disability rights and disability as a social problem is not much more positive than that of the general public, while offering inadequate, inefficient, and ineffective disability welfare, at least in the eyes of people with disabilities. Again, the State or politicians theoretically should not have the political will to affect any much change in disability welfare delivery. As a consequence, the mediocre disability policy and disadvantaged situation among Thai people with disabilities have been explained in detail in this paper. It is recommended that Thai disabled people constitute more than the policy target group by becoming more active within the political and policy context of the disability issue, which should mitigate the less than positive disability issue perception.

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