

Social Inclusion of People with Disabilities in Vietnam: An Explanation from Educational Experiences

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Abstract: People with disabilities in Vietnam accounts for around 7.8% of the national population. As the same developing countries, Vietnam pays more attentions and proposes the critical initiatives and efforts on supporting people with disabilities to have the social inclusion in many aspects of daily life. However, they are still facing difficulties in Vietnamese contexts from the social attitudes to physical environments. Education is one of the most significant means for them to look ahead to the independent life in the future and also considered as the early intervention on supporting them and the most preferred activity by people with disabilities in Vietnam. This study aims at identifying the educational level which people with disabilities achieved and analyzing the barriers in educational settings and also proposing the supports for them to have better and independent life.

Key words: People with disabilities, Vietnam, social inclusion, education, social attitudes, physical conditions

INTRODUCTION

In every society there is a combination of people with disabilities and people without disabilities. People With Disabilities (PWD) effectively belong to one population group in society. They each represent a human life and are also contributors to social and economic development. The proportion of PWD is estimated to be around 10% of the world's population which means that at least a quarter of the world's population currently experiences daily life which includes working, learning and playing with PWD (Anonymous, 2005; WHO and WB, 2011). This is because the experiences of PWD also affect the experiences of People Without Disabilities (PWND) in their daily lives. And this experience will be increasingly shared by more people (UN, 2008; WHO and WB, 2011) as the rate of PWD is gradually increasing worldwide.

According to the findings of the 2009 Population and Housing Census, 7.8% of the population or 6.1 million people in Vietnam live with disability (Anonymous, 2005). The ratio of women with disability is a little higher than that of men in all functions and levels of difficulty. The ratio of females with disability from the age of 5 is 8.4% and that of males is 7.0%. In Vietnam, PWD are considered to be a disadvantaged population group having low social positions, especially, women (Bach, 2002; Kane, 1999). Since, the economic reforms were carried out in the late 1980's social policies with regard to PWD also underwent big changes. In 2010, the National Assembly passed the Law on Persons With Disabilities (PWD), considered to be a turning point in changing

public attitudes and state practices with a view to improving the conditions of PWD in Vietnam. The promulgation of the Law on PWD was a natural outcome of the process of implementing the international Convention on the Rights of Persons with Disabilities (CRPD) which the Government of Vietnam had signed in 2007. Based on this Law, early steps aimed at improving the living conditions of PWD were carried out and the PWD issues attracted more attraction from the society at large (Chinh, 2010). The social inclusion of PWD in Vietnam is investigated in terms of education, employment, social participation, healthcare, marriage and family life, legal and related policies access. These aspects are presented in this chapter prior to the evaluation of current social work and professional services supporting PWD's daily life experiences.

It is also estimated that the rate of PWD will increase to 10% by 2020 or an even higher rate if a more expansive definition of 'disability' and 'PWD' is formulated (Duy, 1995; Anonymous, 2005; MLISA., 2009). This situation provides a rationale for researching the lives of PWD and the social impacts and social influences on their lives in Vietnam from interdisciplinary perspectives in theory and practice. This study focuses on the research questions of how PWD experience their life throughout the educational opportunities which are regarded as the significant means to change their life and to have the independent life in the future.

Literature review: Inclusion has been the main direction on disability research and on improving the daily lives of

PWD (Atkinson and Marlier 2010; Silver, 2010). Social inclusion is based on ideas of social participation and integration and is also counterpoised to the concept of social exclusion which is more common in research based on economic and marginalized backgrounds (Atkinson and Marlier, 2010; Silver, 2010; Armstrong *et al.*, 2011; Kham, 2014).

Using a framework of social inclusion, participation of PWD in daily activities is understood by advocates as the way to facilitate social and personal development by providing a context for the development of friendships and relationships (Clark, 2001; Law *et al.*, 2006; Tran, 2014a). Research on social inclusion has identified the value of the inclusion process for both PWD and PWND (Hall, 2010; Kham, 2014) as the direction through which to improve the lives of PWD and increase independence in their lives (Bach, 2002; Donnelly and Coakley, 2002). It has also been found that the experiences of PWD cannot be understood simply as a function of the individual's activities (Biklen, 2000), rather their experiences need to be understood in a social context. Social inclusion is becoming the direction of research and practice in the area of PWD worldwide and it is applied in those countries driven by welfare and human rights' approaches (Beland, 2007; Perkins, 2009; Smyth, 2010; Kham, 2014; Tran, 2014).

An examination of the literature in relation to social inclusion reveals that there have been changes in the identification of social, attitudinal and physical factors (Bach, 2002; Hall, 2010). The principles of social inclusion are based on a philosophical belief that all people with disabilities have rights like others in the community (WHO and WB., 2011), a belief in which the rights of PWD are strongly advocated and fundamental (McCormack, 1978). Recently, Hall (2010) focused on the elements of social inclusion for PWD in terms of community involvement, relationships with others and a sense of belonging (Hall, 2010). These ideas are close to those of Bach (2002) however, Hall's research concentrated mostly on the area of adults with intellectual disability.

Numerous studies have attempted to explain how the attitudes expressed by PWD and PWND are very significant for the social inclusion process (Ikaheimo, 2003; Silver, 2010). The attitudes of teachers, adults and people without disabilities towards CWD have a significant influence on the success of the children's transition into mainstream environments (Baker, 1995; Tregaskis, 2004; Sen and Yurtsever, 2007; Thurneck, 2007). This literature has suggested that the voice of PWND should be included when researching the social inclusion of CWD in schools, families and communities in

contributing to the success of an inclusive life for PWD and on making the necessary social preparation for a successful inclusion process.

Basing on the current research relating to the daily life of PWD it is significant to have research about the professional support to make the social inclusion comprehensively for PWD in Vietnam basing on the experiences. This study will contribute to the research about the educational opportunities for and educational experiences by PWD.

MATERIALS AND METHODS

The methodology which is governed by symbolic interactionism and has guided the choice of research methods as presented in this research is ethnomethodology (Garfinkel, 1984; Travers, 2007; Ritzer, 2008; Kham, 2011). This approach investigates the ideas from Harold Garfinkel's research in the 1960's in which people make sense of their world, display their understanding to others and reciprocally make the shared social order in which they live (Ritzer, 2008). Ethnomethodology involves methods which people use on a daily basis to carry out their everyday lives (Tardi, 2008; Berard, 2009; Tran, 2014a, b).

Ethnomethodology is concerned with the procedures by which the social order is produced and shared and the ways in which individuals in their daily lives construct their reality, mainly in intimate exchanges of meanings through interactions (Blumer, 1962). From the perspective of the ethnomethodological approach, social order is constructed by social actor's experiences and their sense impressions which are grounded in a coherent and solid pattern (Tran, 2014a, b). This current research on the social inclusion aspects of PWD aimed to study the ways in which PWD made sense of their daily lives in all social contexts. The means of collecting data, guided by an ethnomethodological approach were observation, documentary analysis, survey and interviews which are presented and analyzed in detail in the following section on research methods.

The findings of this report are developed from a survey done in Hanoi and DaNang in 2013 by VNAH of both PWD and service providers for PWD. Additionally, this research also applies the documentary analysis and observation during the survey to make the qualitative analysis about the current conditions and the ways in which PWD have educational experiences in their life. The researcher of this study got support by KFAS for a year of research fellow (2014-2015) in Seoul National University to develop the whole research about the role of social work on promoting the social inclusion of people with disabilities in Vietnam.

Table 1: Research sample of PWD

Research sample of PWD	N	Percentage
Gender	403	100.0
Male	232	57.3
Female	173	42.7
Living in	404	100.0
Urban	204	50.5
Rural	200	49.5
Age groups	405	100.0
Under 25	53	13.1
From 25 to under 40	102	25.2
From 40 to under 55	155	38.3
Above 55	95	23.5
Types of disabilities	405	100.0
Physical	198	48.9
Hearing/speaking	17	4.2
Visual	35	8.6
Mental/intellectual	84	20.7
Multi-domains/others	71	17.6
Married status	405	100.0
Single	182	44.9
Married	203	50.1
Divorced/separated	8	2.0
Widowed	6	1.5
No answers	6	1.5

Research sample: The sampling for the research done by VNAH is convenient by collecting information through the welfare system in Vietnam at the district and local levels. As it takes time and budget for structured sample across the research sites, so, this sampling is eligible for the research. There are two samples of research participants: PWD and services providers as follow in Table 1.

The overview of rationale, theoretical perspectives, research methods and research participants presented in this section are the standpoints for further analysis of life experiences of PWD in Vietnam assessing the existed services for PWD in contemporary of Vietnam.

RESULTS AND DISCUSSION

Levels of education attained by PWD: Data on educational levels attained by PWD shows a big proportion (57.6%) receiving some elementary education (Table 2). The percentage of those who never went to school was 8.9%. The ratio of PWD attending higher education (community college, university and post graduate) was 9.7%. The data indicated an inverse proportionality: the higher the schooling level, the lower the number of PWD. This indicates that young disabled people have fewer chances than non-disabled youth to enter and progress within higher education. They are more likely to drop out after the 1st years.

While the level of education attainment among WWD was quite low, the ratio of WWD who were illiterate was almost twice times higher (13.2%) than that of MWD (6.3%). These figures may derive from the number of women with multiple disabilities (17.1%) twice as high as

Table 2: PWD's levels of education

	Male	Female	Total
	N = 232	N = 173	N = 405
Education attainment			
No schooling	6.3	13.2	8.9
Elementary level	59.1	54.0	57.6
Secondary level	9.4	10.5	9.7
High school level	9.4	13.1	11.2
Vocational trainings	3.2	2.6	2.9
College, universities	12.6	6.6	9.7
Post graduate	0.0	0.0	0.0

the ratio of men (9.4%). Nevertheless, it is worth noticing that the ratio of WWD attending secondary and high school level is slightly higher than that of men. This may derive from the ratio of men with mental and psychiatric disabilities (13.4%) twice as high as the ratio of women (7.9%). It is likely that certain groups of disabled students (i.e., high number of men with intellectual disabilities or mental health conditions) may face additional barriers in transition to upper secondary education compared to other groups. Besides in this survey there was only 3% of the respondents ever took part in vocational trainings.

These gender differences indicate that the challenge of low education while true for most PWD is even greater for WWD. These low levels of education and literacy were pointed out by key informants as one of the key defining characteristics of the marginalization and exclusion that PWD are facing. In turn, the low levels of education and literacy restrict the opportunities available for PWD to participate in social and developmental activities including employment. WWD have less chances on having higher educational level than MWD. This situation also makes the life of WWD is more difficult than those MWD.

Among those who ever attended school, 74.2% went to inclusive schools, 7.9% exclusive schools, 6.2% vocational schools, 2.6% rehab centers and 1.1% self studied at home. The ratios of female self-studying at home and attending exclusive schools were higher than that of male (Table 3). However, it seems that the lower inclusion in education among WWD compared to that among MWD in this research. It is same situation for WWD in other forms of education and trainings.

Table 3 shows that, it can be observed that if not kept out of school, few WWD were sent to special/exclusive schools. On the one hand disabled women tend to have fewer opportunities to take part in a regular community school with their non-disabled peers. This is indicative of the situation in which WWD have lesser chance of being integrated into society than their male counterparts. On the other hand, further research is needed to look into the association between the exclusion option and their family's social and economical background, given an evidence that schooling in

Table 3: PWD's attending educational institutions by sex

	Male	Female	Total
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Education	N = 214	N = 141	N = 352
Exclusive school	6.1	10.6	7.9
Inclusive school	74.8	73.4	74.2
Self-study at home	0.5	2.2	1.1
Vocational school	6.6	5.8	6.2
Rehabilitation centers	3.3	1.4	2.6
Other	22.5	20.1	21.6

Vietnamese society in general has become a luxury for those who are most disadvantaged, the enrolment of a disabled child into a 'special' or 'integrated' school puts lower income families under strong economic pressure (Belanger and Liu, 2008).

Barriers faced by PWD at schools: About 42.7% participants did not have difficulty in the education process, since, their disabilities occurred after their school age. Among these people, most became disabled because of illnesses and accidents in their middle age. This study also shows a large number of PWD never took part in vocational trainings that would enable them to meet the requirements of the labor market. Data reveal that there was a difficulty in processing information that leads to lack of interest among these disabled persons. Among those who had difficulty in the education process 19% found it hard to cope with learning materials and 15.5% found it hard to take part in learning games. About 19.7% found their note writing more slowly than their classmates. 15.5% found it hard to deal with discriminatory attitudes from others and 20% encountered difficulty pertaining to the school facilities. It seems that female participants encountered more difficulty in their study process as compared with their male counterparts as shown in respective ratios of 'note writing more slowly' (Female 30.3%, Male 19.7%) and 'take part in extra-curricula activities' difficulty (female 0.8%, male 1.0%). It seems that WWD face more difficulties in the educational settings. It is confirmed when the significant value of Chi-square test at Table 4 is meaningful on gender crosstab statistics.

PWD's reasons for not going to school: Among the causes of not going to school are: family not allowing to go to school (23.6%), family not able to pay for schooling (10.9%) and inability to find a school which accept them (3.6%) or having no desire to go to school (14.5%). So, the conditional impacts are significant for such causes.

It is remarkable that the ratio of men who expressed "family not affordable for PWD to go to school" was three times higher than that of women (18.2 and 6.1% respectively) and those unable to find the accepted schools for PWD were all female (6.1%). Looking at these data without uncovering the underlying causes seem to

Table 4: Barriers faced by PWD at school by sex

	Male	Female	Total
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Difficulties	N = 191	N = 131	N = 330
No difficulties*	47.7	35.1	42.7
Hard to cope with learning materials*	15.1	25.0	19.0
Note writing more slowly***	12.6	30.3	19.7
Take part in learning games*	20.7	27.5	23.4
Take part in extra-curricula activities *	1.0	0.8	0.9
School facilities	15.3	15.9	16.3
Discriminatory attitudes	14.6	16.8	15.5
Due to ill-health	28.9	34.6	31.1

*With $p < 0.05$, ***with $p < 0.001$ on Chi-square test

run counter to gendered prejudices and popular opinions to the effect that males in general and males with disability in particular do have more needs for learning.

Perceptions of educational models relevant to PWD: Regarding education support schemes for PWD locally 15.7% heard of vocational school, 9.2% knew regular school, 7.0% being aware of exclusive school. 39.2% of the respondents did not know about special facilities. Among those who did not know about these programs, 33.1% were males and the rest were females. The ratio of female respondents who had heard of vocational school in their localities was slightly lower than that of male counterparts (14.9 and 16.4%, respectively) and the same to the responses to "None availability". The ratio of female participants not knowing any educational opportunities in the community (44.7%) was slightly higher than that of male (35.2%). The reason for this is partly due to the traditional role of women staying at home and looking after the household, the result being that Women With Disabilities (WWD) are less likely than Men With Disabilities (MWD) to be referred to information about vocational trainings. This finding seems to indicate that it is not considered important to give them technical and professional training and more so if they are disabled. On perception to the educational model reveals that WWD have their less social inclusion level, on both accessing the existed educational services but also for getting the information about educational chances (Table 5).

In assessing these local education programs the ratios of female respondents who expressed to be 'satisfied' or 'very satisfied' were lower (6%) as compared with those of male. Besides the ratios of female expressing to be 'unsatisfied' or 'very unsatisfied' were higher as compared with that of their male counterparts. It is clearly identified that MWD have more chances on accessing education services and activities, so, they feel more satisfaction than WWD. PWD in Hanoi feel satisfied more than those in Danang (Table 6 and 7).

On looking at the means value of the evaluation, it seems that responses are quite positive (3.46/5.00) closed to the satisfied in the 5 scale Likert question. It is found

Table 5: PWD's reasons for not going to school by sex

	Male	Female	Total
Reasons	N = 23	N = 33	N = 56
Having no desire to go to school	13.6	15.2	14.5
Inability to find a school which accept them	0.0	6.1	3.6
Family is not affordable	18.2	6.1	10.9
Family does not allow to go to school	27.3	21.2	23.6
No information	8.7	0.0	3.6

Table 6: PWD reporting educational opportunities in the community by sex

	Male	Female	Total
Reasons	N = 220	N = 161	N = 381
Vocational school	16.4	14.9	15.7
Inclusive school	9.5	8.5	9.2
Exclusive school	7.8	6.1	7.0
None availability	37.0	27.8	33.1
Others	4.1	3.7	3.9
Don't know	35.2	44.7	39.2

Table 7: Evaluation on educational services for PWD (%)

	Gender (N = 67)		Places (N = 67)		
Evaluation on educational services for PWD	Male (N = 39)	Female (N = 28)	Hanoi (N = 41)	Danang (N = 26)	Total (N=67)
Very unsatisfied	10.30	14.30	9.80	15.40	11.90
Unsatisfied	7.70	10.70	4.90	15.40	9.00
Average	12.80	21.40	14.60	19.20	16.40
Satisfied	48.70	42.90	53.70	34.60	46.30
Very satisfied	20.50	10.70	17.10	15.40	16.40
Mean value	3.61	3.25	3.63	3.19	3.46

that male responded more satisfied than female (3.61 and 3.25, respectively), people with physical disabilities also replied with more satisfaction (at the highest means of 3.74) than those mental disabilities (at the lowest means of 2.50). Additionally, PWD in Hanoi have higher satisfaction than those in Danang.

CONCLUSION

Education is always regarded as significant tool for PWD to change themselves and to have better condition in their life. High ratio of PWD in this research achieved the elementary level. Among them near ten percent had no chances to go to school. They got their educational experiences almost in the inclusive settings. It seems that there is social change toward disability in Vietnam. It is also compatible to recent research on disability in Vietnam. On their experiences in schools, it is found that PWD did not highly face the discriminated attitudes and behaviors in schools they found the restrictions mostly by their health conditions, public access and learning conditions. Reasons in the cases of not going to schools presented that their families have not affordable conditions and allowance for PWD. The other reasons for PWD un-attending schools are that there are high

responses to the unavailability of educational conditions for them or they do not know exactly what forms of education for PWD in the community. For those with better conditions on education, they found that they are satisfied with such experiences. Such findings are eligible to the recent research about the educational experiences in schools by children with physical disabilities: almost difficulties in schools presented in terms of moving, public accessibility and learning materials rather than in aspect of social attitudes and discrimination. They find the best ways to deal with such conditions by their adaptation and their resilience.

IMPLICATIONS

In order to support and encourage PWD to be independent in their life, education is significant tool for the future inclusion, it should have the specific professional supports for them with following implications: including the inclusive directions in education settings to create the favorable conditions for PWD on educational achievements; applying the case management regulation approved by Anonymous (2015) in school settings in order to help PWD accessing to the available social services and supports; training teachers at school settings with knowledge and skills on working with people with disabilities which would bring benefits for both teachers and PWD in educational settings and teachers would be the significant factor to make the existence of social inclusion for people with disabilities.

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