

# Perceptions of Youth with Disabilities in Bhutan on Family Support, Attitudes, and Encouragement towards Meaningful Community Engagement: Implications for Parental Self-Efficacy

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## ABSTRACT

**Purpose:** Awareness and attention towards disability-inclusion in Bhutan has steadily increased over the last few years. However, there are still many challenges that remain to support meaningful employment and community engagement for youth with disabilities such as inequity, discrimination, stigma, inaccessible physical environments, and bullying that seems to impact the self-efficacy of the youth with disabilities themselves. In this article, we explore how youth with disabilities in Bhutan perceive their family's level of support, attitudes, and encouragement in order to explore the implications of parental self-efficacy.

**Method:** This article reports on a national-level survey in Bhutan on the perceptions of youth with disabilities ( $n = 216$ ; Male = 127 & Female = 87) about family attitudes, support systems, and family encouragement towards their employment and the role of parental self-efficacy beliefs. The participants in the survey were recruited through purposeful sampling procedures that provides representation and generalizability across multiple characteristics and factors. Data were analysed using descriptive and inferential statistics.

**Results:** Findings from this study suggest that youth with disabilities were supported and encouraged to contribute to the family livelihood within the home, but less so out in the community, indicating lower parental self-efficacy beliefs about their child with a disability's capabilities to contribute in the community and their own ability to facilitate and ensure that contribution.

**Conclusion:** Negative family attitudes and lower self-efficacy can be detrimental

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*as it limits the ability of youth with disabilities to fulfil and achieve their life goals. Equally, youth with a disability's perception of their negative family attitudes and low self-efficacy can also be detrimental to their development. This article recommends further research into the self-efficacy beliefs of parents of children with disabilities. Furthermore, engagement, awareness raising, and training parents on ways to support their child with a disability to engage in meaningful employment and community activities.*

**Key Words:** *Bhutan, Family support, Attitudes, Support, Self-Efficacy, Disability, Inclusion*

## INTRODUCTION

In Bhutan, awareness and attention towards disability-inclusion has been steadily increasing. Bhutan ratified the UN Convention on the Rights of the Child (CRC) in 1990 followed by signing the UN Convention on the Rights of Persons with Disabilities (CRPD) in 2010. These commitments demonstrate that the Bhutanese Royal Government is committed to protecting the rights of children, including youth with disabilities. A two-stage child disability study focusing on the ages of two to nine reported 21.7% of the sample (n = 11,370) as having some form of disability at varying degrees (NSB & UNICEF, 2012). This study was conducted using a functional multi-indicator methodology. The national census of Bhutan reports a much lower disability population prevalence of 2.1% (NSB, 2020), suggesting that the disability prevalence rate is somewhere between 2% and 21% – although ‘disability’ is relative and a socio-culturally constructed phenomenon (Schuelka, 2018).

Bhutan has embraced at least a segregated ‘special educational needs’ model since 1973 with the establishment of a school for the blind in eastern Bhutan (Rinchen Dorji & Schuelka, 2016). Since 2009, in order to enhance social support and provision of education of children with disabilities, the Ministry of Education (MoE) and UNICEF established ‘Special Education Needs (SEN)’ units within ‘mainstream’ schools with a somewhat push-in inclusive model (Rinchen Dorji & Schuelka, 2016). At the time of the writing of this article, there are a total of 26 schools that are fully accepting of students with disabilities – including two vocational centres run by a non-governmental organization (NGO); and the Muenselling Institute for the Blind and the Wangsel Institute for the Deaf, which are nominally supported by the Royal Government but mostly funded through international donation – with a total of 997 students (MoE, 2020). While the MoE

and Royal Government has been involved in supporting these initiatives, many local NGOs and some international development organizations have arisen to fill in the gaps to provide necessary support and education to the persons with disabilities. Despite these developments, there are continuing issues related to a lack of teacher preparedness and training, resources, cultural and religious beliefs, social stigma, and a lack of awareness amongst the general public in supporting education for persons with disabilities (Grimes, et al., 2021; Kezang Sherab, et al., 2015; Rinchen Dorji & Schuelka, 2016).

Most recently, the current Royal Government has approved the SEN policy document (GNHCS, 2019). This policy seeks to improve the lives of persons with disabilities Persons with disabilities through empowering them to participate in the socio-economic development process; mainstreaming disability initiatives in plans, policies, and programs; improving access to education, and other opportunities and services; promoting healthy living; and promoting positive attitudes and behaviour amongst the general public (GNHCS, 2019). To address the issue of teacher preparedness, the Paro College of Education started offering a two-year Master's in Inclusive Education program to in-service teachers since the 2020 academic session. Over the last few years, inclusive education and disabilities has also received increasing attention from scholars. There have been numerous research projects carried out to understand inclusion and disabilities, such as on teachers' perspectives on inclusion, disability, Gross National Happiness, and Buddhism (Dawa Dukpa, et al., 2022); the effects of school leadership towards inclusion (Rinchen Dorji, et al., 2022; Subba, et al., 2019); implementation of inclusive education policy and practices (Kezang Sherab, et al., 2015); parental communication and collaboration in schools with a SEN program (Karma Jigyel, et al., 2018); and the cultural production 'disability' in Bhutanese schools (Schuelka, 2018).

In spite of these efforts and development, there is still social stigma and beliefs related to culture and religion that seems to impact the upbringing of the persons with disabilities. The registration of people with disabilities in Bhutan conducted in 2015 found that an overwhelming majority (84.4%) of the children with disabilities did not attend a school (Kezang Sherab, et al., 2015 ). Research has shown that these children were "marginalized and excluded" (Schuelka, 2013, p. 67), which was attributable to the unwillingness of the parents to send their children with disabilities to school because of low expectations; an unfriendly school environment such as a lack of individualized and accommodative

curriculum and the presence of bullying; a lack of trained teachers; and inaccessible infrastructure (Kezang Sherab, et al., 2015).

There are many challenges to the Bhutanese school system that need to be addressed at the systemic and policy levels, but this article will specifically focus on parental support for their children with disabilities. While there could be various reasons for the lack of parental support, anecdotal evidence suggests that some of the plausible reasons could be due to the lack of parental awareness and skills to parent children with disabilities, parental attitude, and attitude of persons with disabilities themselves. Research conducted in non-Bhutanese contexts has shown that low parenting self-efficacy is directly associated with reduced parenting effectiveness, insecure attachment, increased susceptibility to helplessness, and negative attitudes (Aral, et al. 2019; García-López, et al., 2016; Young, 2011). Therefore, this article is aimed at exploring the perceptions of youth with disabilities in Bhutan about family attitudes, support systems, and family encouragement towards their employment.

In this article, we first look at the importance of family attitudes and self-efficacy, particularly as it is related to youth with disabilities, and how this theoretical framework informs our research questions. Next, we explain the methodology that was employed to answer our research questions and give the context of the larger study and project that this article derives from. Findings are presented that demonstrate that perceptions of youth with disabilities are that their families give them some support and encouragement, but not that significantly and much less outside of the home environment. In the discussion, we argue that this shows that self-efficacy of parents of youth with disabilities in Bhutan needs more support and resources in order to help them see and realize a future for their child beyond the home environment.

## **Background Literature**

### *Family Attitude*

Family is the first important contact point for any child with or without disabilities. It is crucial that family members exhibit positive attitude towards their children with disabilities because of additional development challenges and social stigma. Existing literature suggests that the negative attitudes of family, friends, and society in general have limited the ability of persons with disabilities to fulfil and achieve their life goals (Antonak & Livneh, 2000; Morris, 2000). Knowledge

of attitudes of persons without disabilities towards persons with disabilities helps to understand nature of the interaction between the two groups (Antonak & Livneh, 2000). Li-Tsang, et al. (2001) found that negative attitudes “may lead parents to adopt maladaptive coping skills including feelings of guilt, pessimism, hostility, aggression and avoidance” (p. 61).

In the context of Bhutan, family attitude is something that has not been fully explored. While there have been some improvements to family and community behaviours and attitudes regarding persons with disabilities, there are still many challenges that remain such as unfairness, inequity, discrimination, stigma, inaccessible physical environments, dissatisfaction, bullying, and name-calling (Schuelka, 2015, 2018; UNICEF & MoE, 2017). For instance, UNICEF and MoE (2017) found that almost 20% of the heads of households who responded to their survey believed that children with disabilities did not contribute positively to their family. Furthermore, 24% of the respondents stated that children with disabilities did not contribute positively to society. However, more highly educated respondents were positive that children with disabilities make positive contribution to family and society. This is in line with the findings around the world (Morin et al., 2013 as cited in UNICEF & MoE, 2017). This suggests that there should be more attention to education with a focus on attitudinal change.

Efforts have been reported across many countries to include persons with disabilities in the community at large. Improvement in the quality of life for persons with disabilities will remain a challenge until the society they live in espouses the value of equity and inclusion and multiple elements are aligned in order to support this value (Schuelka & Kezang Sherab, 2022). Attitudinal barriers, products of fear, and negative societal perceptions of disability hinder full integration of persons with disabilities into their communities (Smart, 2008). Research has shown that exclusion of persons with disabilities from employment opportunities, being shunned from the pursuit of romantic relationships, and a prohibition from engaging in the self-determination process can adversely impact their psychological and physical well-beings (Livneh, 2001). While family attitude and the attitude of youth with disabilities play important role in terms of the employment and their overall well-being, not much is known about family attitude and attitude of the youth with disabilities themselves in Bhutan. We will explore these phenomena through the lens of self-efficacy.

### *Perceived Self-Efficacy*

A perceived sense of self-efficacy refers to future beliefs of one's capabilities to organize and execute a particular task in a specific situation (Bandura, 1997). The efficacy theory of Bandura has been widely used to predict effort exertion, behaviour, motivation, persistence, actions, and coping in a wide variety of situations (Ellis, 2019; ([Anonymized], 2013). According to Bandura (1997), efficacious individuals envisage successful outcomes while inefficacious individuals are preoccupied with negative outcomes. Fundamentally, self-efficacy portrays individual's beliefs about themselves as competent or incompetent to perform the given task in a specific situation. In other words, self-efficacy is task and context specific. For instance, a person's self-efficacy to swim would be different from his or her self-efficacy to play basketball, and self-efficacy to swim at the age of eight would be different from at the age of 15. Furthermore, self-efficacy of Bhutanese parents to raise their children with disabilities would be different from that of other contexts such as in India or the United States. Essentially, there are four key sources from where human beings judge and estimate their sense of self-efficacy: Enactive mastery experiences (assessment of their own past experiences), vicarious experiences (observing and learning from their models performing the task), verbal persuasion (motivation and praise from significant others), and physiological/emotional states (positive or negative experiences which leads to confidence or lack of confidence) (Bandura, 1997; Wittkowski, et al., 2017).

### *Parental Self-Efficacy*

Parental self-efficacy (PSE) refers to a belief about their ability to parent a child successfully (Jones & Prinz, 2005; Meunier & Roskam, 2009). The important role parents play in the growth and development of children in general, and even more so of children with disabilities, has been widely researched (Hohlfeld, et al., 2018; Meunier & Roskam, 2009; National Academies of Sciences, Engineering and Medicine, 2016). Much of the literature suggests that parenting a child with disabilities is much more stressful and challenging with a wide range of difficulties compared to parenting a child without disabilities (Ellis, 2019). Therefore, it is crucial that parents of children with disabilities are motivated, resilient, persistent, capable, and efficacious of raising their children and fulfilling the demanding social role. Existing literature indicates that parents with higher self-efficacy are able to take proper care of their children leading to healthy development processes, whereas the parents with lower self-efficacy negatively impact the development

of their children leading to psychiatric symptoms, emotional problems, and behavioural problems (Aral, et al. 2019; García-López, et al., 2016; Young, 2011). The literature also suggests that PSE has been one of the crucial determinants of positive parenting (Bryanton, et al., 2008; Wittkowski, et al., 2017). A meta-analysis of some 34 PSE measures concluded that “PSE has been demonstrated to be a strong predictor of parenting functioning” and recommended that “parents with lower levels of PSE are better identified and supported to improve their skills in parenting” (Wittkowski, et al. 2017, p. 2975). Short training programs have been found to be a significant contributor of increased self-efficacy among parents (García-López, et al., 2016). Studies have also confirmed that parents of children with disabilities participating in behavioural change training programs have positive correlation to PSE (Benedetto & Ingrassia, 2018). Thus, the take-away from this article should not be one of ‘blaming’ parents for the outcomes of their children. Rather, this research highlights the importance and collective societal responsibility of developing, supporting, and increasing PSE.

## Objective

Although there is a strong amount of global literature on PSE and children with disabilities, less is known about Bhutanese parents’ attitude and self-efficacy to raise their children with disabilities. Therefore, this study focused on addressing the following research questions:

What are the perceptions of youth with disabilities about family attitudes, support systems, and encouragement towards their employment?

Sub-questions:

- a. What is the level of perceptions of youth with disabilities about family attitudes in terms of belief, support systems, and encouragement towards their employment?
- b. Is there a statistically significant difference in terms of gender and role in the perceptions of youth with disabilities about family attitudes, support systems, and encouragement towards their employment or finding meaningful community activities?
- c. Is there a statistically significant relationship between family attitudes towards belief about disability, support systems, and encouragement of the employment of persons with disabilities?

- d. What kinds of meaningful activities did the family encourage them to do in the community?

## METHOD

The research and findings in this article are original but part of a larger project that investigated multiple strands of understanding pertaining to youth with disabilities in Bhutan. *The Comprehensive Survey of Transition and Employment of Youth with Disabilities in Bhutan* (see Schuelka, et al., 2022; Tichá, et al. 2023) was conducted in 2019 and 2020 as part of a project titled “Understanding, Developing, and Supporting Meaningful Work for Youth with Disabilities in Bhutan: Networks, Communities, and Transitions,” funded by the United Kingdom Foreign, Commonwealth, and Development Office (FCDO) Global Challenges Fund and managed by the University of Minnesota’s Institute on Community Integration, Royal Thimphu College, and the University of Birmingham (UK). The survey was Phase One of the project and included 216 youth with disabilities aged 16 to 24 across 17 out of 20 *dzongkhags* [districts] in Bhutan. Fieldwork surveys and interviews were conducted in person, using Geographic Information Systems [GIS]-enabled technology (‘Survey123’ and ‘Collector’ by ESRI). Ethical clearance for the survey was given by the Bhutanese National Statistics Bureau (NSB/SDPD/Survey/2019-20/4870), as well as the University of Birmingham Research Ethics Office (ERN\_18-1601). The survey was administered by trained project staff (five research assistants that were academic faculty members from Royal Thimphu College, and two Bhutanese co-investigators from the project staff). The distribution of participants across Bhutan can be observed in Figure 1 below. While a wide range of research questions and objectives were being addressed through this Phase One survey and not presented in this article (see Schuelka, et al., 2022; Tichá, et al. 2023), the questions specific to self-efficacy and youth with disability perceptions of family support are the focus of this article.



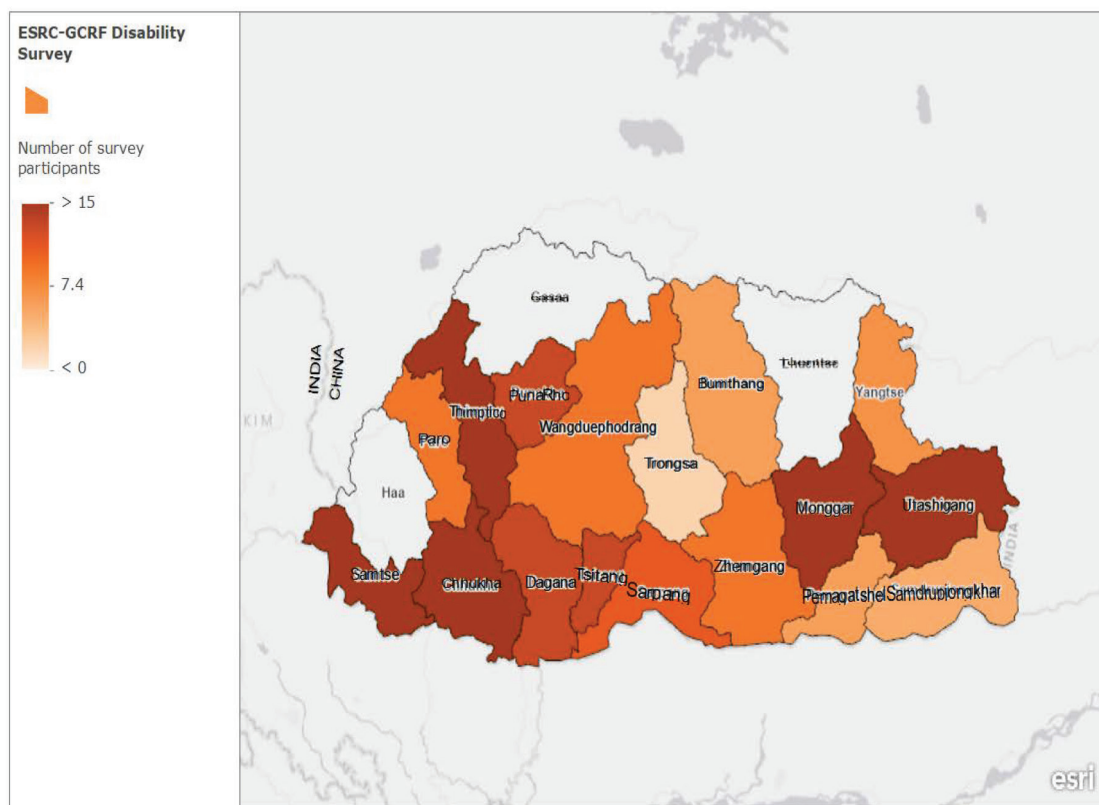


Figure 1. Map of Bhutan with Number of Survey Participants per Dzongkhag (n = 216).

The distribution of participants from different Dzongkhags is roughly equivalent to the population of that Dzongkhag. Of the three Dzongkhags that we were unable to reach, Gasa, Lhuentse, and Haa are among the smallest and most remote Dzongkhags in Bhutan, with elevations of 5,000 to 7,000m (16,400 to 23,000ft). Reaching these during the monsoon season was not possible. Survey participants included youth with disabilities and proxy respondents who were mainly their family members (see Table 1). Proxy respondents – those who were unable to answer the survey directly but had a designated family or community member answer the survey questions – made up less than 20% of our survey.

**Table 1. Survey Participant Composition**

Characteristic	Category	n*	%
Gender	Male	127	58.8
	Female	87	40.3
Role	Proxy	43	19.9
	Individual	173	80.1

Currently working for money	Yes	45	20.8
	No	142	65.7
	NA (Student)	23	10.6

Total Number of Respondents = 216 (\*totals do not add up to 216 due to missing values)

The respondents in this survey were categorized by experienced difficulties based on the Washington Group (2021) functioning classification system to determine disability characteristics. This is now the established methodology used by the National Statistics Bureau in Bhutan, and we support this methodological approach as it avoids the medical pathologisation of disability and embraces a more socio-cultural constructed approach. Table 2 below expresses these difficulty and disability characteristics.

**Table 2. Functional Difficulties Experienced by Survey Participants**

Sl. No.	Difficulties in...	n	%
1	Seeing	82	38.0
2	Hearing	136	30.1
3	Walking or climbing	101	46.8
4	Remembering or concentrating	116	53.7
5	Self-care (washing, dressing)	87	40.3
6	Using hands	79	36.6
7	Understanding directions	83	38.4
8	Interacting with others	128	59.2
9	Learning at the same rate as others	155	71.7

Total Number of Respondents = 216

Participants in the survey were located and sampled through a process of purposive sampling – working through various governmental and non-governmental organizations to locate persons with disabilities across the country.

Within the comprehensive survey, seven four-point Likert type survey items related to perceptions of youth with disabilities in terms of family attitudes (3 items), support systems (2 items), and encouragement (2 items). More detail on methodology and the survey itself can be found in the full survey report published online (Schuelka, et al., 2022; Tichá, et al. 2023).

In order to answer the research questions through the survey data collected, we analysed survey data using both descriptive and inferential statistical methods. For example, for sub-question A, we used descriptive statistics to derive mean and standard-distribution information from four-point Likert-scale items. For sub-

question B, we used multivariate analysis to observe correlational significance. Chi-squared tests were also performed. Descriptive analysis of all the seven items showed no substantive non-normality in terms of skewness, kurtosis, and outliers. The cases of missing values were also observed to be minimal and without any form of pattern.

There are some limitations to the findings that should be acknowledged. While the surveys were conducted by field staff in multiple local languages and dialects – primarily in Dzongkha, Tsangla/Sarchop, and Nepali – there could be some challenges in terms of understanding and communication. Some surveys were conducted in Dzongkha sign language, but proficiency is limited. We believe that the number of participants is representative and with a sufficient number that is able to be generalizable. If we are to use the statistics from the national census (NSB, 2020), we surveyed about 1 in every 4 persons with disabilities in Bhutan. The results of this study should be addressed with caution. In this study, youth with disabilities were asked about their parents' attitude, belief, support system and encouragement. Indeed, self-perceptions are important when examining self-efficacy. However, in order to receive a more adequate picture, especially for intervention needs, further research should explore not only adolescents' perceptions but also parental perceptions as well.

## RESULTS

### Level of Perceptions of Youth with Disabilities about Family Attitudes in Terms of Belief, Support Systems, and Encouragement Towards their Employment

The perceptions of youth with disabilities in terms of their family belief, encouragement, and support system were measured by a four-point Likert type scale beginning with not much (1); little (2); much (3); and a great deal (4). The mean and standard deviation for each item were computed using SPSS (see Table 3).

**Table 3. Level of perceptions of youth with disabilities**

Items	n	M	SD
Does your (their) family <i>believe</i> that you (they) can meaningfully contribute by working at home?	203	2.34	.99
Does your (their) family <i>believe</i> that you (they) can meaningfully contribute by working in the community (in office, business, etc.)?	209	2.11	.95

Does your (their) family <i>believe</i> that you (they) can meaningfully contribute to nation building?	208	2.02	.84
Does your (their) family <i>encourage</i> you (them) to contribute to home activities?	207	2.53	.92
Does your (their) family <i>encourage</i> you (them) to work in the community (in office, business, etc.)?	208	1.99	.98
Has your (their) family <i>supported</i> the employment goals you (they) have for yourself (themselves)?	205	2.30	1.11
Has your (their) family <i>supported</i> you (them) in working outside of the home (e.g., getting ready for work, providing transportation, etc.)?	207	2.31	1.10

As shown in table 3 above, the highest mean is 2.53 and the lowest is 1.99. This is an indication that the youth with disabilities have the perceptions that their family somewhat encourage them to work and contribute *at home* – which would often include a family farm for subsistence – while they are not encouraged to work in the community such as in an office or private retail business. This suggests that family members are not confident or prepared to send their children with disabilities outside of the home to work and contribute to the larger community. Furthermore, there is a similar pattern that the perceptions of youth with disabilities dwindle in terms of their family belief that they can contribute from home to community and then to the national level. Meanwhile, in terms of support systems, the perceptions of youth with disabilities seem to vary as shown by higher standard deviations, but not correlated with their level of functioning

### **Influence of Gender and Role (Proxy and Individual) on Perceptions of Youth with Disabilities**

A multivariate analysis was conducted to answer if there were gender and role differences in youth with disabilities' perceptions of family belief, support system, and encouragement both for employment and meaningful community participation. Inspection of multivariate Box's M test and Levene's test did not show any significance ( $p > .05$ ), indicating that homogeneity of covariance matrices of all the dependent variables were equal across groups and that variances for the grouping variables were homogeneous, respectively.

The overall multivariate F-tests (see Table 4) showed significant result for only role.

**Table 4. Multivariate tests to compare family believe, support, and encouragement by gender and role**

Effect	Value	F	Hypothesis df	Error df	Sig.	Partial Eta Squared	
Role	Wilks' Lambda	.903	2.808 <sup>b</sup>	7.000	184.000	.008	.097
Gender	Wilks' Lambda	.932	1.884 <sup>b</sup>	7.000	182.000	.074	.068

For all seven dependent variables, the mean for the Proxy is significantly lower than the mean for the individuals (see Table 5). This is an indication that Proxy (who were mainly family members) had much lower attitude towards youth with disabilities compared to the youth's perception of belief, support, and encouragement.

**Table 5. Mean differences for the significant multivariate tests**

Item	Role	M	SD	n
1. Does your (their) family believe that you (they) can meaningfully contribute by working at home?	Proxy	1.97	1.03	40
	Individual	2.45	0.98	152
2. Does your (their) family believe that you (they) can meaningfully contribute by working in the community (in office, business, etc.)?	Proxy	1.78	0.86	40
	Individual	2.19	0.96	152
3. Does your (their) family believe that you (they) can meaningfully contribute to nation building?	Proxy	1.57	0.68	40
	Individual	2.14	0.84	152
4. Does your (their) family encourage you (them) to contribute to home activities?	Proxy	2.23	1.03	40
	Individual	2.59	0.91	152
5. Does your (their) family encourage you (them) to work in the community (in office, business, etc.)?	Proxy	1.63	0.81	40
	Individual	2.09	1.01	152
6. Has your (their) family supported the employment goals you (they) have for yourself (themselves)?	Proxy	1.83	1.08	40
	Individual	2.45	1.09	152
7. Has your (their) family supported you (them) in working outside of the home (e.g., getting ready for work, providing transportation, etc.)?	Proxy	1.97	1.12	40
	Individual	2.38	1.09	152

Chi-Square tests were performed to inspect gender and role (individual or proxy) on another question from the survey: *Does your (their) family encourage you (them)*

to spend time in the community doing activities you enjoy/find meaningful? The Chi-Square tests revealed that there were no statistically significant relationships ( $p > .05$ ) both in terms of gender and whether the survey respondent was a proxy or the individual youth with a disability (see Table 6).

**Table 6. Chi-Square tests for family encouragement for meaningful community participation**

Categorical variable	Item	n	Value	df	Asymptotic Significance (2-sided)
Gender	Does your (their) family encourage you (them) to spend time in the community doing activities you enjoy/find meaningful?	206	2.808 <sup>a</sup>	1	.094
Role		206	.758 <sup>a</sup>	1	.384

### Correlation Between Family Attitudes Towards Belief, Support Systems, and Encouragement of Employment for Persons with Disabilities

Using multivariate analysis, there are significant relationships between belief, support systems, and encouragement of employment for persons with disabilities. See Table 7 below. This finding suggests that the perception of youth with disabilities about their family attitudes and beliefs towards their youth with a disability go hand-in-hand with their perceptions of active support and active encouragement for community participation and employment.

**Table 7. Correlation between family belief, support, and encouragement**

		Belief	Support	Encourage
<b>Belief</b>	Pearson Correlation	1	.607**	.812**
	Sig. (2-tailed)		.000	.000
	N	210	209	209
<b>Support</b>	Pearson Correlation	.607**	1	.644**
	Sig. (2-tailed)	.000		.000
	N	209	209	209
<b>Encourage</b>	Pearson Correlation	.812**	.644**	1
	Sig. (2-tailed)	.000	.000	
	N	209	209	210

\*\* . Correlation is significant at the 0.01 level (2-tailed).

### Community Activities Encouraged by Family

Youth with disabilities in Bhutan are most encouraged to engage in religious

activities, and secondly encouraged to make and meet friends in the community, as seen in Table 8. This is not surprising to us given the socio-cultural context of Bhutan, which we will discuss in the next section of this article.

**Table 8. What kind of activities does your (their) family encourage you (them) to do in the community?**

Sl. No.	Activity	Proxy (n=43)	Individual (n=173)	Male (n=127)	Female (n=87)
1	Meeting friends	11 (25.6%)	76 (43.9%)	50 (39.4%)	36 (41.4%)
2	Religious	21 (48.8%)	82 (47.4%)	55 (43.3%)	47 (54.0%)
3	Shopping	6 (14.0%)	32 (18.5%)	20 (15.7%)	18 (20.7%)
4	Sports	4 (9.3%)	35 (20.2%)	29 (22.8%)	10 (11.5%)
5	Others	6 (14.0%)	24 (13.9%)	20 (15.7%)	10 (11.5%)

## DISCUSSION AND CONCLUSION

To summarize the findings above, the perception of youth with disabilities towards family attitudes, support, and encouragement is that they are somewhat supported and encouraged to contribute to the family livelihood within the home, but less so out in the community. There is a difference between the attitudes of youth with disabilities (more positive) and the proxy responses to the survey (more negative) in terms of support and encouragement. Such negative family attitude can be risky as it limits the ability of persons with disabilities to fulfil and achieve their life goals (Antonak & Livneh, 2000; Morris, 2000). There was no difference in gender. Beliefs, attitudes, support, and encouragement are strongly correlated together, and the most common community activities that are encouraged for youth with disabilities are religious activities and meeting friends.

The finding from this study on keeping youth with disabilities at home, versus employment and other forms of economic engagement in the community, is supported by the literature. Previous research shows that parents of children with disabilities in Bhutan tended to want to keep their children at home and away from school and work responsibilities. This practice was primarily as a form of protection from bullying and being overburdened with tasks that the parents believed that their children could not perform. In other words, it had more to

do with low expectations than it did with socio-cultural stigma (Schuelka, 2015; 2018). In other cases, youth with disabilities themselves felt that they could best support their families by being as small of a 'burden' as possible (Johnstone, et al., 2023). Parents of children with disabilities in Bhutan do generally support inclusive schooling and the development of skills (Karma Jigyel, et al., 2020), but are worried about their child's experience and sense of belonging while they are in school as well as sceptical about the utility of their child's school experience.

It is worth noting that the proxy responses to our survey were often performed because the youth with a disability had more significant difficulties with communicating through speech and language. This will no doubt skew this finding in that these family members taking the survey for their child would perhaps have less expectations for this youth because of more significant challenges. Those youths with disabilities that took the survey themselves had at least the basic skills necessary to communicate through speech and language.

In this regard, parental self-efficacy (PSE) as seen from this research can be ascertained through the perception of youth with disabilities about their family attitudes, support, and encouragement. This can primarily be understood through the findings located on Table 3 above, which show that there is some belief in youth with disabilities to contribute and engage meaningfully, but much less so when these contributions and engagement move beyond the home itself. As suggested by other literature on PSE, particularly when it comes to having a child with a disability (Ellis, 2019), we argue that what the findings from this research suggest that parents of children with disabilities continue to need further support and resources to help them understand what opportunities for meaningful engagement and employment look like and how they can have the confidence and skills to help their child reach those higher expectations.

The lack of statistically significant differences between genders in terms of attitudes and perceptions is also supported by literature. In general, Bhutan has gender parity and equality across most sectors, which is in stark contrast to its immediate neighbours in South Asia (ADB, 2014). While Bhutan has a strong tradition of matrilinearity and strong policies that promote gender equality of access, there does still remain issues of subtler gender discrimination and inequalities when it comes to socio-economic outcomes (Roder, 2012; Tashi Dema, 2017). In the case of youth with disabilities in Bhutan, we believe that low expectations and attitudes extend to both genders equally.



The meaningful activities that are encouraged and available to youth with disabilities in Bhutan is appropriate to the socio-cultural context. Bhutan is a very rural and agrarian country, with the majority of the population engaging in subsistence agriculture. In the comprehensive survey data, there was a significant correlation between meaningful economic and social opportunities and whether the respondent lived in an urban area (more opportunities) or a rural area (less opportunities) (Schuelka, et al., 2022). The majority of respondents in both urban and rural areas also indicated that there were very few activities in the community in general that matched their interests. Traditionally, village life in Bhutan centred around farming activities and religious activities such as *tshechu* [religious festivals]. There would also be some opportunity to play sports and games such as archery and *kuru* [dart throwing]. Buddhism and culture are so intertwined in Bhutan that religious activities are the majority of community activities available.

The findings from this research demonstrate that youth with disabilities in Bhutan desire their families to be supportive and encouraging when it comes to creating opportunities for meaningful community engagement and employment. Parental self-efficacy is about creating confidence, setting high expectations, and seeing those goals through to a positive outcome. In this regard, this research shows that parents of children with disabilities in Bhutan need further support and resources in order to increase their self-efficacy. As shown by earlier research in the international contexts, short training programs focused on parental behavioural change would be crucial to raise the self-efficacy of Bhutanese parents (Benedetto & Ingrassia, 2018; García-López, et al., 2016). Parents need to see and understand what is possible for their children with disabilities beyond the home and be given the skills and tools that can support them. While this study was specific to Bhutan, we believe that the findings can speak to other countries and contexts that are remote and agrarian in nature. We do not mean to suggest that meaningful activities and engagement can take place only outside of the home, as that would be culturally insensitive to suggest for the Bhutanese context. Rather, what we argue is that youth with disabilities should be supported and encouraged by parents with high expectations that their youth can participate both at home and in the larger community, regardless of what functional challenges inform their lived experience.

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