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Do Cultural Norms Affect Perceptions of People With Disabilities in Saudi Arabia?

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Abstract

People have different attitudes and perceptions about disabilities and people living with disabilities. Cultural norms may affect how people develop these perceptions and how they communicate with people living with disabilities, thereby affecting their social integration and inclusion in society. We tested the hypothesis that cultural norms influence perceptions and communication between people with and without disabilities in Saudi Arabia. We secured self-report data from 141 Saudi Arabian adults using a survey that included assessments of perceptions and communication between people with and without disabilities. We investigated variation in these responses by gender, age, and disability status. The results provide some evidence that cultural norms impact perceptions and communication between people with and without disabilities in Saudi Arabia. These and other results suggest that cultural norms influence perceptions of people with disabilities, most recently motivating positive integration and inclusion of people with disabilities in Saudi Arabia.

Keywords: Disability, Communication, Cultural Norms, Non-disabled, Integration, Inclusion, Saudi Arabia

Do Cultural Norms Affect Perceptions of People With Disabilities in Saudi Arabia?

Cultural norms may affect social perceptions of people with disabilities. Culture includes many complex and dynamic phenomena shaped by a belief and value system developed over the course of a person's life (Almarwani et al., 2020). These phenomena include traditions, education, language, religion, and social standards, and typically become normative for a society when practiced continuously over several generations (Almarwani et al., 2020). Cultural norms may affect social perceptions of disabilities because of the connotations and perceptions of the causes of the disabilities (Al-Aoufi et al., 2012).

Historically, people with disabilities have co-existed with their non-disabled counterparts. However, disabilities are not common and social perceptions vary depending on whether the disability is physical or mental (Nada, 2019). Unfortunately, the often negative perceptions of disabilities facilitate negative stereotypes that can lead to discrimination and isolation (Alofi, 2019). For instance, people with disabilities must often fight for the right to participate in social, economic, and political spaces (Alofi, 2019). Discrimination against and isolation of people with disabilities typically occurs due to limited knowledge about and awareness of disabilities as well as negative perceptions of disability (Hammad et al., 2022). This affects whether and how people with disabilities are integrated and included in social activities (Aldakhil, 2022). This also affects whether and how people communicate with people with disabilities (Aldakhil, 2022). Therefore, cultural norms can influence communication with and attitudes toward people with disabilities (Al-Aoufi, 2012).

Questions Guiding the Current Research

The main question guiding the current research is: Do cultural norms influence perceptions and communication between people with and without disabilities in Saudi Arabia? Other related research questions include: What factors of Saudi Arabian culture influence these perceptions and attitudes? How do Saudi Arabian religion, education, and media influence perceptions of people with disabilities? The specific hypothesis tested can be framed as follows:

H₀: Cultural norms do not impact perceptions and communication between people with and without disabilities.

H_a: Cultural norms impact perceptions and communication between people with and without

disabilities.

The current study explores the potential role of cultural norms in influencing perceptions of and communication with people with disabilities in Saudi Arabia. The findings may suggest the need for open-mindedness towards people with disabilities. Such open-mindedness can be positive in terms of improving communication with people with disabilities and the integration and inclusion of people with disabilities.

Literature Review

Cultural norms can affect people's attitudes and how they communicate and express themselves (Madhesh, 2022). Following, we address how cultural norms in Saudi Arabia, which reflect deep religiosity, may influence attitudes about people with disabilities and communication between people with disabilities and people without disabilities. Tausch (2016) noted that, in general, Arab perceptions of people with disabilities are not favorable and that such negative perceptions and attitudes can lead to exclusion, mistreatment, and infringement of rights. Tausch reports that Arabs perceive that people with disabilities are immature and lack critical thinking skills. These perceptions, in turn, may facilitate discrimination, intolerance, and the use of stigmatizing labels in communication (Tausch, 2016). However, this should be noted as, in part, a historical phenomenon in which society misunderstood the causes of disability, producing doubts and misunderstandings about people with disabilities. This is unlike in the present day, in which the causes of disabilities are better known, affording greater understanding of and empathy for people with disabilities. Alofi et al. (2019) note that some people in Arab societies may have negative associations with disabilities because non-disabled individuals in the family or society are expected to provide special care to people with disabilities.

According to Aldakhil (2022), historically in Arab culture, there was widespread stigma associated with disability, marked by perceptions of inferiority, neglect, contempt, and, in some cases, abuse. This began to change in recent decades when Arab society came to hold more inclusive and understanding perceptions of disabilities. Tausch (2016) notes that the Arab world's perceptions of disability changed during its modernization and the incorporation of self-governance. Arab nations began to re-examine disabilities within the framework of social justice, which motivated scientific understanding of disability in relation to circumstances and social factors that unfairly impact people

with disabilities (Tausch, 2016). For instance, some people are born with a disability, whereas others develop disabilities following environmental accidents or illnesses. Moreover, and more recently, Arab countries better appreciate the need to integrate people with disabilities and people without disabilities, thereby respecting the human rights of all people (Tausch, 2016).

Al-Naami et al. (2010) address issues of disabilities in Saudi Arabia, noting that despite the efforts and commitment to broad inclusion policies such as the Salamanca Statement, inclusion of people with disabilities in Saudi Arabia has not been executed fully. This challenge is produced by several sociocultural, structural, and relational obstacles (Al-Naami et al., 2010).

According to Al-Naami et al., the structural and relational obstacles include social and cultural aspects of shame associated with disabilities that affect inclusion and produce impediments that impact the experiences of people with disabilities and those close to them. Therefore, exclusion is a central feature for some people with disabilities because of the effects of social-cultural norms. This can produce integration barriers that affect communication between people with and without disabilities (Al-Naami et al., 2010).

Alofi et al. (2019) focused on the hearing-impaired community in Saudi Arabia, including their experiences growing up in families with individuals without hearing impairment. The variables investigated included city or location of residence and educational background. The results highlighted the significance of communication in affecting both positive and negative experiences for individuals with hearing impairment. A key finding was that individuals with hearing impairment in Saudi Arabia face specific challenges, including language deprivation, low-quality education, and poor work settings and conditions (Alofi et al., 2019).

Aldakhil (2022) investigated associations between teachers' attitudes and their communications and interactions with students with disabilities in Saudi Arabia, with a focus on teachers' interpretations of Islamic teachings. The findings indicated potential contradictions between teachers' understanding of disabilities and Islamic teachings. The same study also suggested that some interpretations of Islamic teachings may facilitate affirmative and supportive perceptions of disability that challenge non-supportive Islamic interpretations of disability presented by some teachers (Aldakhil, 2022). Aldakhil contends that Islam recognizes disabilities as morally neutral and that individuals are built differently, and this should

not affect interactions with and integration into society. Moreover, Aldakhil argues that Islam acknowledges that people have differently-abled bodies, and this should not be regarded as a punishment or a blessing but instead reflects normal human diversity (Aldakhil, 2022).

Wahabi et al. (2011) found that Saudi Arabian healthcare providers' negative attitudes about and perceptions of disabilities can produce barriers to rehabilitation and integration. According to these researchers, positive attitudes and perceptions support the successful integration of people with disabilities. Similar to other nations, cultural values, customary beliefs, educational background, and religious commitments influence attitudes toward people with disabilities in Saudi Arabia (Wahabi et al., 2011). The authors conclude that Saudi Arabian healthcare providers today have generally positive attitudes towards people with physical and mental disabilities. Thus, religion, cultural beliefs, and educational background may have only small and variable effects on the attitudes and perceptions of healthcare providers with regard to people with disabilities.

Almarwani et al. (2020) also investigated healthcare professionals' conduct and attitude regarding people with disabilities, particularly those who have gained disability through external factors such as accidents. The researchers note that Saudi Arabia has suffered from high morbidity and mortality rates because of accidents, which today represent the second-leading cause of death nationally (Almarwani et al., 2020). For instance, over one million car accidents annually in Saudi Arabia cause death or severe trauma. The researchers also note that Saudi Arabian healthcare providers generally have positive attitudes towards people with disabilities.

Madhesh (2022) contends that awareness of disabilities is necessary to create equity for people with disabilities in Saudi Arabian society. The study focused on Saudi Arabian university students and found that there is a need to increase awareness of disabilities among university students through sensitization and media campaigns. Moreover, there is a need to provide programs and courses about disabilities in institutions of higher learning. The same study also reported differences in awareness and attitudes by gender, university type, and university major (Madhesh, 2022). In another study, Alhumaid (2023) focused on primary-school-aged children in Saudi Arabia to determine their attitudes toward and awareness of students with disabilities. The study found that 10-year-old responders reported more positive attitudes towards people with disabilities than children in older age cohorts. Also, students

attending public schools reported more positive attitudes towards their peers with disabilities in physical education compared to those attending private schools (Alhumaid, 2023). This tended to improve the integration and inclusion of students with disabilities through regular communication. These findings highlight the need for inclusive educational programs.

Another socialization agent that may influence perceptions and attitudes towards people with disabilities and which can also affect communication is the media. Alsewaiah (2021) contends that the media sometimes misrepresents and underrepresents individuals with disabilities. Although this is a global problem, the near invisibility of individuals with disabilities in Saudi Arabian newspapers and other media is concerning (Alsewaiah, 2021). Moreover, the existence of negative stereotypes of people with disabilities is propagated by negative frames that the media sometimes present in representations of people with disabilities. A key finding of this research was that a lack of knowledge and awareness about disability prevents journalists from accurately presenting the issues (Alsewaiah, 2021).

Religious commitments also might influence how people interact with those with disabilities. Saudi Arabia is a deeply Islamic country and adheres to the tenets of the Islamic religion. Al-Aoufi et al. (2012) reported that although Muslims share a set of beliefs and principles, attitudes towards and understanding of disability varies with the degree of a person's faith commitments well as their socio-economic status, educational background, and the local cultural context. Hammad et al. (2022) found that religious youths reported positive attitudes towards people with disabilities, suggesting a link between Islamic religiosity and positive attitudes towards people with disabilities.

Methods

The current study was conducted with adult residents of several Saudi Arabian cities. A survey was administered to secure self-reports of beliefs about and attitudes towards people with disabilities, and to investigate whether and how these beliefs and attitudes might affect communication between people with and without disabilities in Saudi Arabia.

Participants

In total, 141 respondents participated. The study focused on three categorical demographic variables: gender (male vs. female), disability status (disabled vs. non-disabled), and age (younger vs. older). A summary of participant demographics is presented in Table 1. The participants included more

females than males; most were 30-60 years of age, and more of the participants were non-disabled than were disabled. In the case of disability status, a limitation is noted since the study intended to investigate the impact of cultural norms on perceptions and communication between people with disabilities and people without disabilities; hence, an equal representation across disability categories would have provided insightful information. Respondents comprised a convenience sample using the snowball method across Saudi Arabia and residing in large cities.

Table 1: Detailed summary of the variables.

Variable	Attribute		Total
Gender	Male		40
	Female		101
		N	141
Age	20 years and below		20
	21 – 30 years old		15
	31 – 40 years old		30
	41 – 50 years old		30

	51 – 60 years old		32
	More than 60 years old		14
		N	141
Disability Status	Disabled		27
	Non-disabled		114
		N	141

Region	Riyadh Region		66
	Qassim Region		10
	Hail Region		5
	Madinah Region		13
	Eastern Province		10
	Najran Region		1
	Al-Bahah Region		4
	Makkah Region		11
	Tabuk Region		4
	Al-Jawf Region		2
	Jazan Region		3
	Asir Region		11
	Northern Borders Region		1
		N	141

Data Collection Tool

Because no existing survey assessed precisely the issues we were interested in exploring, a structured survey with Likert-scale items was developed for the current study. The survey is a disability attitude and inclusion survey that assesses a participant's knowledge and perceptions of people with disabilities, as shown in the Appendix. This survey also included items assessing cultural norms about people with disabilities. One of the characteristics of Saudi Arabia's population is religious commitment, and the survey includes items assessing religious beliefs, particularly with regard to disabilities. The latter items were included to allow investigation of whether religious beliefs and commitments might affect how people perceive and communicate with persons with disabilities.

Sampling Procedure and Size

The study targeted members of the general population 18 years and older. The study targeted 180

participants and successfully secured reports from 141 participants. The survey was conducted online via convenience sampling, and potential participants were identified through contact email lists and social media using a snowball method. They were told about the purpose of the survey and were then requested to consent to participate. The survey was conducted across two days (21 and 22 June 2024) between 8:00 a.m. and 11:00 p.m., creating opportunities and time for people to be surveyed. Nominal monetary compensation was provided for a completed survey. The study was approved by Scientific Research Ethics Committee at University of XXX (Application Number: XXX, date of approval: 03/04/2024).

Results

The first section of the survey secured information about participants' knowledge and awareness of disabilities. Table 2 provides a summary of these findings. This information is important because it may be useful for explaining the results of inferential analyses (reported below).

Table 2: Summary of findings of Section A of the survey

Statement	Yes	No	Not sure
A Have you ever heard or read about disability?	19	95	27
B Is there a name for a person with a disability in your language?	23	95	23
C Have you ever seen anyone with a disability?	23	83	35
D Do you have anyone with a disability among your relatives?	19	90	32
E Do you have any idea of what causes disability?	26	82	33
F Does disability run in families?	25	88	28
G Do you think disability is contagious?	12	91	38

Based on the information above, there is limited first-hand knowledge about disabilities. For instance, few participants reported that they have family members with disabilities, but most participants have seen or have known someone with a disability. Most respondents do not think disabilities are contagious. In terms of awareness, responses to the first statement suggests a high level of awareness (reading or hearing) about disabilities at the societal level, which may influence how people perceive persons with disabilities. One limitation of this survey is that the type of disability was not specified.

Descriptive Statistics

Table 3 displays results of descriptive analyses of items from the survey. One point to note is that, apart from Q1, which had a strong response of 4.18 (agreement with the item), the other items indicated moderate response strength, about 3.50.

Table 3: Descriptive information for key survey items.

		Standard				
		Mean	Mode	Median	Deviation	Variance
Q1	Disability is a disease from God.	4.18	4	4	0.68	0.47
Q2	You always feel sorry when seeing someone with a disability.	3.54	3	3	0.87	0.76
Q3	You are afraid of disabled people	3.15	2	3	1.33	1.77
Q4	Families having disabled people should completely hide them.	3.36	3	3	1.24	1.54
Q5	Disabled persons should associate with the other members of the community.	3.38	5	3	1.34	1.81
Q6	Disabled children should not attend school.	3.54	3	3	1.18	1.39

Inferential Statistics

In Table 4, we report the results of *t*-tests of differences between two means for each item in the survey and according to the three demographic categorical variables (gender: male, female; age: younger, older; disability status: disabled, non-disabled), with alpha set to .05 (two-tailed).

Table 4: Inferential results for item-level analyses.

Q1. Disability is a disease from God.

	Degree of Freedom	t-Value	p-Value	Average of Difference ($\bar{x}_d$)	SD of Difference (Sd)
Gender Males vs. Females N = 30	29	-0.420	0.677	-0.06667	0.8683

Age Young (40 years and below) vs. Old (41 years and above) N= 30	29	0	1	0	0.6948
Disability Status	24	-1.095	0.284	0.2	0.9129
Non-Disabled vs. Disabled N =25					

Q2. You always feel sorry when seeing someone with a disability.

	Degree of Freedom	t-Value	p-Value	Average of Difference ($\bar{x}_d$)	SD of Difference (Sd)
Gender Males vs. Females N = 30	29	-3.071	0.0046	-0.6	0.07
Age Young (40 years and below) vs. Old (41 years and above) N= 30	29	-1.191	0.2431	0.2333	1.0726
Disability Status Non-Disabled vs. Disabled N = 25	24	-3.977	0.0005	0.96	1.2069

Q3. You are afraid of disabled people

	Degree of Freedom	t-Value	p-Value	Average of Difference ($\bar{x}_d$)	SD of Difference (Sd)
Gender Males vs. Females N = 30	29	-2.854	0.007	-0.8333	1.5992
Age Young (40 years and below) vs. Old (41 years and above) N= 30	29	-2.420	0.022	0.7333	1.6595
Disability Status Non-Disabled vs. Disabled N =25	24	-4.645	0.0001	1.52	1.6361

Q4. Families having disabled people should completely hide them.

	Degree of Freedom	t-Value	p-Value	Average of Difference ($\bar{x}$ d)	SD of Difference (Sd)
Gender Males vs. Females N = 30	29	-3.433	0.0018	-0.9667	1.5421
Age Young (40 years and below) vs. Old (41 years and above) N= 30	29	-1.432	0.1625	0.3667	1.4016
Disability Status Non-Disabled vs. Disabled	24	-4.820	0.0000	-1.36	1.4107

Q5. Disabled persons should associate with the other members of the community.

	Degree of Freedom	t-Value	p-Value	Average of Difference ($\bar{x}$ d)	SD of Difference (Sd)
Gender Males vs. Females N = 30	29	-3.127	0.0039	-1.0333	1.8096
Age Young (40 years and below) vs. Old (41 years and above) N= 30	29	-0.351	0.728	0.1333	2.08
Disability Status Non-Disabled vs. Disabled N =25	24	-2.794	0.0100	-1.16	2.0753

Q6. Disabled children should not attend school

	Degree of Freedom	t-Value	p-Value	Average of Difference ($\bar{x}_d$)	SD of Difference (Sd)
Gender Males vs. Females N = 30	29	-1.663	0.1070	-0.5333	1.7564
Age Young (40 years and below) vs. Old (41 years and above)	29	-1.266	0.2155	0.3667	1.5862
N= 30 Disability Status Non-Disabled vs. Disabled	24	-2.626	0.0147	0.84	1.599

Summary

The results across the six items and three demographic variables indicate less support for the null hypothesis, and greater support for the alternative hypothesis. The null hypothesis states that "cultural norms do not impact perceptions and communication between people with and without disabilities." In contrast, the alternative hypothesis states that "cultural norms impact perceptions and communication between people with and without disabilities." These results, however, vary depending on the items concerning culture, perception, and communication. For instance, item one addresses religion (disability is a disease from God), a cultural variable. For all three variables (gender, age, and disability status), the null hypothesis could not be rejected. Yet, for item three, which deals with social perception (fear of disabled people), all three variables were significant, and the null hypothesis was rejected in favor of the alternative. Item five links to communication as it considers whether people with disabilities should be included/integrated in the community, and here, the results for gender and disability status are consistent with the alternative hypothesis. In contrast, for age, the null hypothesis cannot be

rejected. The interpretation of the results thus varies across items and demographic variables, especially age. However, gender and disability status produced mean differences that were significant, indicating rejection of the null hypothesis for most of the items.

Discussion

The current study intended to investigate the impact of cultural norms on perceptions and communication between people with and without disabilities. Six items measuring perception and communication were considered, some of which are linked to culture, i.e. religion (i.e. disability is a disease from God) and communication (i.e. inclusion of people with disabilities in the community and schools). Most of the respondents had few or no relatives with disabilities, and few knew what causes disabilities. However, the majority of the respondents agree that disabilities are not contagious. The results of the six items showed less support for the null hypothesis (i.e. cultural norms do not impact perceptions and communication between people with and without disabilities) and greater support for the alternative hypothesis (i.e. cultural norms impact the perceptions and communication between people with and without disabilities).

Culture

Three variables reflecting elements of the society (gender, age, and disability status) were investigated with regard to responses on six items that measure culture, perception, and communication in Saudi Arabia. For all three variables, there was some indication that cultural norms impact perceptions and communication between people with disabilities and those

without; however, this varies across the different items. For instance, on the item of culture, represented by religion (i.e. disability is a disease from God), all three variables (gender, age, and disability status) produced results that were consistent with the null hypothesis that culture does not impact perceptions and communication between people with and without disabilities. This suggests that men, women, members of older and younger groups, and both the non-disabled and disabled believe that disability is a disease from God. This could be explained by the strong Islamic foundation of Saudi Arabia to which people of diverse backgrounds, including the three variables – age, gender, and disability status, subscribe. The Quran (9:51) states, "Nothing will happen to us except what Allah has decreed for us," a statement that suggests that Allah predestines everything in life. He has the ultimate authority and full control of people's affairs (Bengtsson, 2018). Perhaps the phrasing of the item on religion, "disability is a disease from God", is specifically on the negative side. Still, the Islamic faith requires people to treat those with a disability with respect, empathy, and care (Bazna & Hatab, 2005). But as far as who allows disability, there is no argument from most people in Saudi Arabia that it is divinely instigated.

Perceptions

On the item assessing perceptions (i.e. fear of disabled people), all three variables produced results indicating rejection of the null hypothesis and in favor of the alternative hypothesis. Men, women, and people of different age groups and disability status report that cultural norms impact perceptions. One way of explaining the results for this item is to ask where the fear arises from. The first section measuring people's understanding and knowledge of disabilities showed that they had little first-hand information. This is due to several reasons, such as not having close family members or relatives with disabilities or not interacting with them much.

In contrast to religion, where the issue of disability can be explained from a religious text that people adhere to, the issue of perception addresses personal experience and interaction.

According to Liu et al. (2018), if one has minimal or no interaction with people with disabilities, the tendency is to rely on stereotypes that are often negative. Here, the stereotypes are part of the cultural knowledge that shapes the views of others (Liu et al., 2018). Therefore, culture shapes perceptions; if the stereotype is positive, then the perceptions will be positive, and if the stereotype is negative, then the perceptions will be negative (Liu et al., 2018).

Communication

Item five links to communication as it considers whether people with disabilities should be included or integrated in the community. Here, the results for gender and disability status are consistent with the alternative hypothesis that culture does impact perceptions and communication between people with and without disabilities. For gender, this would most likely be a given due to the nature of the variable (i.e. it contains both the young and old as well as disabled and non-disabled). Therefore, the focus would be on disability status. A possible reason for disability status being associated with the reported impact of culture on communication is that people with disabilities are still today treated differently from people without disabilities in different societal domains such as education, health, and workplaces.

Despite anti-discrimination policies applicable to people with disabilities in Saudi Arabia (Unified National Platform, 2021), those with disabilities still experience discrimination. Kadi (2018) found that negative perceptions and attitudes towards people with disabilities in Saudi Arabia resulted in discrimination against them, creating challenges for them and preventing them from participating in society equally. Despite efforts to include students with disabilities in general classrooms in Saudi Arabia, many still learn in special and exclusive classrooms dedicated to those with disabilities (Alhumaid et al., 2023).

Conclusion and Limitations

In summary, cultural norms appear to have an impact on perceptions and communication between people with disabilities and those without disabilities in Saudi Arabia. As suggested by the current findings, religious beliefs and stereotypes may play important roles in perception and communication. This can be deduced as effects of culture on perceptions and communication between people with and without disabilities. Although religious beliefs and commitments (i.e. Islamic doctrines) provide an explanation for disability (i.e. pre-ordained by Allah) and even suggest respect for those with disabilities, this does not guarantee respect and inclusion among the majority of the population. Discrimination is due, in part, to negative perceptions caused by stereotypes that persist despite anti-discrimination laws applicable to people with disabilities in Saudi Arabia. Such stereotypes may continue to influence whether and how people with disabilities are included in schools and workplaces.

The study has limitations in terms of sample size and emphasis. First, a larger sample size would have provided more reliable and compelling results. Second, the study did not emphasize the type of disability but assumed physical disability, whereas one can distinguish physical disabilities from mental or cognitive disabilities. Perhaps a focus on the type of disability would have yielded different results. Also, the study may have allowed or facilitated subjective bias on the part of participants. A more similar proportion of disabled and non-disabled participants might have provided different results, and the same is true for gender and age since most participants were younger women.

Data Availability Statement: Data are available on request from the first author.

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Appendix

SECTION A: Knowledge about disability

A. Have you ever heard or read about disability?

Yes ☐ No ☐ Not sure ☐

B. Is there a name for a person with a disability in your own language?

Yes ☐ No ☐ Do not know ☐

C. Have you ever seen anyone with a disability? Yes

☐ No ☐ Not sure ☐

D. Do you have anyone with a disability among your relatives?

Yes ☐ No ☐ Not sure ☐

E. A. Do you have any idea of what causes disability?

Yes ☐ No ☐ Not sure ☐

F. Does disability run in families?

Yes ☐ No ☐ Not sure ☐

G. Do you think disability is contagious?

Yes ☐ No ☐ Do not know ☐

Please rate how much you agree or disagree with the following sentence:

Item	Statement	Strongly Agree (5)	Agree (4)	Neither Agree nor Disagree (3)	Disagree (2)	Strongly Disagree (1)
1	Disability is a man-made disease.					
2	Disability is a disease from God.					
3	You always feel sorry when seeing someone with a disability.					
4	Besides needing help with some physical activities, disabled people are different from other people.					
5	Your disabled child should not marry.					
6	You are afraid of disabled people					
7	Your child who is not disabled should not marry a disabled person.					
8	People with disability should not have children.					
9	If you happen to be the manager of a company, you would not employ disabled persons in your company.					
10	People with disability should not be allowed to be in charge of the company.					

11	Families having disabled people should completely hide them.					
12	Disabled persons should associate with the other members of the community.					
13	Persons with a disability should not be allowed to use public transport.					
14	Parents of children with a disability should have an opportunity to give an opinion and participate in the treatment of their disabled children.					
15	Disabled children should not attend school.					
	Disabled children should have their own schools.					
16	Disabled children should participate in sports.					