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Hsiu-Ching Lin  
School of Humanities and Human Services  
Queensland University of Technology

Marie Knox  
School of Humanities and Human Services  
Queensland University of Technology

Jennieffer Barr  
School of Nursing  
Queensland University of Technology

Man-Yen Chiu  
Graduate Institute of Rehabilitation Counselling  
National Taiwan Normal University, Taiwan

Kao-Chi Chung  
Institute of Biomedical Engineering  
National Cheng Kung University, Taiwan

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# **Living with “The Wall”: The Experiences and Perspectives on Social Relationships of Two Taiwanese People with a Physical Disability**

*Hsiu-Ching Lin*

*School of Humanities and Human Services  
Queensland University of Technology*

*Marie Knox*

*School of Humanities and Human Services  
Queensland University of Technology*

*Jennieffer Barr*

*School of Nursing*

*Queensland University of Technology*

*Man-Yen Chiu*

*Graduate Institute of Rehabilitation Counseling*

*National Taiwan Normal University*

*Kao-Chi Chung*

*Institute of Biomedical Engineering*

*National Cheng Kung University, Taiwan*

## **Introduction**

The individual model of disability, as outlined by Oliver and his colleagues (Barnes, Mercer, & Shakespeare, 1999; Oliver, 1996a, 1996b, 1996c; Oliver & Sapey, 2006; Swain, French, & Cameron, 2003; Thomas, 1999) has been the traditional philosophical approach to “train” people with disabilities (referred to as “patients”) to be as independent as possible in order to maximize or maintain their functioning. Medical personnel such as doctors, occupational therapists or physical therapists are seen as experts with regard to medical treatment or rehabilitation, and their purpose is to provide programs aimed at improving quality of life of individuals with a disability.

However, disability is not a single issue which can be viewed or explained purely by the individual model of disability (Miles, 2002) The cultural understanding of disability within a society is a pervasive influence on the way that disability is understood within a particular culture and on the social values or attitudes towards people with a disability (Miles, 1995, 2002; Oliver & Sapey, 2006). Therefore, disability can be conceptualized as a social issue with different cultural understanding among various cultures, and not just a medical issue. This paper will focus on the understanding of disability within the Taiwanese culture.

## ***The Cultural Understanding of Disability in Taiwan***

In Taiwan, the three strongest influences on the cultural understanding of disability are traditional Buddhism beliefs, the Chinese language and the family relationships (Charlton, 1998; Iwakuma & Nussbaum, 2000; Miles, 1995, 2000, 2002). How these three cultural factors have influenced the cultural understanding of disability in Taiwan is discussed below:

## *Influence of Buddhism on the cultural understanding of disability in Taiwan*

The major beliefs of Buddhism such as reincarnation and karma have an important influence on the cultural understanding of disability in Taiwan (Miles, 2002). Many Taiwanese people see disabled people as reincarnation, as a punishment and even consider that disability might be contagious (Department of Social Affairs, 1994). For example, individuals with a disability are viewed as useless, an embarrassment, irrational, irritable, and incompetent people or idiots. They are seen as troublemakers as well as a burden on society. They are misunderstood, as well as considered repulsive (Department of Social Affairs of the Ministry of the Interior, 1994). Therefore, the common attitude toward disabled people is that they are seen as objects of charity.

### *Disability-related Chinese language characters*

Charlton (1998) suggests that “the words used to describe disability are loaded with social connotations” (p. 66). As a result, it is crucial to depict the disability-related Chinese characters as part of a cultural understanding of disability in Taiwan (Stone, 1999).

Some disability-related characters imply that lacking some part of human function causes the occurrence of impairment, and the perception of impairment is identified as negative and undesirable. For example, Stone (1999) finds “‘cut-off ear’, ‘cut-off foot’ and ‘cut-off nose’ all feature the Knife component” (p. 139) forms part of the disability-related characters.

Additionally, many characters with an offensive meaning, and which refer to people with impairment such as ‘idiots’, ‘simpleton’ or ‘mad people’ are structured by Animal Radicals or containing components which impart evil spirits or lifeless objects (Stone, 1999). For example, the word “insane” has the Dog Radical. As a result the use of dehumanizing and Otherness-creating symbols signifies a cultural attribute of intolerance and non-acceptance of impairment (Stone, 1999).

### *Disability within Chinese family*

Historically, Chinese people have put great emphasis on family morality, and have seen the individual as family-centered and family-dependent (Fu, 1994; Iwakuma & Nussbaum, 2000; Stone, 1999). In addition, family is a unit for enhancing consolidation via kinship and worship of the ancestors (Fu, 1994). The values associated with bringing up children in a traditional Chinese family are that children will take care of their parents when they grow up. Parents also expect their children to become successful people in society and bring a good reputation to their own family (Chou, 1998). In effect, the family ethic is significantly regulated by filial piety (Chiu, 2004).

Having a disabled child is therefore seen as a shameful thing for a Chinese family and the family is apologetic to its ancestors; having such a child also implies the unsuccessful social performance (Chou, 1998; Iwakuma & Nussbaum, 2000). In addition, to have a disabled child might be regarded as retribution or punishment because of the ancestors’ lack of good virtues or the family’s disrespect for its forefathers (Chou, 1998). Therefore, having a child with a disability can bring immense stress on a family. According to United Nations (1993), as cited in Iwakuma & Nussbaum (2000), this belief that disability is caused by the supernatural brings about

two kinds of extreme attitudes toward disabled people: “either overprotectiveness or discrimination” (p. 242). This same dichotomy of attitudes exists toward disabled individuals in Taiwan. On the one hand, newborns with a disability in Chinese culture might lack care and love because families are embarrassed and ashamed by having a disabled child i.e. it is seen as losing face; on the other hand, a disabled child might be overprotected by other family members because of the strong obligation of family ethics to look after the disabled individual (Holroyd, 2003; Iwakuma & Nussbaum, 2000; Kuo & Kavanagh, 1994; Shay, 1990; Shih, 1996; Wang, 2002).

From the above discussion, the interlacing of the influences of traditional Buddhism religion, language, and family relationships on disability depicts the unique cultural understanding of disability in Taiwan. Thus, in summary, it has pointed to the devaluing of people with a disability Taiwan (Taiwan Disabled Association, 2001; Wang, 2002). It is crucial to gain the experiences and perspectives of people with disability themselves within this culturally bound context to gain a deeper understanding of disability in Taiwan.

### ***The Importance of Gaining the Experiences and Perspectives of People with Disabilities on Life in Taiwan as a Person with a Disability***

Wang (2002) argues that people with a disability in Taiwan, as in many other cultures, are seen as an oppressed or marginalized group. In line with this view, he defines people with a disability as a disadvantaged minority. Hence, ‘protection’ and ‘special treatment’ are defining characteristics of the relationship between non-disabled and disabled people (Wang, 2002). Moreover, people without a disability cannot put themselves in the situation of a disabled person. Consequently, there are many instances of disability discrimination in Taiwan due to people’s negative attitudes towards disability and lack of enforcement of the enacted regulations by the government (Department of Social Affairs of the Ministry of the Interior, 1994; Wang, 2002).

However, people living with disabilities are members of society first and foremost, and as such have the same rights as other members (Shiau, 2002; Wang, 2002); Disabled people can be considered as citizens who make a valued contribution to the society in which they live and who also have the same obligations as other citizens (Wang, 2002). As a result of the advances in medical technology, there are more disabling conditions and a growing number of people in the disabled population (Shiau, 2002; Wang, 2002). Due to the possible extension of one’s life in the future, everyone might have the chance to experience disability incurred as a result of disease, accident, or aging. Therefore, ‘disability’ is not the problem of few people, but could become a life experience of all of us (Zola, 1989, as cited in Wang, 2002).

The cultural understanding of disability in Taiwan, described above, has given a representation of a cultural environment in which Taiwanese people with disabilities are living their lives. Thus it is critical to explore their perceptions of their experiences amid this environment.

### ***Disability is a Form of Social Oppression***

The unequal treatment of people with disabilities in Taiwan illustrates that such people are more likely to be isolated and segregated, stigmatized and considered as a disadvantaged minority (Hsieh, 1997; Wang, 2002; Yuan, 1981) Such an unequal status of people with a disability is reflective of the social model of disability which argues that

disability is a form of social oppression (Bickenbach, Chatterji, Badley, & Ustun, 1999; Thomas, 1999) In such circumstances, people with a disability will more likely encounter more difficulties than non-disabled people in their social relationships.

The central point of the social model of disability emphasizes that an individual's impairment has no causal relationship with disability; instead, disability is the result of the society's failure to remove the social-structural barriers which disabled people face (Barnes, 1998; Barnes et al., 1999; Oliver, 1996a, 1996c; Swain et al., 2003; Thomas, 1999). Moreover, it is society's responsibility to remove both the social and physical barriers that disabled people face, and it is society that needs to acknowledge and value diversity of people, and not individuals because of disability (Oliver, 1996c).

One of the significant impacts of the social model has had is that it gives an alternative understanding of disability that challenges the individual model in which disability is viewed as an individualized problem – a model which detracts attention from the responsibility of the society to address the needs of all its citizens. (Barnes et al., 1999; Swain et al., 2003). Moreover, the social model of disability provides a basis for disabled people to organize themselves collectively to draw attention to the disadvantages of social and economic structures against which they must struggle to overcome (Barnes et al., 1999; Oliver, 1996b; Swain et al., 2003). Finally, the contribution of the social model of disability can be seen in its function as a touchstone for disabled people to demand their inclusion in society (Swain et al., 2003; Thomas, 1999).

### ***The Purpose of This Study***

Thus, underpinned by the key principles of the social model, disabled people are seen as experts in understanding their own experiences and perceptions of disability. Using the social model of disability as a lens and locating it in the Taiwanese context is critical for understanding the cultural context of disability. It can form important perspectives to enrich a theory of disability. In line with the rationale, a PhD study is underway to explore the understanding of disability in Taiwan. As a part of the wider study, this paper will present the preliminary findings of the experiences that two Taiwanese people with a physical disability have in their social relationships and how they manage these relationships in their lives. The preliminary findings will be used to generate sensitizing concepts for the further development of the theory of the understanding of disability in Taiwan.

## **Methodology**

### ***Research Design***

The research design centered on employing a qualitative approach to explore experiences and perceptions of their social relationships held by two adults with a physical disability in Taiwan. Heideggerian hermeneutic phenomenology was selected as a framework for the study because of its recognition of the value of exploring everyday experiences and its capacity to reflect on interpretations within the shared context of the researcher and study participants. Using interpretive phenomenology as the theoretical perspective of this study, this framework was conducive to establishing both descriptive and interpretive understanding of disability from the study participants.

In addition, this theoretical perspective “increases sensitivity to humans’ ways of being-in-the-world” (Crist & Tanner, 2003), which made it possible to reveal the rich and complex nature of the activity in participants’ everyday lives. Through the dynamic interaction between the researcher and study participants with their shared Taiwanese backgrounds, the description and interpretations of their experiences and perceptions of disability were more readily uncovered (Plager, 1994).

In this study, the researcher adopted *phenomenology* as a means to unfold the perspectives and experiences of participants’ social relationships in Taiwan; and used *hermeneutics* and *grounded theory* as the means to interpret the collected interview information and inductively construct a unique understanding of how the study participants managed their social relationships.

As stated above, the purpose of the study was to explore the experiences and perceptions of social relationships held by people with a physical disability in Taiwan. These people were considered to have the expert knowledge of the disability issue under investigation, and thus vital in assisting to seek a deeper understanding of disability in Taiwan. In addition, many people with a disability might not be aware of the social origin of oppression, such as those Taiwanese with a physical disability who are the target group in the study (Oliver, 1990). Hence, this study might also provide an opportunity for people with a physical disability in Taiwan to raise their consciousness of the social nature of disability.

## **Method**

### *Recruitment of Study Participants*

In line with the research purpose, purposive sampling was used to locate and invite potential participants in Taiwan. Adults with a physical disability living in a range of community-based settings in the Yunlin or Tainan County in Taiwan were invited to participate in the study. Two disability organizations located in each of these counties in Taiwan were asked to assist in the participant recruitment process.

Those people choosing to participate were asked to sign an informed consent form at the time of interview. Further, to prevent participants being identified, participants were given pseudonym names and an age range different from their own in the transcribing of the data and in reporting of the findings.

### *Who were study participants?*

So far, two people have accepted the invitation to participate in the study. It is these 2 participants who are the focus of this paper. These participants have been named Joyce and Pearl. Brief background information for each participant is outlined below:

**Joyce** has an impairment in her left leg sustained as a result of unknown cause when she was a primary school student. She is in her mid-twenties. She uses crutches to assist her mobility. She lives with her family and now has her first job as a social worker ) with a disability organization in Yunlin County; **Pearl** has poliomyelitis and has been a wheelchair user for most of her life. She is in her mid-thirties at the time of interview. She lives alone in a rented flat and has had several working experiences in different places. Now she has a job as an office clerk with a disability organization in Tainan County.

## *Procedure*

### *a) In-depth interviews*

In-depth interviews were used in the study to gain a rich understanding of their own life experiences and perspectives on their social relationships (Holstein & Gubrium, 2004; Johnson, 2001).

With the participants' consent, the in-depth interviewing process was conducted over three to four visits. The interviews were held separately with each participant at a venue that was agreed to by both the researcher and participant. This more readily ensured the participant's comfort and control of the interview process.

### *b) Collaborative partnership*

The researcher and participants worked at building a collaborative partnership throughout the interview process. This partnership directed the interpretation of study participants' experiences and perspectives of their social relationships co-constituted by both parties (Draucker, 1999; Rubin & Rubin, 2005).

Within the collaborative partnership, the participants were seen as experts regarding their own experiences and perceptions, and were encouraged to be actively involved in the interview sessions while the researcher's role was one of facilitation (Hesse-Biber & Leavy, 2006; Knox, Mok, & Parmenter, 2000). At the beginning of an interview, the researcher did not hurry to get on to research related information, but let participants talk about any topics which they liked to share with her instead. Also, the researcher started out the interview with some more general questions so that participants did not feel threatened (Hesse-Biber & Leavy, 2006). In order to ensure the natural flow of the interview, the researcher suggested a list of discussion topics in the form of an interview guide, but also left room for participants to choose what they wanted to talk about or invited them to develop topics in which they were interested (Holstein & Gubrium, 2004).

### *c) Member checking*

The interviewing process also involved checking with the participant that the researcher's interpretation or understanding of the experiences and perceptions that were provided by them were consistent with their own interpretations (Cobb & Forbes, 2002; Knox et al., 2000). Member checking was used to assist the credibility of the findings and to ensure the emerging theory was grounded in the experiences and perceptions of the participants themselves (Cobb & Forbes, 2002). For this study, the member checking process was undertaken by the researcher with participants following each interview session to enable their active participation in the analysis of the information and to develop the credibility and trustworthiness of the interpretation of the interview data (Cobb & Forbes, 2002).

### *d) Transcribing and translation*

Because participants are Taiwanese, they speak either Mandarin or Taiwanese. With participants' agreement, the interviews were taped. The interview information was subsequently transcribed into Chinese and then translated into English.



In the beginning phase of transcribing and translating the interviews, the researcher completed the transcribing work herself and sought a translator to assist with the translation of the transcribed information. The researcher had trialled several translators to check the quality of their translation. However, the researcher found that these translators could not give an accurate translation of much of the interview information because they had no access to the original interview tapes. Therefore, their translation of the interview information risked being distorted and of not capturing the full meanings of the interview participants. Thus, the researcher carried out the remainder of the translation of the transcripts from two participants herself. In this way the quality and richness of the interview material was able to be retained.

In addition, because the researcher's native language is Chinese and she has not had extensive experience in conducting in-depth interviews, she has found that doing the translating of the transcripts has helped her to analyse the interview information in some way. For example, if the researcher used the Chinese characters to do the analysis, she might sometimes take her own Taiwanese cultural background for granted, which might lead her to miss some interesting cultural aspects. In effect, translating the transcribed transcripts into English proved a very useful means of assisting the researcher to analyse the interview information more effectively.

### *Analysis*

For this study, the grounded theory approach (Charmaz, 2006; Strauss & Corbin, 1998) was adopted aided by a hermeneutic attitude to analyze interview data. Coding and memo writing are essential parts of the data analysis process in grounded theory (Charmaz, 2006). They were used in the analysis of the interview information, which led to the identification of relevant concepts and themes, and to the beginning of the construction of the theory of the understanding of disability in Taiwan.

## **Results**

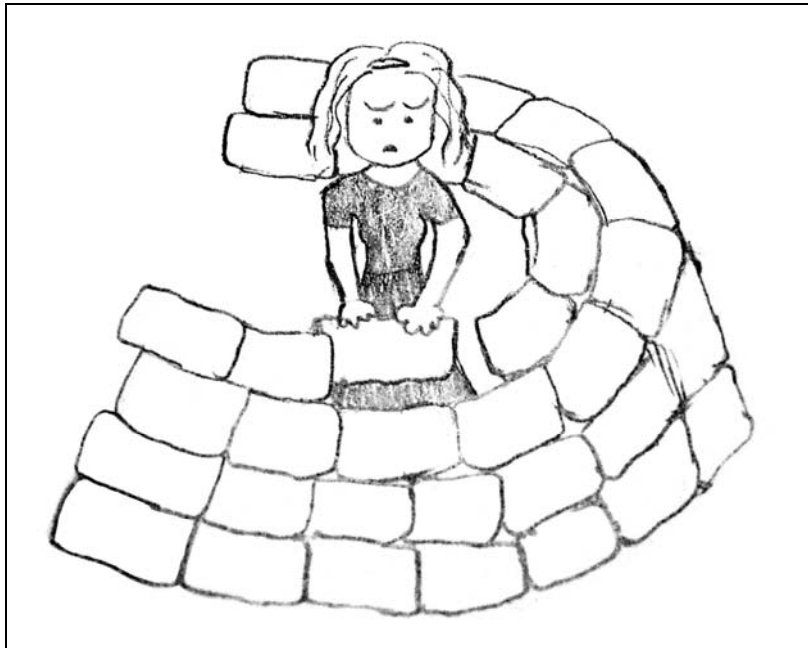
"Wall" is a powerful metaphor described by Pearl as a means of protection from hurt in her social relationships. It vividly expressed the powerful images of hurt and self-defense pervasive in Pearl's and Joyce's social relationships. For this reason, the metaphor of the wall is used in the study to illustrate their stories.

Both participants indicated very clearly that they experienced difficulties in their social relationships. Pearl and Joyce showed that they lived with the "wall" as a consequence of their status as a person with a physical disability. How they built the wall and how they managed the wall as well as the cost of having a wall in their relationships will be discussed below:

### ***Building the Wall in Social Relationships***

Pearl and Joyce described the gradual process of adding bricks to the wall brought about by hurtful experiences and the fear of anticipated hurt that contributed to the gradual construction of the wall in their social relationships over their lifetime (See Fig. 1). For example, Pearl described the influence of hurtful experiences in her life; she said:

*"What human beings remember deepest is hurt! ... Who has ever treated you bad, who doesn't value you or who doesn't care about you, when you are old, you will remember who ever treated you bad! Although you forget their name and face, you remember I had got hurt because of this!"*



**Fig. 1 Gradual adding bricks contributed to the construction of the wall in the social relationships**

Joyce described her fear of getting hurt; she said:

*"because ...I feel ...feel...that being a disabled person I would keep my distance from other people....I would draw a boundary, not allowing other people to get too close because I am afraid of getting hurt."*

The hurtful experiences and the fear of anticipated hurt both participants had were the "bricks" of their walls. The accumulation of bricks over their lifetime built the "wall" to their social relationships.

Two types of bricks were described by Pearl and Joyce. They were:

a) *Hurtful experiences in social relationships as bricks*

Both participants had experienced stigmatization as hurtful. These hurtful experiences formed the bricks of the wall. For example, Pearl spoke of how she was isolated in her childhood because her disability was seen as a punishment in the religious context of Karma and reincarnation in Taiwan. She said:

*"They would just call you the crippled... You can't be together with her or you will be infected or get an evil spirit. ... You will become a bad child in the next life. You will become what she looks like! It makes us sad!"*

Joyce found she would need to tolerate others' judgment because of her physical impairment. She spoke of her experiences of stigmatization as

*"I am looked at often, but they look at my foot not my face. If they looked at my face, I could stand it. But I know I am not a beautiful girl, so it is not because of that. They usually look at my foot first and then my face."*

*b) Fear of anticipated hurt as bricks*

Both participants indicated their fear of getting hurt in their social relationships. This fear of anticipated hurt also formed the bricks of the wall, which both participants lived with. Each indicated that they would keep distance from other people. Pearl told of her concerns about getting along with people. She described this in the following way:

*"I don't know how to be close to you. ...Because we both have walls when I need to say something, I have to be careful and wary of the possibility that people might hurt me. What would you feel if I speak up? Why are you attacking me?"*

Joyce told of her worries in engaging in activities with other people with her comment:

*"I am afraid of walking too slow so that I encumber others. And I can't walk for a longer time, will I encumber others? Would they feel very inconvenience? I am afraid of going out whether people will look at me ... with a strange look?"*

***Managing the Wall in Social Relationships***

Both participants indicated that because they lived in the world, it was necessary to manage the wall to face the difficulties in their social relationships. For example, Pearl described

*"People who can't take it might get melancholia or want to die. But for me, it's not necessary I can take, but at least I would think a lot! Today, I need to live by myself.... If I die, no one can help me deal with it. So the problem still exists and can't be solved."*

Joyce said *"Human beings still have to live in the world independently. I can live without depending on others gradually, and hope I can do it gradually..."*

For Pearl and Joyce, managing the wall in their social relationships included keeping the wall in place when they interacted with people. Additionally, Joyce spoke of taking away some bricks in unavoidable social relationships. These ways of managing the wall are addressed below:

*a) Keeping the wall in place in social relationships*

Both participants kept the "wall" in place when managing their social relationships. Such management of the wall meant they kept their distance from other people to prevent getting hurt. The strategies used by each participant to manage the wall are discussed below:

*"I like to be alone!" - Isolating oneself*

Both participants preferred to be alone rather than to have contact with other people. Pearl said *"I can't face the crowd, and I like to be alone!"* Likewise, Joyce said *"I don't like to have contact with people too much."* In the instances, they kept the wall in place so as to isolate themselves as a means of managing their social relationships.

*"We will give you the cold shoulder on any times!"* - Refusing to let people in

Because of the fear of getting hurt, both participants kept the wall to refuse to let other people into their world. For example, Pearl said

*"For you, you would think why do I refuse and mistrust you! We will give you the cold shoulder on any times! It's possible that I won't open the door when you say you want to come today."*

Joyce talked in a similar way about having an intimate relationship. She said

*"Because I think I shouldn't let myself have too many expectations and hopes, when I end up with nothing, I won't feel disappointed and too hurt. Even though he treats me very well, I would say we are just friends."*

*"I try to forget it all the time!"* - Avoiding remembering the hurt

Both participants indicated they used the wall to avoid recalling the hurt they had suffered from their disablement. For example, Pearl avoided recalling and she tried to forget the hurt in her past. She said *"I deliberately don't recall the past because the past was a very agonizing time for me.... I try to forget it all the time!"* Joyce tried to avoid thinking that she was a disabled person. She described this situation

*"Compared with everyone else, I just have some problem. But there is no really big difference so that I have to remind myself all the time, and to feel that I am a disabled person. So, I think I avoid it and ignore it on purpose...."*

*"Whether you like me or not is up to you!"* - Accepting one's situation

The "wall" each participant had built also provided the function of helping the participant to accept their situations when they got hurt. Pearl said

*"I tell myself all the time: because you are not me....I am the person experiencing it, and no one can live the same life as me. This is my experience of life, and gradually I can comfort myself naturally!"*

Likewise, Joyce used her wall to adapt herself to the stress and trouble brought by being "a good girl". She described

*"Whether others like me is not what I can control. ...Although I find it is hard to get rid of the idea of being a good girl, I wouldn't put too much pressure on myself. So whether you like me or not is up to you!"*

*"I still have to suppress myself to let him finish talking" – Suppressing one's feelings*

Both participants kept the wall to suppress their true feelings when they interacted with others. Pearl said

*"If I have any problem, you have never heard me call you and tell you what happened to me because I have learned to keep things to myself, to keep to myself and not to talk about it."*

Joyce said

*"When I am outside, I have to control not to talk out unnecessary words. ...Although what he said is very annoying, no, I still have to suppress myself to let him finish talking."*

*"I don't want to show my weakness" - Covering up*

Both participants described how they kept the wall to cover themselves up in the social relationships. Pearl managed her wall to look strong in front of others to defend herself. She said *"I prefer to go to work just as an ordinary thing, and I don't want to show my weakness."* For Joyce, she hid her real personality in front of others. She described *"I act timidly on the outside, not full of aggression."*

*"Studying is the only way I can prove myself"- Proving oneself*

The other common attribute both participants shared was that of proving themselves. In this case, they increased the strength of their wall in their social relationships. For example, Pearl said *"I need to work harder and do more than others! I want to let them know I can make it! Not like what you imagine!"* In addition, Joyce said *"I think studying is the only way I can prove myself or one of the ways that I am better than others."*

#### *b) Taking away some bricks in unavoidable social relationships*

Joyce also mentioned a situation in dealing with her wall when she had unavoidable social relationships, such as work. She considered it very important to have a job. She said *"my mother thinks women should have their own jobs; ... So I follow her idea, too: that is to have a job and I am able to feed myself."* However, it was also hard for Joyce to get a job. She said *"I think it is so difficult for me to get this job."* Therefore, she had no choice but to learn some compromising strategies to survive in the work environment. She said *"I just have to make few compromises to adapt to it, and then I won't have to confront finding another job."* How Joyce used the compromising strategies i.e. taking away some of the bricks in the wall to keep her job but still maintained the wall in her life will be discussed below (See Fig. 2):



**Fig. 2 Taking away some bricks from the wall in unavoidable social relationships**

*“I suddenly leaped out and found I could do that by myself”* – Having to be independent

Because Joyce realized that she could not count on her family forever, she had to be independent. She said *“it is impossible to depend on them for my whole life”*. Hence, due to the requirements of her tasks at work such as the home visits, she had to learn to manage the relationships involved in these home visits. To do this she needed to take away several of the bricks in her wall.. She said:

*“Speaking of the home visit ... in the beginning I was very scared and I didn’t know what to do... I hesitated at first so that I couldn’t step out by myself. Because of the trigger point, I suddenly leaped out and I could do that by myself.”*

*“I need to have a back-up for myself”* – Covering up dislike of others

As a result of having a physical impairment, Joyce realized she would need help more often than non-disabled people at work. Therefore, no matter how much she disliked a person, she couldn’t let them find out that she didn’t like them i.e. she couldn’t let them find out about the wall she used to defend herself against them. She had to do this so that she would not lose their help that she needed so much. She explained:

*“I wouldn’t be unpleasant with him or that, just treat more matter-of-fact....Because I have to have others’ help with some things today, then I can’t do things that are out of the ordinary, ...namely I need to have a back-up for myself.”*

*“You cannot help telling a lie”* – Being diplomatic

Joyce found *“telling the truth is very difficult to survive”* at work. Therefore, she learned to manage her wall to appear more diplomatic. She said:

*"Maybe you would think telling a lie is very bad before, but after working you would find you cannot help telling a lie....That means you might need to do some changes and then you can adapt yourself to this society."*

### ***The Cost of the Wall: Social Isolation and Continuous Construction of the Wall***

Both participants lived with their wall, which resulted in a "self-imposed social isolation" They both were wary of getting hurt. Pearl said *"I don't need friends!"* Joyce spoke of *"Friendships for me have not been easy! ... no matter males or females."* Hence, it is apparent that the "wall" resulted in their isolation and in difficulties in their social relationships.

Hence, the self-imposed social isolation by Pearl and Joyce has led to the continuous construction of the wall in their lives. For example, Pearl said *"Someone told me if people want to gain my trust, it can't be achieved in one or two years!"* Likewise, Joyce spoke of her difficulty to get along well with people; she said *"I think people are strange animals and are very fickle. .... They are not easy to cope with, so I don't like to have contact with people too much."*

In effect, the findings indicate that Pearl and Joyce lived with a wall and managed it in their social relationships which resulted in the self-imposed social isolation and the continual building of the wall in their lives.

## **Discussion**

This paper is part of a PhD study. To date, it has explored the experiences and perspectives of two Taiwanese people with a physical disability in their social relationships. They described how they constructed and managed the wall in their lives. It should be noted that the findings are the interpretative results of the interview information of two study participants, and may well change as the study progresses. Moreover, the results do represent the views of the two participants only, and cannot be generalized to other people with a physical disability in Taiwan.

### ***The Importance of Collaborative Partnership***

Study participants were seen as "research partners" in the study (Knox & Hickson, 2001; Knox et al., 2000; Rubin & Rubin, 2005). As the phrase suggests, such a partnership emphasizes the active and egalitarian roles, and the cooperative process of both the researcher and study participants (Holstein & Gubrium, 2004; Minichiello, Aroni, Timewell, & Alexander, 1995; Rubin & Rubin, 2005). In addition, the collaborative partnership also implied the uniqueness of each participant, their distinct expertise or characteristics, and the diverse ways in which the individual interacted with the researcher (Knox et al., 2000; Rubin & Rubin, 2005). For example, Pearl mentioned that she might need to cancel or put off the interview because of her illness or other unexpected events; Joyce indicated a need for time to reflect on the interview topics. Hence, it is clear that each participant did have different ways in interacting with the researcher, and their concerns were valued when they took part in the interview sessions because participants and the researcher were in an equal status and they were seen as the members of the research team in the study (Knox et al., 2000).

In this study, the development of a collaborative partnership in the interviewing process was critical. People with a disability were considered as experts in their understanding of disability and that of their own social relationships, and the researcher was the learner who empathetically sought, with them, to understand and interpret their experiences and perspectives. Moreover, it allowed the natural flow of the in-depth interviews which assisted the researcher in unsilencing the silenced voices and garnering the deeper understanding of issues of concern to the participants (Knox & Hickson, 2001; Knox et al., 2000; Rubin & Rubin, 2005).

Moreover, people with disabilities in general have encountered more oppressive and marginalized situations than people without disabilities (Swain et al., 2003; Wang, 2002). From the emphasis of collaborative partnership, this paper provided an opportunity to have their perspectives acknowledged and respected.

### ***Social Construction of “Wall”***

In the results, participants described their need to build the wall in their social relationships. Thus it can be seen that having an impairment can disable a person in Taiwan. That means such individuals would suffer more difficulties in the social relationships as a result of disablement in society. Consequently, it is understandable why a person with an impairment might construct a “wall” in their social relationships. Because human beings are active agents in managing their relationships (Knox et al., 2000), they make the decisions in specific circumstances. Hence, the study participants used the coping strategy of building the “wall” to adapt to the difficulties they encountered from the disablement in their social life. The information they provided has detailed the richness and complexity of the wall they have built to manage their social relationships.

The results respond to what social modellers call the “social construction of disability” (Thomas, 1999). As Thomas (1999) argues that “disability becomes a particular form of unequal social relationships which manifests itself through exclusionary and oppressive practices – disablism – at the interpersonal, organizational, cultural and socio-structural levels in particular societal contexts” (p. 40) Within the social model of disability, the social barriers for disabled people refer to the many unequal aspects that they confront, but which non-disabled people taken for granted (Bickenbach et al., 1999). These barriers such as cultural and attitudinal barriers, that exclude them from participating in the main stream society (Barnes, 1998; Swain et al., 2003; Thomas, 1999). Therefore, social modellers argue that disability is a form of social oppression (Thomas, 1999). Understandably, the “wall” was also a product of the unequal social relationships. Hence, the “wall” was also “socially constructed” in the disabling context. In addition, the “wall” was evidence of a form of social oppression which study participants confronted. The wall was a way in which they dealt with the social oppression.

Underpinned by the recognition of the social model, disabled people are seen as experts in their own right. Moreover, Morris (1993) explains that “the experience of physical impairment is similarly socially constructed...an individual’s experience of a particular impairment must be placed within its social context... the experience of disability is culturally variable” (p. 86), so one way to understand the essence of disability in Taiwan is to locate it in its cultural background. As a result, this study has used the social model of disability as a lens and has located it in the Taiwanese context to present the preliminary findings of the difficulties that two Taiwanese people with a physical disability faced in their social relationships and how they managed them in their lives.



In reflecting on the interview process, the researcher found that her former role as an occupational therapist in Taiwan also had influenced her interaction with the two participants. For example, during the interview session, the researcher asked both participants about their physical condition and tried to give them her own advice on how to use a particular assistive device. However, both participants maintained that some of the researcher's more personal questions, such as "how do you go to the toilet?", made them feel embarrassed and uncomfortable. But the researcher was not aware of such embarrassment at first. That was because as a service provider, she had brought her own assumptions and background into her interaction with the two participants. She still, quite unconsciously, saw them as "patients" rather than as experts in disability. Thus, a further contribution of the study is that by providing a vivid picture of the life of people with a physical disability in Taiwan, it has enabled people, including service providers, to consider more appropriate ways to build rapport with the service users, and to be aware of the power imbalance between them and the people with a disability who they are supporting.

Using Foucault's view of power for social policy, Watson (2000) argues that "power and knowledge are intimately connected and intertwined" (p. 68), Therefore, the knowledge gained from disabled people themselves can be an aspect of power which has implications for policy and service provision, and can lead to a better working and collaborative relationship between people with an impairment and service providers such as myself in some small way (Abberley, 1998; Watson, 2000).

Finally, the knowledge they provided has yielded many useful sensitizing concepts for a wider doctoral study which aims to develop a theory of the understanding of disability in Taiwan and reinforces the importance of gaining an understanding of the lived experience and perspectives of disability.

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