

**Mobilisation and the Disability Rights Movement:
The Realities of Public Transport in Bangkok**

Lauren Joy Avery

*Submitted in accordance with the requirements for the degree of
Master of Arts by Research*

University of Leeds

School of Languages, Cultures and Societies and
the Centre for Disability Studies

November 2017

The candidate confirms that the work submitted is his/her/their own and that appropriate credit has been given where reference has been made to the work of others.

This copy has been supplied on the understanding that it is copyright material and that no quotation from the thesis may be published without proper acknowledgement.

The right of Lauren Joy Avery to be identified as Author of this work has been asserted by Lauren Joy Avery in accordance with the Copyright, Designs and Patents Act 1988.

Acknowledgements

The author would like to express the following acknowledgments for the production of this thesis. Firstly, to my supervisors; Dr Martin Seeger, for his consistent support and helpful advice in writing about all things Thai-related; and Dr Simon Prideaux, for his invaluable insight into Disability Studies and advice on structure. Secondly, to the Royal Thai Embassy, London, who provided the MAR Thai Studies scholarship via the University of Leeds. Thirdly, to the gracious academic and support staff from the Department of Rehabilitation for Persons with Disabilities at Ratchasuda College, Mahidol University, in particular Tam Jatunam, who all helped me with the practical elements of my data collection in Thailand. Also, to all the DPOs, and particularly TFA; the Thai National Associations for Persons with Disabilities in Thailand, particularly APHT, TAB and NADT; the Thai Government organisations who offered support, OTP and the Ministry of Transport; MRTA; and all of the individuals who generously gave their time to share their experiences of using public transport with me. Without this input there would be no thesis. Finally, to all of my English family, friends, housemates, other half and my Thai family and friends, for keeping me sane, giving me an amazing year and showing me great *metta* when things got stressful, thank you.

Abstract

Many disabled people in Thailand face exclusion from education, employment and wider participation in society. This is exacerbated by a persistence of medical model thinking in society and lack of mobility of disabled people. Many of the public transport systems in Bangkok lack accessibility and despite campaigning by disability rights activists progress has been slow.

The research explores disabled user perspectives on the physical and non-physical accessibility of public transport in Bangkok. Barriers and enablers to travel using these systems are revealed through focus groups with disabled people and carers. Secondly, the campaign to improve accessibility of public transport is examined through in-depth interviews with activists, academics and members of the Thai government.

The findings show that service provider attitudes can result in barriers and enablers to travel for disabled passengers that counteract or enhance the mechanisms to equalise access for disabled people. Additionally, the campaign to improve public transport is impeded by issues mobilising disability associations and disabled individuals that stem from Thai socio-cultural conceptualisations of disability and interactions within the societal hierarchy. Further research is needed on encouraging participation in and of the disability rights movement and how to improve attitudes towards disability of public service providers.

Keywords: disability, Thailand, public transport, accessibility

Impact Statement

The research contributes to the limited literature on disability studies in non-Western countries that is written for an international audience. Although there are a number of accessibility and transport studies, it is one of a limited number of that does not focus exclusively on physical access to public transport and includes the voices of cognitively impaired people and their carers. The research took a broader approach to the measure of accessibility, considering psychosocial barriers to using public transport, such as attitudinal barriers and the way in which they can counteract mechanisms to improve accessibility for disabled passengers.

By taking a sociocultural approach, the research provides insight into the issues of implementing universal human rights policies, such as the Convention on the Rights of Persons with Disabilities, in real-country contexts. The findings highlight that social and cultural mechanisms, hierarchical structures and belief systems influence the disability rights movement in Thailand and the interaction between disabled people's organisations, government bodies and the private sector. The research therefore has real-world application in that it indicates that in order for disability rights implementation to be successful, especially in countries where the approach to individual human rights may vary, these sociocultural factors cannot be considered as secondary.

Contents

Note on translation and transliteration ...7

List of acronyms ...7

1. Disability and Thailand ...9

- 1.1. Introduction...9
- 1.2. The Disability Discourse ...10
- 1.3. Thailand, disability and human rights ...15
- 1.4. Societal structure and the Thai belief System ...21

2. Transport, Accessibility, Politics and Civil Society ...35

- 2.1. Theories of accessibility ...35
- 2.2. Politics and civil society in Thailand ...37
- 2.3. Participation in civil society ...41
- 2.4. The disability rights movement and change ...43
- 2.5. Thai DPOs and Disability-related Ministries ...45
- 2.6. Public Transport accessibility in Bangkok ...47

3. Research Design ...57

- 3.1. Aims and Objectives ...57
- 3.2. Research Questions ...58
- 3.3. Approaches of past research ...59
- 3.4. Interviews and Focus Groups ...62
- 3.5. Researcher Bias and Researcher Effect ...64
- 3.6. Interviews ...67
- 3.7. Focus Groups ...69
- 3.8. Methods of data analysis ...72
- 3.9. Ethical Considerations ...72

4. Realities, Mobilisation and Interaction ...74

- 4.1. The realities of public transport ...74
- 4.2. Mobilising disabled people ...81
- 4.3. Interaction and collaboration ...86
- 4.4. Discussion ...91

5. Conclusion ...97

- 5.1. Introduction ...97
- 5.2. Contributions and main conclusions ...97
- 5.3. Limitations of the research ...100
- 5.4. Recommendations for further research ...101

References...102

Glossary of Thai Words and Phrases...114

Appendix A ...115

Interview transcripts
Focus group transcripts

Appendix B ...189

Interview questions sample
Participant information sheet and advert (English)
Consent form example
Sample approach email
Ethical approval form
Risk assessment

List of Figures

Fig. 1. Poverty/disability cycle – Yeo and Moore (2003).

Fig. 2. Model of group identification and collective action - Brewer and Silver (2000).

Fig. 3. Adapted from Ståhl's User perspective on accessible public transport (1997).

List of Images

(Images are author's own unless referenced)

Image. 1. Bangkok public bus. Kaaloo, C. 2017. [Photograph]. Regular (blue & white) city bus. [Online]. [22/08/2017]. Available from: <http://grrrltraveler.com/sightseeing/getting-around/5-lessons-bangkok-bus/>.

Image. 2. Stair-lift at BTS National Stadium.

Image. 3. S-guard with wheelchair logo. Chirapongse, K. 2017. TIT (This Is Thailand). [Facebook]. 12/02/2017. [14/04/2017]. Available from: <https://www.facebook.com/groups/43934411488/>

Image. 4. S-guard on Pahon-yothin road.

Image. 5. Accessible van with wheelchair lift. Blue Rolling Dot. 2014. [Online]. [24/08/2017]. Wheelchair accessible taxi. Available from: <http://www.bluerollingdot.org/articles/lifestyle/185>

Image. 6, 7, 8. Photo-journey at Bang Na BTS station en route to Bangkok International Trade and Exhibition Centre, 2017. Photos provided by Ms Nunthida Chitpukdeerat, TFA.

Image. 9. Communications system showing current station on the MRT, purple line, opened 2016, taken 2017.

List of Tables

Table 1. List of elite interview participants.

Note on translations and transliterations

Translations from Thai to English in this piece of work are the author's own unless stated otherwise. English transliterations of Thai words will follow the Thai-language.com enhanced phonemic transcription scheme except for people or organisation names with an already established translation. When referring to named research participants, the Thai custom of using their first name will be followed, other than when they are mentioned for the first time, when their full names will be used.

List of organisational acronyms

*NB obscure acronyms are the organisation's own creation and not the researcher's.

APDC – Asia Pacific Development Centre

APHT – Association of the Physically Handicapped in Thailand

BTS – Bangkok Mass Transit System Public Company Limited (used as an abbreviation for the sky-train/monorail)

CRPD – Convention on the Rights of Persons with Disabilities

DEP – National Office for Empowerment of People with Disabilities

DTH – Disabilities Thailand Association

ESCAP – Economic and Social Commission for Asia and the Pacific (UN)

MoT – Ministry of Transport (Thailand)

MRT – Mass Rapid Transit (used as an abbreviation for the underground train/metro)

MRTA – Mass Rapid Transit Authority of Thailand

MSDHS - Ministry of Social Development and Human Security (Thailand)

NADT – National Association of the Deaf in Thailand

NHRC – Thai National Human Rights Commission

OTP - Office of Transport Policy and Traffic

SDGs – Sustainable Development Goals

TAB –Thai Association of the Blind

UN – United Nations

List of other acronyms

CSO – civil society organisation

DPO – disabled people’s organisation

GIS – geographic information systems

ID – intellectual disability

PWD – persons with disabilities

SHOP – self-help organisation of people with disabilities

UD – universal design

Chapter One – Disability and Thailand

1.1. Introduction

This thesis is about public transport in Bangkok and the extent to which the public transport system, both as a whole and the services that it consists of, are accessible to and able to be conveniently used by disabled people. The thesis examines the Thai conceptualisation of disability through a review of the existing Thai Studies literature and uses this as an analytical framework to interpret the accessibility issues in the public transport system and the ongoing conversation between disabled people's organisations (DPOs), the Thai government and service providers to address these issues.

The research offers several contributions. Firstly, it adds to a minority of international disability and accessibility studies set in a non-Western context, thus helping to address this imbalance in the existing literature. Secondly, unlike many transport and accessibility studies, it seeks to incorporate an acknowledgment of non-physical barriers to the use of public transport and represent the experiences of both physically and non-physically disabled people in the data collection. Thirdly, the research takes an interdisciplinary approach across Thai Studies, Transport Studies and Disability Studies by examining the cultural conceptualisation of disability and using this as an analytical tool to study the issues with public transport in the country-context.

My own motivation for undertaking research on this particular subject comes from personal experience, not as a disabled person myself, but as a family member, carer, friend, colleague and witness of these barriers and their impacts. I was introduced to Thailand and injustices towards disabled people simultaneously, when visiting an orphanage for disabled children in the country with my family as an eleven-year-old. After moving to live there as an adult, my work at a local charity for disabled children revealed many disabled people's isolation due to the endemic lack of mobility and the impact this had on their independence and the quality of life of them and their families. It was further highlighted by the barriers to travel experienced by my youngest brother, when visiting Thailand again, several years after being adopted to live with my family in the UK. The multiple barriers presented to someone with both physical and cognitive impairments and their family members

or carers are difficult to navigate during a short trip, and so it is hard to imagine having to deal with them in addition to living, socialising and working in such an environment every day.

Faced with a wide variety of complex issues affecting people disabled by their environments, not only in Thailand but also in societies around the world, it was difficult to choose one to focus on. However, for the reasons outlined above it became clear that mobility was part of a wider circle of exclusion for disabled people in Thailand. This fact has been acknowledged by a range of individuals and organisations and has continued to receive local and national media attention, and so I wanted to understand why, that such a tangible, recognizable, life-limiting and yet solvable issue was yet to be solved in a ‘modern’ capital city such as Bangkok.

1.2. The Disability Discourse

Models of Disability

The medical model of disability, prevalent throughout most of the 20th century, views disability as lying with the individual, something to be ‘suffered from’, ‘cured’ or for the person with the disability to be ‘rehabilitated’. It idealises the concept of ‘normal’ and measures disability against this standard. The World Health Organization (WHO) published the following definitions in 1976 as part of the International Classification of Impairments, Disabilities, and Handicaps (ICIDH):

- *Impairment: any loss or abnormality of psychological or anatomical structure or function (p.47).*
- *Disability: any restriction or lack of ability (resulting from an impairment) to perform an activity in the manner or within the range considered normal for a human being (p.143).*
- *Handicap: any disadvantage for a given individual, resulting from impairment or a disability that limits or prevents the fulfillment of a role that is normal...for that individual (p.183).*

As can be seen from the WHO definitions, disability is clearly seen as a result of impairment and ‘normal’ is the measure against which ability is defined, with no mention of the role of society in the cause of disability. In summary, the medical model conceptualises disability as an abnormality presenting as a tragedy for the individual and a burden of society (Barnes and Mercer, 2003).

Similarly, the charity model builds on the ideas of the medical model and views the disabled person as someone to be helped, provided for, and even pitied. Traditionally, charities and NGOs have plugged the gap between state services and the need for services for disabled people and whilst this is often necessary, it has been argued that the presence of charities removes the obligation of society to provide for the people who need such services (Shakespeare, 2000). Furthermore, delegating charities as responsible for issues affecting disabled people ensures their continued exclusion because the idea of charity denies equality of the person receiving support (Lamichhane, 2015). Disability charities run by non-disabled people can result in an unequal power-balance between the benefactors and the patron and traditionally, charity fundraising has been known to rely on a view of disabled people as 'needy'. Much like the medical model, the charity model runs the risk of disempowering disabled people by reducing them to objects of charity, misrepresenting issues of disability and fuelling oppression.

A challenge of the medical model by disabled people during the 1960s in the U.K. and North America gave rise to the Social Model, which conceptualises disability as caused by society – in the environment, attitudes, beliefs and practices that exclude persons with impairments, thereby disabling them. Disability therefore must be understood in terms of a person's experience and quality of life within the overall social context (Üstün et al., 2001). Problem solving from the social-model perspective focuses on making changes in society to empower disabled people and allow full participation. This way of thinking has since been internationally recognised and is somewhat reflected in the Convention of the Rights for Persons with Disabilities (CRPD) and the subsequently revised international classification of disability by WHO. The revised ICIDH-2 (WHO, 1999) replaced the ICIDH in 1999 as a revised definition of disability that separates 'impairment' and 'disability'. The original ICIDH was criticised as ignoring the role of society and environment in social exclusion and presenting an individualistic approach to 'treating' the disability rather than changing society (Barnes and Mercer, 2003).

Despite international definitions of disability changing to reflect the ideas of the social model, there has still been some resistance to its overall acceptance and usage. Some theorists have been critical of the social model, claiming that it fails to take into the account the individuality of impairments and how this might also contribute to the issues faced by disabled people.

Disability is always an interaction between individual factors - predominantly impairment, aspirations and motivations and contextual factors - environments, policies, barriers and so forth (Shakespeare, 2008, p.12).

These criticisms of both the medical and the social models have resulted in the development of a 'middle-ground' theory, sometimes referred to as the Biopsychosocial model and encompassed in the WHO's most recently developed disability classification - the International Classification of Functioning and Health (ICF) in 2001. The Biopsychosocial model aims to take into account both the individual factors of disability and the social and environmental factors. In rebuke of this, other leading disability studies scholars, namely Oliver and Barnes, argue that the Biopsychosocial model still has its roots in the medical model 'in that it retains the individual as the starting point for the analysis of "body function and activity"' (2012, p. 25-26). Furthermore, whilst the social model is not an all-encompassing model, it is still useful as a lens to study impairment and society and how the situation can be improved for disabled people (Barnes, 2003; Oliver, 2013). The social model does not claim that removing all of the barriers in society would solve all of the problems related to impairment. However it would certainly go some way in empowering disabled people, particularly in the removal of cultural barriers that give rise to prejudice and discrimination (Barnes, 2003). In conclusion, the Biopsychosocial model still allows for the possibility of medical and charity model thinking that could potentially undermine the efforts to empower disabled people and allow access to equal rights.

On these grounds this research will adopt the social model of disability as the ontological stance of this study. It will aim to acknowledge impairment but focus on how removing societal barriers can improve the lives of disabled people in Thailand, thus furthering the application of the social model in an international setting. The research will also examine the prevalence of the medical and charity models of thinking and how this interacts with Thai cultural ideology and social and political structure to impact the disability rights movement in Thailand and the fight for fully accessible public transport in Bangkok.

Disabled people or PWD?

Part of the discourse on disability looks at the language we use to refer to disability, impairment and disabled people. There is continuing debate on what are the most suitable and non-offensive terms to be used; a debate important because language can inform the way in which we behave and therefore how disabled people are treated (Clark & Marsh, 2002). Disability rights activists in the UK generally prefer the term ‘disabled people’ as it emphasises disablement by society and not the individual (Barnes and Mercer, 2003) as well as holding political power by highlighting the oppression of this group throughout history (Gleeson, 1999; Oliver and Barnes, 1998). On the other hand, international guidelines ascribe to the humanist view and claim that the term ‘disabled person’ places the disability before the person and therefore reinforces negative stereotypes (UN, 2007). The alternative term ‘persons with disabilities’ (PWD) is thus offered and also used as the official term in English documentation in Thailand, presumably in compliance with the international standard set by the United Nations.

However, in this debate both the international guidelines and the majority Anglo-European and American led disability rights movement take little note of the cultural interpretation of disability throughout the rest of the world and the way in which disabled people refer to themselves or are referred to in their own languages and societies. This is an important element to take into account when studying disability in another cultural setting in order to avoid Western assumptions being made in a non-Western context.

It can be argued that whilst there are efforts in Thailand to moderate the language used to refer to impairments, generally this is inconsistent and differs from when Thai language is used and English language is used, in both an official context and an unofficial one. An example of this in Thailand is the Department of Empowerment of Persons with Disabilities (DEP) – the government department that handles disability-related matters in Thailand. Although when using English language Thailand follows the international standard - PWD, the term that is most commonly used in Thai, both in official and unofficial contexts is the term *khon phi-gaan*, literally meaning *person disabled*. *Khon phi-gaan* or sometimes an alternative *phuu phi-gaan* of similar translation is generally used by disability rights groups, government and NGOs. This would suggest that the term is the most widely accepted and official term, by both disabled and non-disabled people. However, it does not

necessarily mean that the word is neutral. The word *phi-gaan* itself has negative connotations due to the idea that a disabled body is incomplete and therefore limited in capacity and function (Naemiratch and Manderson, 2009). The negative connotations surrounding disability itself will be discussed later in this chapter.

In Thai language, as other languages, there are derogatory terms for people with various types of disabilities, which are starting to be challenged by the disability rights movement in the country. For example, the term *ban-yaa aawn*, or *feeble intelligence*, akin to *retard* in English, was used as a label for people with learning disabilities but is also used as an insult. There has been a recent drive to change the terms used by Thai people to more neutral and specific ones, for example, *khon pii-gaan tang gaan riian ruu*, meaning literally *person disabled by way of learning* or, rather *person with a learning disability*. Whether these terms have been negotiated in consultation with disabled people themselves or decided by policy-makers is unclear.

However, there are still official disabled people's organisations (DPOs) in Thailand that continue to use English terms that have long been discontinued on account of being derogatory. The National Association for the Physically Handicapped of Thailand (APHT), for example, despite being an official government DPO and run by disabled people, has chosen to retain the controversial term 'handicapped'. Clark and Marsh (2002) argue that the use of the term 'handicapped' is rejected by disabled people on account of it being derogatory. However there are several DPOs, including self-help organisations of PWD (SHOPs – see Kwok et al. 2002) and NGOs, which retain use of the term in an official context, both in English-speaking countries and non-English speaking countries. It could be assumed that for Thailand and perhaps other non-English speaking countries the English terms are either inaccessible to non-English speakers or do not hold the same connotations for second-language speakers and so have remained in use through lack of knowledge of the derogatory connotations or views of these disability rights groups.

In conclusion, for the purposes of this research the term *disabled person* will be used by the author and also for when the Thai equivalent, *khon pii-garn* has been translated into English. However, where the term *person/people with disabilities* has been used in English during data collection the acronym PWD will be used to denote this. Other translations from Thai will attempt to convey the most appropriate equivalent in English – for example when the speaker uses the Thai term *dtaa baawt* the equivalent in English – *blind* will be used, whereas if the Thai *phi-gaan thaang*

gaan-hen is used, the English *visually impaired* will be substituted to give the reader the closest approximation to the register used by the speaker or organisation.

1.3. Thailand, disability and human rights

Thailand is situated in Southeast Asia with a population of 68.86 million (World Bank, 2017). Since 2011 Thailand has been classified as an upper middle-income country that has seen considerable economic and social development particularly over the last 40 years. However the country still sees a high level of inequality when compared to its East Asian neighbours (World Bank, 2017a), which are implicated in a range of social issues, often exacerbated by poor public services. The research will focus on one public service in particular: public transport, and the implications for the experiences of disabled people, who, as in many societies, often do not receive equal rights and access to these services.

Human rights

Thai understandings of disability rights ultimately depend on Thai understandings of human rights, and so an examination of this is offered before looking at disability rights. According to Selby (2012) Thai interpretations of human rights are located within the social contexts of every day life, interactions within the patronage system, saving face, and respect for another's status. In other words, understandings of human rights are located within the context of the Thai social hierarchy, an outline of which is provided in the next section. This represents the strand of the human rights debate known as particularism, which to some extent takes a cultural relativist stance in the argument that human rights depend on the social, developmental and political situation within a country.

On the other hand, universalism, reflected in the promulgation of international human rights treaties such as the 1948 Universal Declaration of Human Rights, states that human rights are multinational and cannot be dependent upon situational factors within countries. Earth (2005) notes that the Western idea of human rights came about as a counter-ideology to global capitalism and liberalist philosophy imposed by Western world powers, in order to protect people vulnerable against the negative effects of globalisation. Although Earth is referring mainly to women in her argument, this echoes the theory of Beck (1997) and Gleeson (2001) outlined in the

next chapter, whereby the backlash to industrial modernity has resulted in the civil rights movement (including the human rights, women's and disability rights movements), necessary to counteract the exclusion of certain groups from the production economy.

Interestingly, a strand of particularism has come about specifically for Asia. The 'Asian values debate' is often quoted as a source of contention for scholars of Asian studies and politicians alike, as it has been used to justify non-compliance to international human rights laws and deflect international pressure to adhere to those rights. According to Bruun and Jacobsen (2000), the 'Asian values' argument consists of arguments around Asian human rights being different to Western on account of being based on: collective society rather than individualistic society; automatic adherence by way of discipline; and country development coming above individuals. Perlin, however, questions the existence of 'Asian values' and points out the issue of the very debate itself in applying stereotypes and assuming a rigid and conforming set of cultural beliefs and values (2012). Whilst cultural consideration is important in understanding the interpretation of universalist agreements such as the CRPD, we must equally be careful to avoid stereotyping.

Thailand, however, has not been one of the countries to overtly use the Asian Values argument to justify its non-compliance; perhaps because, as Selby points out, since the 2010s it has started to institutionalise human rights through the process of navigating definitions to decide how they will be interpreted to work within the existing configurations of Thai society (2012). Therefore, it might be assumed that human rights in the Thai context may take a more nationalistic approach rather than being identified with the larger 'Asian values' debate. Thailand has conformed to universalist human rights ideology in theory, through the formation of the Thai National Human Rights Commission (NHRC) by the 1997 Constitution. Whilst the universalism is based on Western, Christian ideas, a Thai interpretation of human rights is likely to be heavily influenced by the Thai Buddhist worldview, thus potentially creating conflict. McCargo points out that Thai Buddhism has to some extent been hijacked by the state, and essentially Universalist teachings are being promulgated under a particularist worldview that puts Thailand at the centre. This results in preservation of the established order (2004), which will be expanded upon in the section *A Social and Cosmic Hierarchy* later on this chapter.

So if Universalist ideology is at odds with the Thai Buddhist and societal particularist worldview, the current processes of interpretation of human rights are perhaps subject to alternative interpretation within the Thai context. This would require greater study as a subject in its own right, but for the purposes of this study indicates that an alternative interpretation of disability rights might be present in the realities of Thai society, one that is not necessarily reflective of the universalist laws and policies of the state. It is this that will be explored in the following sections.

Disability

In Thailand, there are 1,523,009 disabled people, making up 2.3% of the entire population, a number that is expected to rise to 2,196,482 people by 2020 (OTP, 2015, p.1). State welfare is provided to people registered as disabled; the disability welfare allowance is 800 Thai baht per month (\$1 = 34 Baht) and people registered as disabled are also entitled to free healthcare and education. However, numbers of registered disabled people are unlikely to represent the true number due to lack of education about the benefits of registering and stigma about disability, especially in rural areas. Similar to many parts of the world, a large proportion of disabled people in Thailand are either unable to or have difficulty meeting their livelihood needs, 20% and 39% respectively (UNESCAP, 2012, p.4). This is due to a multitude of socio-economic and cultural factors that will be outlined in the next section.

On paper, Thailand appears to be implementing the CRPD: equal rights of disabled people that have been outlined in a range of rights-based policies in education, social welfare and employment show that there is a certain level of understanding of the importance of disability rights at the macro level. Thailand's legal framework in line with the CRPD has been commended as being hugely advantageous for the protection of disabled people's rights (Srisuppaphon et al., 2017). When the Empowerment of Persons with Disabilities Act 2007 replaced the Rehabilitation of Disabled Persons Act 1991, it was commended as indicating a move away from the medical and charity models of disability and towards a social model, on which the new Act was based (Cheausuwantavee and Cheausuwantavee, 2012).

However, a closer look at the definitions of disability within the Acts shows that whilst there has been elaboration on the definition of disability between 1991 and 2007 the latest definition still retains a medical model viewpoint of disability:

The Rehabilitation of Disabled Persons Act 1991 (p.1)

“Disabled Person” means a person with physical, intellectual or psychological abnormality or impairment as categorized and prescribed in the Ministerial Regulations.

Empowerment of Persons with Disabilities Act 2007 (p.1-2)

“Disabled Person” means a person who has limitations to perform their daily activities or to fully participate in society due to visual, hearing, mobility, communication, mental, emotional, behavioural, intellectual, learning and/or other impairments, resulting in different types of barriers, and have a special need for some type of assistance in order to perform their daily activities and fully participate in society like a normal person.

The updated definition, whilst broadened in defining types of disability, still does not acknowledge the role of society in the creation of disability. Limitations are due to impairments, disabled people are not ‘normal’ and require ‘special assistance’. In short, the definition retains a medical model focus.

Furthermore, the rights of disabled people’s access to public environments and services, and the rights to receive welfare and assistance from the state party that was included in the 1997, 2007 and 2011 Constitutions of Thailand have been removed from the new, succinct, draft Constitution of 2016 (Srisuppaphon et al., 2017). In fact, disability rights activists protested about an earlier draft that did not mention disabled people at all, amid concerns that it would be highly damaging to already weak implementation of disability laws (Krairiksh, 2016). This is fundamental because if the government’s definition of disability does not reflect the social model, and disabled people’s rights have effectively been ‘revoked’ under the constitution, it indicates that there are still barriers to the acceptance of this view of disability at the macro level, which may lead to issues effectively implementing social model policy.

In support of this, the literature illustrates that exclusion can be seen throughout all aspects of life of disabled people in modern day Thailand. The country’s unemployment rate for disabled people is reported at 74.3% by the NSO, 2012, p.9) in comparison to less than 1% of the entire population (NSO, 2014, p.2). What is more, the reality may be even more disadvantageous for disabled people because those who are employed are more likely to be in lower level positions and lower paid work (UN, 2015). The Thai government has, however, made efforts to rectify this situation through the ministerial regulation of 2011, which states that employers must hire one disabled person for every one hundred employees or else pay into the Fund for Empowerment of PWD.

However, there is debate around how successful the strategy has been. In a review of the employment scheme it is criticised by Bualar (2010) for favouring businesses over disabled people by not punishing businesses that neither employ any disabled people nor pay the employment levy. Although in a later study Bualar explains that despite willingness of employers to hire disabled people limitations in the built environment, lack of research on part of the government into skills required by employers and training offered to disabled people, and overprotection by families, have been key issues in the lack of success of the project (2015). The research and employment statistics highlight that there is a complexity of issues affecting the ability of disabled people to enter employment under the new ministerial regulations.

Evidence from international studies shows that disabled people's employment is strongly linked to mobility. A study in New Jersey, for example, found that the majority of respondents saw public transport as important for their job search with many also reporting having had to leave jobs or turn down job offers because of difficulties with transport (Lubin and Deka, 2012). This is crucial because, as Jolly et al. (2006) revealed in their study of public transport in Great Britain, almost half of disabled people rely on public transport as a means of travel due to restricted access to a car and not wanting to rely on others, as well as being half as likely as a non-disabled person to have a driving license. Although it is difficult to draw a direct comparison, issues of mobility of some disabled people in Thai society are linked to issues with access to education, employment and politics, which can lead to a circle of either full or partial exclusion, from both society and contribution to the economy.

According to Bualar, the disparity between the unemployment rate for non-disabled and disabled people is linked to the exclusion of disabled children from mainstream education, fuelled by issues with transportation.

The freedom of choice in mainstream school participation is curtailed because commuting from home to school is their major challenge. Their family members therefore prefer to send them to special needs boarding schools. In doing so, students with disabilities will have fewer opportunities to reap social benefits through heterogeneity in non-disabled schools (2016, p.159-160).

Despite inclusive educational practice being implemented in 2008, statistics show that 22% of the registered disabled population has had no education and another 58% have received lower than primary level education (NSO, 2012, p.7). In comparison to 93% of the overall population completing primary school education (World Bank, 2017, online) this illustrates that access to education for disabled people is comparatively low. Additionally, research by Cheausuwantavee and

Cheausuwantavee (2012) indicates that there has been no further educational provision for students with disabilities despite changes to the law. According to Anderson (1998) education became more important in Thailand, and university education much more prevalent, from the 1960s onwards as a means to elevate one's social status. Inaccessibility to education thus prevents disabled people from elevating their social status because they lack the skills needed to enter into the workplace. As can be seen from fig.1 this is considered a contributing factor to increased poverty incidence.

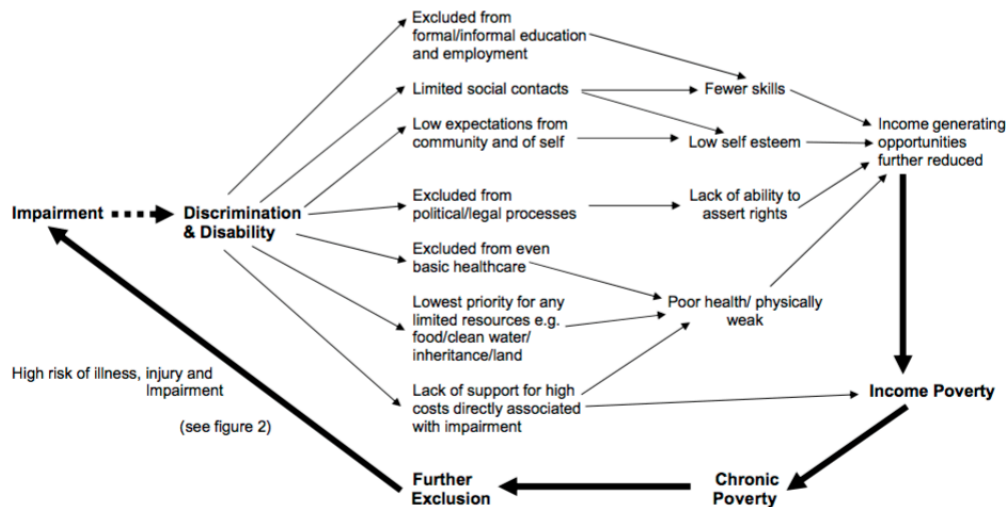


Fig.1 Poverty/disability cycle – Yeo and Moore, 2003

Due to ineffective law enforcement, negative attitudes and charity-model thinking by the public and service providers, and lack of coordination between stakeholders issues with access for disabled people is still seen extensively within education (Cheausuwantavee and Cheausuwantavee, 2012; Vorapanya, 2008; Bualar, 2016), employment (Bualar, 2008; Bualar, 2015), participation in society and politics (DTN, 2016), and food security (access to food) (Bualar, 2016). All of these areas are linked to mobility and form part of a circle of exclusion, further fuelled by a lack of involvement of disabled people in policy-making and a persistence of medical model way of thinking in the Thai government, which views disabled people as dependent (Bualar, 2010; DTN, 2016).

Additionally, the civil society report to the UN highlighted a range of other violations of the CRPD in Thailand including forced sterilization and substitute decision-making (UN OHCHR, 2016). That is not to say that there is no understanding of disability from a social-model perspective, but there are certainly

barriers to its acceptance, which impact upon the success of disability equality laws and regulations and hence the ability of disabled people to elevate their social standing. This research will focus on the success of accessibility equality laws in the context of public transport, including an examination of the socio-cultural ideas that affect the underlying construction of disability in Thai thinking.

1.4. Societal structure and the Thai belief System

The following section will aim to examine the Thai social structure and belief system and how they interact with the conceptualisation of disability within Thai society. The aim is not to represent the experiences of all disabled people in Thailand or Bangkok, as these will differ greatly depending upon the individual circumstances of each person. Nor is it to generalise to all of Thai society and therefore it must be acknowledged here that Thailand is not a homogenous country, despite often being portrayed as such for the purposes of Thai identity and nation building (Cohen, 1991). Thailand is a diverse country with many ethno-cultural groups, languages and religions, although the official religion is Buddhism.

Of Thailand's population more than 93% identify as Buddhist (Pew Research Centre, 2010), and are generally regarded as belonging to the Theravada school. Indeed, Buddhism is one of the three 'pillars' of the country, alongside monarchy and nation, and has had a considerable influence on the worldview of Thai people. The Thai belief system is rather complex, however, and encompasses the teachings of Theravada Buddhism alongside astrology, cultural traditions and superstitions, indigenous and non-indigenous elements and animism (Kirsch, 1977; Tambiah, 1976; Komin, 1998).

It is important to note the prevalence of animistic beliefs in Thai Buddhism; magic, ghosts and spirits being some of the most obvious. This is a debate in Thai studies circles since, as Borchert (2014) points out, the importance of animism and associated practices is often ignored by scholars who attempt to isolate 'true' Buddhism from its cultural context, with which it is very much entwined. Similarly, McDaniel (2011) notes that many scholars discard animistic beliefs and rituals still present in modern Thai society as 'left over' from the past, rather than an integral part of Thai Buddhism of which much can be learnt. Animism is important in this study as a concept that is likely to influence Thai ideas about the imperfect body, for example, illness conceptualised in folklore as evil spirits entering the body (Bamber,

1987). Whilst it might be argued that modern and Western-influenced understandings of illness and disability have replaced other understandings, there is evidence that belief in spirits, ghosts and internal forces remains alongside scientific explanations (see later section on *raang gai*/the body), much in the same way that magic and animism cannot be separated from the study of Thai Buddhism.

It is acknowledged by Thai Studies scholars, both Thai and non-Thai, that there are common characteristics owing to various socio-economical and cultural factors that have evidently shaped the processes, structures and interactions within Thai society and resulted in some sort of imagined collective identity (Sivaraksa, 2002; Cohen, 1991; Mulder, 2000). It should be noted that there is contestation within the field as to what extent 'traditional' societal structures have been retained during the process of modernisation. It is this that will be examined, in order to provide a theoretical grounding that complements the disability theories outlined at the beginning of the chapter and from which an analysis of the situation surrounding public transport and disabled people in Bangkok can be made in chapter two.

A Social and Cosmic Hierarchy

Since formal sociology and social anthropology studies started in Thailand, mainly in post World War II era, the concept of a hierarchical social class structure has been widely acknowledged by scholars in the field of Thai Studies (Evers, 1966; Hanks, 1962, 1975; Brummelhuis, 1984; Cohen, 1991; Pongsapich, 1998; Mulder, 2000). This hierarchy, though nowadays no longer official, can be seen as a residual hierarchy left over from an official hierarchy system evident in the 17th Century and later, which has evolved and eventually found alternative expression in modern-day Thailand (Terwiel, 1984). Nowadays, the most obvious manifestation of the hierarchy system can be seen through personal pronouns in the Thai language, which must change depending upon the age, gender and position of the speaker and the person being addressed. Whilst the dropping of certain pronouns may signify the effects of modernisation the system is largely still present (Bandhmedha, 1998), thus helping to reinforce the social hierarchy in present day Thailand.

It is evident from the country's economic growth and development that Thailand has not been sheltered from external influences altogether. According to Eisenstadt (1973), neotraditionalistic and semipatrimonial systems have survived despite this due to Thailand's relatively unimportant role in the international stage and an avoidance of international pressure. This would suggest that Thailand has remained

somewhat unmoved by the influences of the outside world, despite exposure to them. However, Cohen suggests that the modern Thai hierarchy is not just a watered-down version of a previous system but has systematically loosened to allow adaptation to external factors whilst also containing a Thai individualism in a dualism of culture. Therefore, 'fundamental change, in the sense of complete abandonment of the traditional set of cultural codes, and acceptance of modern, Western codes, is still rare' (1991, p.45).

Hanks (1975) states that the hierarchical society model is a reflection of the cosmic hierarchy of Theravada Buddhism. Indeed, the social and political organisation of the earlier Thai Kingdoms of Sukothai, Ayutthaya, Thonburi and the early Bangkok period were thought to be based on this model (Jackson, 2002), whereby Buddha sits at the top, with humans, in varying positions on the path to enlightenment, below. Unlike the Hindu cosmic hierarchy, however, people are not fixed and are capable of moving up and down the hierarchy into different positions according to their deeds. There are varying arguments as to how this presents in modern-day Thai society. According to Cohen (1991) the hierarchical system leads to two outcomes: firstly, it encourages individual mobility, or what has been termed 'Thai individualism', characterised by individual pursuit of self-advancement; secondly, it supports cultural conditioning towards political powerlessness and passivity. This theory is exemplified by empirical research, which revealed that in values rated by the overall population 'standing up for one's ideas' was valued low, but independence was valued high (Komin, 1998). The indication is that these two outcomes are supportive of the hierarchy and would discourage social mobility.

Explanations by other Thai Studies scholars, however, suggest this view is too reductionist and creates a contradiction. Further explanation is offered by contrasting interpretations of Buddhism and particularly the *traiphum*, the cosmic hierarchy that is made up of three worlds of existence consisting of 31 realms, from which liberation can only be achieved through attainment of nirvana. Jackson (2002) argues that traditionalist interpretations of the *traiphum* emphasised the role of karma in one's position and have been used politically to legitimise the ruling elite and absolute monarchy. The political powerlessness and passivity described by Cohen is perhaps a condition necessary for rule based on hierarchical structure and would also explain the importance of national identity building and the control of 'official' Thai

culture by various government bodies¹. On the other hand, reformist interpretations of Buddhism emphasise individual liberty and autonomy within the cosmic hierarchy, and therefore legitimise democracy as the ‘true’ Thai identity (Jackson, 2002).

Unlike scholars who argue that Thai individualism encourages political passivity (Cohen, 1991) and result in weakness of Thai groupings, be it social or political (Pongsapich, 1998), this interpretation would suggest the opposite. There are many examples of political activism, public demonstrations and conflict in recent Thai history that indicates the presence of a reformist interpretation of the hierarchy and political awareness, which will be further examined in chapter two. Komin (1998) argues that the Thai social system is not loosely structured and unorganised but depends on a matrix of rules denoting social interactions that are context dependent. Brummelhuis (1982) on the other hand suggests that a ‘loose structure’ further down the hierarchy allows for a tighter structure of organisation overall with elites in control both socially and politically at the top. The evidence from events in modern Thai society, including the development of the disability rights movement, shows that there is political awareness, which has translated to an ability to politically organise and challenge the elite. This indicates that both interpretations of the cosmic hierarchy are present and to some extent in conflict.

Interaction within the hierarchy

Considering the traditionalist interpretation of the cosmic hierarchy, there are resulting implications for the rules of conflict interaction in Thai society because social interactions within the hierarchy system also denote socially acceptable means of expression and conflict management. Brummelhuis (1984, p.50) elaborates:

Within the hierarchical pattern of relations a direct advancement of one's interests 'does not pay' and indirect manipulative strategies bear better results. Similarly, when confronted with conflicting interests or when under pressure a reaction of withdrawal or avoidance is more appropriate. Thus, self-interest is almost prevented from being publicly expressed, and conflicting interests are hardly ever allowed to be openly negotiated.

¹ The example given by Jackson (2002) is the Thai National Identity board, started in the 1980s with the main function of popularizing elite culture in order to sustain and control respect of the hierarchy. The board no longer exists but cultural protection is now looked after by the Office of the National Culture Commission under the Ministry of Culture, which was formed in 2002.

This characterisation of ‘correct’ Thai interactions, whereby indirect conflict resolution is preferable to direct confrontation, is likely to have considerable influence upon the way in which some Thai groups are expected to assert their civil rights, as well as express own self-interest. This can be seen from the interviews with both the service providers and disabled rights activists in the study, whereby interactions involving asserting rights were described as aggressive (see chapter 5).

The hierarchical system is an element of most Thai interactions and relationships, of which superiority and inferiority dependent upon rank, and role fulfilling according to this rank, are central to an orderly society (Mulder, 2000). Thus, each person in Thai society knows and respects their rank and role and acts accordingly. Additionally, Selby (2012) points out that interactions of social actors are characterised by the concept of saving face², which, whilst a normal and usually harmless phenomenon, can be such a strongly felt concept that it can have potentially devastating consequences under particular circumstances. Another manifestation is the patron-client relationship, part of the hierarchical model, whereby clients of lower status serve a patron of higher rank and position. Clients serve the patron in an interdependent kin-like relationship, whereby favours are exchanged, sometimes ‘at the price of ignoring accepted principles of general justice or common propriety’ (Terwiel, 1984, p.19).

This implies that the residual hierarchy system influences the way that the public services are administered. Cohen (1991) suggests that the official hierarchy system was ‘modified’ to become the governmental bureaucracy, whereby members ‘are generally power rather than service-orientated and see themselves as deriving authority...from the enduring Thai state and therefore, ultimately, from the King’ (p.27). Government relationships also strictly fit within the hierarchy model with authority always coming from the top, and the ability of challenge by members further down impeded by social conditioning to support the system.

Support comes from Komin’s (1998) study, which found that government employees valued maintenance of good relations as second highest of twenty values, whereas work was valued the least, indicating preservation of the hierarchical order was

² The Thai concept of saving face can be further linked to feelings of *graehng jai*, which will be defined later on in this chapter.

priority. There could therefore be implications for the way in which government services interact with the public, civil society (e.g. disability rights activists), and the private sector, as the system denotes the duty of the bureaucracy as one serving the state and system over the people. If ideas further down conflict with the ideas further up the hierarchy, then challenging this is difficult due to social pressure to maintain relationships with people above, especially those in a client-patron relationship.

In one interpretation, the modern-day Thai hierarchy system supports the repression, or in some cases even exclusion, of groups further down the hierarchy. This is not to say that exclusion or repression is the direct aim of those in power, but rather a by-product of the conflict between social conditioning necessary to preserve the status quo of the controlling elite and the struggle for individual advancement.

Membership of society is therefore necessarily unequal, with a hierarchy of inclusions and exclusions...the rules determining access to the more privileged group also determine vulnerability, and so decide who is excluded. Exclusion is a central aspect of this model, a mechanism which underpins the existing structure of society...the fight against exclusion...under the monopoly model is to change [the existing order].' (Phongpaichit, 1996, p.6).

In a system where overt public expression might be counterproductive for fear of loss of face and upsetting the hierarchy, it begs the question of how the disability rights movement functions within this setting. The basis for the main concepts discussed further on in this section are as follows: the combination of the hierarchical social structure and the Thai belief system; the resulting implications for the conceptualisation of disability as linked to the body; and the experiences of and interactions with disabled people in Thailand.

The body // raang gaai

It is essential to study Thai views of the body, *raang gaai*, in order to begin understanding how Thai ideas of disability are conceptualised as linked to the body. Ayurvedic humoral theory influences indigenous Thai ideas that the body is made up of four elements – earth, water, fire and wind, which metaphorically represent qualities of the body and can be used to classify illness types (Bamber, 1987). Each of these elements consists of smaller components or organs that add up to 32, a concept which Thais use to define the ‘complete’ or ‘normal’ body or the ‘incomplete’ or disabled body (Naemiratch and Manderson, 2009). This concept is

demonstrated as a commonly used term: *raang gaai mai khroh p saam sip soong*, literally meaning ‘body incomplete thirty two’, which is still used as an unofficial term to refer to disability. This phrase reflects the idea that a disabled body is incomplete and limited in capacity, thus implying disability stems from the body. The concept of disability stemming from the body offers support for the medical model of disability, as explained at the beginning of the chapter.

According to Van Esterik (2000, p.206) Thais are much more bodily aware than Westerners and are often judged by their appearance, particularly women, because ‘beauty can override family connections, money or class’. This implies that physical appearance can increase one’s standing in the social hierarchy, which also by deduction means that the opposite is also true. Disability, in its informal definition as ‘incompleteness’, potentially puts the physically disabled person in a lower position than they may have been if non-disabled. A study in the Northeast of Thailand further outlined difficulties of disabled women fulfilling gender roles (Rukwong, 2008), which is likely to be a factor resulting from judgments on the female body and play a significant role in the experiences of disabled Northeastern Thai women. Similarly, Bualar and Ahmed (2009) found that socially defined ideas of ‘the body’ were shown to contribute to the low self-esteem and resulting self-alienation of disabled women in Northeast Thailand. Whilst it is important to note that this is not automatically applicable to other parts of the country, it can also be argued that this is the case in many cultures and societies, and is not a trait that is unique to Northeastern Thailand or even Thailand. Ahmad’s (2015) study in Pakistan similarly found that distortions of the idea of a women’s disabled body as incomplete interfered with gender roles. It may be that deeply ingrained ideas of the ‘complete’ body as linked to beauty, on top of other traditional beliefs discussed here, combine to create a cultural picture of disability that promotes pity from others and feelings of hopelessness of the disabled person, as indicated by the experiences of participants of the Northeastern studies.

As noted earlier, animistic concepts have influenced the conceptualisation of disability in the Thai belief system. *Khwan*, which can be translated as ‘life essence’ is based on animistic, indigenous and brahmin ideas of there being a spirit force inside each person, that could perhaps be likened to Western concepts of a person’s soul. However, the concept of *khwan* and its strengthening also ‘touches the individual-psychological, the social, and the cultural-religious spheres. All of these spheres are intimately connected’ (Heinze, 1982, p.98), and therefore links the

concept of *khwan* to mental wellbeing. *Khwan*, although considered an indigenous concept, is still regularly used in modern-day speech to refer to someone who is in shock, scared, acting out of character or who has mental health issues. A study of mental health nurses revealed that loss of *khwan* was identified to be a prominent belief in Thai society for the explanation of mental health issues. Although these beliefs were thought to be less prominent in urban than rural areas, modern mental health services in Bangkok were still supplemented with traditional treatments, such as making merit or visiting the temple (Burnard et al., 2006). This was also true of the Northeastern study, where disabled women participated in spirit-appeasing rituals alongside modern treatment (Rukwong, 2008). Whilst there are significant differences in culture and beliefs in different parts of the country and especially between rural and urban areas, these studies show that animistic beliefs are still prevalent in urban areas and therefore might be applicable, at least to an extent, to Bangkok and the greater Bangkok area.

This suggests that although modern understandings and treatment are accepted, physical, non-physical impairment and illness are also conceptualised according to indigenous beliefs. This ultimately affects how the person is viewed and the type of treatment given. Even more interestingly, some of the health-care workers admitted that they still held some beliefs of loss of *khwan* and evil spirits being the cause of mental health issues (Burnard et al., 2006), which signals that urban location, education and knowledge of disability and mental health do not necessarily eliminate the presence of indigenous beliefs informing the conceptualisation of impairment and disability.

These studies offer support for the argument by Cohen (1991) that the traditional coexists alongside the modern in a dualism of culture. Therefore, it is necessary to take into account both modern and indigenous conceptualisations of disability in the analysis of disability within the urban Thai context.

Karma // gam

Karma, in Thai: *gam*, is sometimes translated as ‘action’ from Sanskrit, and retributive karma refers to the principle of moral justice: the belief that future outcomes are the result of past actions. Karma is a teaching of both Buddhism and Hinduism and is an idea that permeates Thai culture, exhibited both through special cultural events and in everyday life. It rests on the idea that good merit can be collected by good actions (making merit or *tham boon*) and bad merit, (sin or *baap*) is accumulated via bad actions, and will denote one’s position in the cosmic

hierarchy. According to Mulder (2000, p. 84), the idea that ‘each individual’s fate is the outcome of what he has done during the course of innumerable lifespans’ is one of the most influential and prevalent ideas on Thai understanding of humanity.

Evidence of a person’s karma is seen through personal circumstance, wealth, status, and health, and therefore disability is conceptualised negatively, with disabled people assuming lower roles in Thai society (Naemiratch and Manderson, 2009; Vorapanya, 2008). Karma may therefore be one of the prevalent ideologies shaping the conceptualisation of disability in the minds of Thai people, which can result in an array of different reactions from others, including compassion, pity, indifference, and charity. For disabled people themselves it can also shape experiences of their own disability, like the disabled Thai women study where participants blamed their disabilities on their own bad karma and experienced feelings of hopelessness and having to accept their situation (Rukwong, 2008).

The prevalence of karmic conceptualisations of disability was therefore investigated in the research. Karma appeared as a minor theme in the findings, used to explain inaccessible environments by two participants (see chapter four). This might be explained by the negative interpretation of karma and disability, which implies that the disability is the result of bad karma, resulting from bad actions or *baap* of the disabled person or a family member in the current or a previous life. The view of the role of the disabled person’s karma in their disability is reminiscent of the medical model way-of-thinking and would help to explain why there has been slow progress in achieving equality for disabled people, despite disability policy changes attempting to take a more social model approach.

Donate, make merit // hai thaan, tham boon

As noted earlier, in order to possess positive karma, it is essential to collect merit, or *tham boon*, by doing good deeds. In Thai culture this is often interpreted as giving and is more often than not connecting with the temple - giving alms to the monks and donating money to the temple for example. This is because, according to Ishii (1986) giving to the Sangha (the Order of Buddhist monks) is the ultimate way of advancing one’s cosmic position and is the most highly ranked form of making merit other than becoming a monk yourself. Therefore, Buddhism has a significant influence on this type of giving in Thailand, and people who attend religious ceremonies more regularly are more likely to give more; both money and time spent volunteering (Apinunmahakul, 2014).

Alternatively, giving to entities other than the Sangha can also be conceptualised as *tham boon* but is usually used when talking about donating money, items and food to those less fortunate. More commonly voiced when talking about this type of charitable giving is *hai thaan*, which literally means to give to charity, although the word *thaan* itself is more akin to the English word *alms* and rooted in Buddhism. According to Ishii's table of ranking of merit-making acts, charitable acts of *hai thaan* are not counted (1986, see p.17), although Thais will often refer to charitable acts of *hai thaan* as *tham boon*. It is unclear if this is a modern interpretation, and it is not within the scope of this paper to discover as such, but it is possible that it was influenced by the rise of NGOs in the 1960s, a brief history of which is explored in the next chapter.

According to the hierarchical system and negative conceptualisation of disability 'those less fortunate' in Thai society also includes disabled people, which make them often an object of *hai thaan* for the purposes of making merit or *tham boon*, and so places disabled people alongside the poor, the sick, orphans and other disadvantaged groups deemed to also have negative karma. This is a theme that has come about in the research, whereby disabled interviewees and focus group participants revealed stories of having been the object of acts of charity from strangers, even when it was not asked for, and, to them, unnecessary. Similarly, the use of the concept of *tham boon* and *hai thaan* by the national disability associations in fundraising activities through the temple was noted (see chapter five).

Research into understandings of disability in Northeast Thailand found that disabled people who were the objects of merit-making felt that 'for them, projections of sympathy were not examples of unconditional giving, but rather strategies of karmic advantage by those expressing pity' (Naemiratch and Manderson, 2009, p.486). This highlights that this type of merit-making is reminiscent of the charity model of disability, whereby charity is given due to feelings of pity towards the disabled person and a desire to fulfill one's religious duty. When pity, or *songsarn* is involved or tactical giving to gain karmic advantage the act of *hai thaan* can seem to be less about empowering disabled people and more about elevating the position of the giver via *tham boon*, clearly indicated by the perceptions of the disabled people in the Northeastern Thailand study. In fact, it could be damaging to the social standing of the disabled person who is the object of unwanted *hai thaan* by enforcing dependency and activating feelings of shame. Again, it is beyond the scope of this study to look specifically at merit-making and disability in Thailand, although it did appear as a theme in interviews during the research, and as such is worth noting here.

Pity, compassion and generosity // Songsarn, metta, and nam jai

Feelings of pity and compassion have found to be influential in Thai attitudes towards disability (Drury, 2011; Naemiratch and Manderson, 2009) although there are differences between Thai concepts of pity *songsarn* and compassion *metta*. Whilst both words can mean compassion, *metta* is more akin to kindness and has neutral or positive connotations. On the other hand, *songsarn* is used when the object of the feeling is a victim of misfortune or tragedy, and therefore has negative connotations (Naemiratch and Manderson, 2009). Similar to the meaning of *metta*, *nam jai* translates roughly as generosity, although a better translation might be kind-spirited as *jai* means heart or spirit. Interviewees used the word *nam jai* and *euua feua phuua phaae* [compassionate and considerate] to describe people who made their journeys easier through acts of kindness (see chapter four).

These concepts are important because *songsarn* not only influences Thai conceptualisation of disability but also how disabled people see themselves and thus how empowered they are likely to be. Naemiratch and Manderson (2009) identified three groups when interviewing disabled participants in the Northeast of Thailand: one group that rejected the label of disability and *songsarn* towards them; another that accepted both and used them to their advantage; and another that struggled to accept their disability and strongly rejected *songsarn* from others as it made them feel objectified and worthless. Whilst categorising people can be limiting the results also reveal that it is likely that some disabled people are unwilling or reluctant to demand equal rights due to general attitudes towards disability and how these shape their own feelings about their disability.

On the other hand, it is important to note that there is often presence of genuine feelings of *metta*, awareness, understanding and concern for the social issues facing disabled people. Drury (2011) notes that socio-cultural factors, such as feelings of *metta*, can also act as enablers to the application of social-model practices like inclusive education. Empathy, rather than sympathy or pity, can be argued to be a necessary component to achieving full integration and equal rights in society for disabled people as it brings about true understanding of the issues and need for change, which can work towards enabling the change. On the other hand, feelings of *metta*, even if stemming from genuine concern can also act as barriers for disabled people to participate in mainstream society. Bualar (2015) and Bualar and Ahmad (2009) observe that disabled people in Thailand are subject to overprotection by their families, which acts as a barrier to employment and social participation. Whilst such

overprotection is likely to stem from feelings of *metta* and a natural urge to protect a loved family member from an unaccepting society, the reality is that overprotection contributes to the exclusion of disabled people from the workforce, despite there being laws to encourage this.

Consideration, Losing Face and Duty // Graehng jai, Sii Naa, Naa thee

Thais are taught from being children to be mindful of their place in the social hierarchy which develops into the attitude of *graehng jai*, being considerate, *jai-yen* (cool-heartedness), unwilling to impose on others, kindness and possibly an ‘excess of *krengjai* that seemingly causes extreme reluctance to draw attention to oneself by actions.’ (Mulder, 2000, p.88). *Graehng jai*, whilst difficult to translate directly into English, is characterised by reluctance to impose on another person and is deeply tied to one’s place in the hierarchical system and therefore duty, *naa thee*, and the Thai concept of *rak saa naa* [saving face]. For example, an employee might be unwilling to point out a mistake made by a superior due to worry that they would be stepping out of their social ranking and cause their superior to look incompetent or lose face for their failure to carry out their duty.

Drury (2011) observes that the *graehng jai* phenomenon may affect the willingness of some disabled people to fight for their rights and therefore the effective development of a rights-based approach to disability. In a family setting, disabled people are likely to feel *graehng jai* towards family members on whom they are dependent. This was exemplified in a study on food security whereby disabled members had little say in their food choices because they relied on family members to buy food for them, and were reluctant to impose on them any further by asking them to take them to the market or buy specific foods (Bualar, 2016). The concept of *graehng jai*, therefore, may be a factor affecting the autonomy of disabled people who rely on family members or others for their care and access to resources. Furthermore, feelings of *graehng jai* may help to reinforce the role of disabled people as the object of *tham boon* via *hai thaan*, because it forces them by obligation to accept charity. For example, when help is offered, even if it has not been requested or if it is unnecessary, unhelpful or patronising, feelings of *graehng jai* to accept the offer may present in order to prevent the giver from losing face or for fear of stepping out of the role as the object of *tham boon* and upsetting the social order.

Supporting the ideas of Brummelhuis (1984), it would be counterproductive to challenge the expected interaction between members of unequal social standing and so individuals are confined to appropriate and indirect interactions of negotiation, characterised by a curbing of true and unhindered expression. Passivity can also be reinforced by medically-focused rehabilitation services, as was shown from the study by Bualar and Ahmed (2009) that participants felt that they were passive recipients of community based rehabilitation (CBR) because the government did not take their views into consideration. This does not, however, mean that all disabled Thais are passive, because manipulation and advancement of social position can still be achieved in indirect ways.

It was noted by Selby (2012) that the implicated and subtle threat of *sii naa* [losing face] can be used as a force to achieve one's goals, provided that it is the duty of the person who is being threatened by loss of face. Because fulfillment of duty is seen as central to the societal hierarchy one is highly motivated by risk of public exposure of failure to fulfill one's duties. As can be seen from activities of the disabled rights movement there are disabled Thais who are quite open and direct in their demanding of equal rights. As can be seen from chapter five this can sometimes be interpreted as aggressive or inappropriate by other people, both disabled and non-disabled. However, there is also subtle demanding of rights through unspoken threat of loss of face for service providers who fail to fulfill their duties. How effectively this is used by the disabled rights movement in achieving the acquiescence of the government and private sectors is to be observed.

It is important to note that it can not be assumed that disability and social exclusion always go hand-in hand in Thailand because there are many examples of acceptance of disabled people, *metta* and understanding of the difficult situation some people face as the result of socio-cultural factors. The financial crisis of 1997-1998 and resulting economic crash had a positive impact on Thai society in that it brought understanding surrounding poverty and the situation of disabled people, which helped to rid some superstitions about disability (Kwok et al. 2002). Furthermore, international sporting events such as the Paralympics games have also helped to change the image of disabled people and their capabilities. But it is unclear if this understanding is true acceptance of equal rights and a push for full inclusion of disabled people in wider society or, alternatively, understanding of disability based on feelings of *songsarn* and rooted in the charity and medical models of disability.

This chapter has outlined how impairment and disability are rarely viewed as distinguishable in Thai society. This is supported by medical model-informed views of disability in the law, residual hierarchical structures in Thai society and interacting cultural beliefs influenced by Thai Buddhism, animistic beliefs and indigenous ideas about the body. These ideas will form part of the analytical framework that will be used to examine the data collected in chapter four.

Chapter Two – Transport, Accessibility, Politics and Civil Society

This chapter examines civil society, the disability rights movement and public transport in Thailand and the process by which they interact to influence issues affecting disabled people. Firstly, it will consider theories of accessibility, production and disability, followed by an outline of civil society developments since the end of the absolute monarchy in 1932. This will provide historical context to the examination of the influences on the disability rights movement. Secondly, an overview of public transport planning and accessibility for disabled people in Bangkok will be provided, so that the main stakeholders and issues can be identified.

2.1. Theories of accessibility

Accessibility can be considered in terms of access to the physical environment, for example, of transportation and buildings; or in terms of the non-physical environment – of information, services and social and political outlets. Accessibility is different from access in that it measures the ease in which something is accessed, not merely the access alone but ‘providing flexibility to accommodate each user’s needs and preferences’ (Valdes, 2004, p.n/a). Since accessibility as a human right has begun to be recognised in recent decades the theme has been featured in many international development strategies, both general human rights-related agendas, such as the International Covenant on Civil and Political Rights, and also disability-specific ones, including the CRPD and The World Programme of Action Concerning People with Disabilities (UN, 2013).

Most notably for this study, Gleeson (1999; 2001) links disability to accessibility through Ulrich Beck’s theory of ‘simple’ or ‘industrial’ modernity (1997) whereby institutions, both private and governmental, have ‘created urban institutional forms that privileged certitude over doubt, boundaries over openness and ... normality over difference’ (2001, p.255). This has led to societal spaces and cities being designed for the ‘normal’ and ‘productive’ human being, thus excluding anything that is deemed to be outside the parameters of the defined ‘norm’, including disabled bodies.

In Thailand, for example, the Ministry of Human Development and Social Security found that there was an extreme lack of conveniences for disabled people and the elderly, which were sub-standard or unsafe in 70% of places surveyed (OTP, 2017, website). Imrie defines these inaccessible environments as disablist: ‘actively

discriminating against the physical mobility and access needs of a significant proportion of disabled people' and therefore reinforcing dependency (1996, p.2). However, this definition focuses on physical accessibility and neglects to specify other means of access, such as to information and political and social participation, which impact upon other groups of disabled people and therefore could also be termed as disablist.

Beck's theory also helps to account for changes in the roles of disabled people. As in other industrialised countries, disabled people who, pre-industrialisation, would have been able to contribute to society by flexible working suddenly become excluded because they are unable to conform to the rigid demands of industrialised working conditions (Gleeson, 1999). They were hence excluded from capitalist culture and denied economic autonomy (Hughes, 2001). According to Barnes and Mercer (2003) as the economy of the Western world changed from an agrarian to a capitalist one so did the attitudes towards disabled people, who were excluded because they could not fit into the new system of production. So far-reaching has the production paradigm of the 20th century been that society became designed only within its boundaries and so 'the problem of inaccessibility is embedded within the wider socio-political processes that frame the production of space in Western societies' (Gleeson, 2001, p.252, citing Gleeson, 1999).

Whilst these scholars only apply the theory of disability and simple modernity to Western societies it can be argued that this can and has been reproduced across other industrialised and modernised societies. As discussed in the previous chapter, Thailand, whilst able to retain some neotraditional systems, has not been isolated from the changes of the modern world but has adapted to take on a dualism of 'traditional' and 'modern' as described by Eisenstadt (1973) and Cohen (2001). Thailand became industrialised from the 1960s onwards, through which disabled people, as in Western societies, may have become marginalised as their roles within communities altered, leaving them 'left behind' from the huge economic growth. This accounts for the industrial modernity in accordance with Beck (1997) and as linked to disability by Gleeson (2001). Additionally there exists the 'traditional', characterised by a residue of animistic beliefs, hierarchical-type interactions and charity model conceptualisations of disability. The combination of both has been central to the discrimination against disabled people in the form of exclusion and oppression at almost every level of society.

Such exclusion has not gone unchallenged, however. There has been a backlash to the industrial modernity that can be defined as a “remodernization of modernity” (Beck, 1997, p. 137) or an enlightenment resulting from human capacity and self-awareness (Gleeson, 2001). This has led to several different movements in society, not limited to but including the disability rights movement. Exclusion of disabled people from political spheres has forced a sub-political movement in various forms and on different political levels therefore campaigning is often focused on urban capitals in order to maximize impact and attention (Gleeson, 2011). This can clearly be seen in the case of the Thai disability rights movement and its campaigning efforts that are mainly concentrated in Bangkok, which will be further discussed below.

2.2. Politics and civil society in Thailand

Movement by society is sometimes referred to as civil society or civil society organisation (CSO). Civil society is a difficult concept to define, however, due to the diversity of actors, organisations, agendas, capacities and processes involved. This complexity is demonstrated in the World Bank’s lengthy definition (2013, website),

The term civil society to refer to the wide array of non-governmental and not-for-profit organizations that have a presence in public life, expressing the interests and values of their members or others, based on ethical, cultural, political, scientific, religious or philanthropic considerations. Civil Society Organizations (CSOs) therefore refer to a wide of array of organizations: community groups, non-governmental organizations (NGOs), labor unions, indigenous groups, charitable organizations, faith-based organizations, professional associations, and foundations.

However, the World Bank definition does not extend to individuals, implying that civil society can only exist in collective form. This would not be a comprehensive definition since individuals not only make up organisations but also are autonomous in their actions. Thus the definition offered by Scholte may be more appropriate; ‘civil society exists whenever people mobilise through voluntary associations in initiatives to shape the social order’ (1999, p.7). However, the autonomy of the individual is also downplayed through the link to some sort of organisation in Scholte’s definition, which does not hold when we compare it to examples within the disability rights movement. The example given later in the study by Perlin (2012) in section 2.3 demonstrates that implicated actors are individuals, not groups, who challenge the status quo through civic action. Are they then not classed as part of civil society?

Furthermore, the World Bank definition is focused on non-state organisation. Scholte points out that although civil society is generally considered to be separate from the state there is some ambiguity in organisations that are government funded (1999). This is exemplified in the Thai national disability associations referred to below. It can be concluded that the term ‘civil society’ is somewhat ambiguous, and therefore will be used loosely in this research to refer to action by individuals (individual action) or a collection of individuals (collective action) to shape the social order.

It is certain that developments in Thai politics and civil society have had an influence on the Thai disability rights movement, as a form of civil society. Civil society has historically been complicated by Thailand’s ongoing struggle with democracy and military regimes. A number of scholars link the development of civil society and political activism and change in Thailand to NGOs (Jumbala and Mitprasat, 1997; Kuhonta and Singpeng, 2014; Wasinpiyamongkhon, 2013) although NGO is often used as an umbrella term encompassing but not limited to the following: people’s organisations (POs), non-governmental development organisations (NGDOs), and self-help organisations. In addition to this, the disability rights movement in Thailand incorporates a different set of organisations, both non-governmental and governmental, that will be outlined in the next section.

After the abolishment of the absolute monarchy in 1932 the country saw increased nationalism led by bureaucratic structures and creation of the ‘official’ Thai culture and Thai identity, which aimed to shape the Thai consciousness and prevent society from developing control over the state via civil society movement (Samudavanija, 2002 – see also chapter one and reference to Jackson 2002). This has had a varying degree of visibility over time, but its continued presence for the purposes of state-identity creation and societal control can perhaps account for the persisting neotraditionalism that has contributed to the conceptualization of disability as discussed in the previous chapter.

Industrialisation and an increase in university education from the 1960s led to many NGDOs developing out of a concern about growing inequality by the middle class (Jumbala and Mitprasat, 1997; Missingham, 2003). It is important to note the role of the middle class in civil society development, as this group is acknowledged to be influential in the organisation and direction of civil society. Particularly, as noted by Missingham (2003) and Wasinpiyamongkhon (2013), non-governmental individuals (NGIs), who are typically educated, middle class (although some are working class

who have had access to higher education) provide the contacts, literacy, knowledge and access to resources and funding needed for civil society action.

Following the rise of an educated middle class, a questioning of traditionalism occurred, in what Anderson (1998) terms an ‘intellectual revolution’, that peaked after the October student uprising of 1973 ended the military regime and gave way to a three-year democracy. Democracy came to an end on October 6th 1976 during a violent suppression of student protests in the capital, which resulted in the death of at least 46 students, injury of 167 and arrest of over 3,000 (Solomon, 2016, p.n/a). The 1970s quashing of NGOs involved in socio-political movement in rural areas led to an eventual lull in civil society activity after the 1976 coup d’état (Jumbala and Mitprasat, 1997), that can possibly be accounted for by a re-assertion of ‘traditional’ Thai values and beliefs by the ruling forces (Pongsapich, 1998). However, NGOs expanded again in the 80s and 90s as a reaction to political liberalisation and democratisation (Kuhonta and Singpeng, 2014).

Thailand has seen a number of coup attempts since the 1980s, the past three of which have been successful, and often interspersed with mass public protests; for example, the red and yellow shirt protests between 2006 and 2011 and the mass anti-government protests lasting from November 2013 to May 2014, resulting in the removal of democratically elected Prime Minister Yingluck Shinawatra. Since 2014, the country has been under the rule of the military government that staged the latest coup. The same government also redrafted the constitution in 2016 after a referendum and enforced strict *lèse majesté* laws to control criticism of both the Royal family and the government. The country has, once more under control of the state, been relatively peaceful and void of mass protests, with promises of an election in 2018.

As indicated, the arguments of some scholars hold the military government responsible for quashing, or at the very least hindering, the development of civil society (Anderson, 1998; Jumbala and Mitprasat, 1997). However, Kuhonta and Singpeng suggest that the nature of CSOs in Thailand, which are preoccupied with their own agendas and ambivalent towards democracy, indicates that ‘civil society can emerge and be nurtured during authoritarianism’ (2014, p.336) although they also acknowledge the rise of NGOs during 1980s and 1990s democracy. Mulder (2000) adds that despite an educated public developing in Thailand, they have little political influence because the majority are preoccupied with consumerism and elevating their status, and less concerned with politics so long as ‘the government

legitimizes itself by stimulating economic expansion and the opportunity for personal advancement' (p.18).

But the central role of the educated classes in the political demonstrations of the past several decades indicate that they have been a driving factor in civil society development. It is important to note a turning point of this development in 1997, when The Assembly of the Poor, an organisation representing the interests of rural villagers and the urban poor, organised a 99-day mass demonstration outside the government house in Bangkok. This was significant in that it resulted in formation of a collective identity that enabled individuals to realise their potential for collective agency and change of the social order (Missingham, 2003). This was achieved via creation of a precedent for negotiation-based political access for an oppressed group (Baker, 2000). Similar to the Assembly of the Poor, the 2013-14 political upheaval demonstrates modern-day political consciousness which contests the arguments of some Thai scholars (Pongsapich, 1996; Mulder, 1997, 2000) that Thais lack political interest or influence because of weakness of social groupings and preoccupation with consumerism. The political upheaval of the past decade has shown that the Thai middle class will involve themselves politically if it is felt that the ruling class is not serving their interests, even if this defies democracy as pointed out by Kuhonta and Singpeng (2014).

As noted above, the issue for the disability rights movement is that it is generally much more difficult for disabled people to access education and this, therefore, questions/challenges the strength of the disability rights movement in mobilising the disabled community and affecting change. Furthermore, political instability has contributed to issues with institutional provision, particularly budgets and frameworks, and information collection on disabled children that have impacted on successful inclusive education implementation (Bualar, 2016). This is likely to further impact the mobilisation power of the disability rights movement.

In the case of Thailand, the collective identity of the Assembly of the Poor allowed for challenging people at a higher level of the hierarchy that might have been socially implausible outside the structure of the Assembly. It is similarly true of the disability rights movement in Thailand, which has enabled disabled individuals who feel that they are oppressed by society and denied access, to group together to take collective action. Although it is important to note that the collective action taken related to transport access, this has been directed towards the private sector rather than solely the government (see below).

2.3. Participation in civil society

Individual involvement in civil society is dependent on several things, including development of a political consciousness. According to Peet, civil society in Thailand is a struggle for political consciousness of the poor and a means of increasing political power through networks and can be defined as ‘the subjective experiences and knowledge of actors, the meanings they give to their social position, and the way in which they understand their political interests and the purposes of collective action’ (1996, p.9). Once political consciousness and identification with a political group is formed political participation can take place. For the Assembly of the Poor, political consciousness formed out of identification with ‘being poor’, which allowed the group to launch negotiations with the state (Missingham, 2003). This suggests that group identification is an important aspect of collective action.

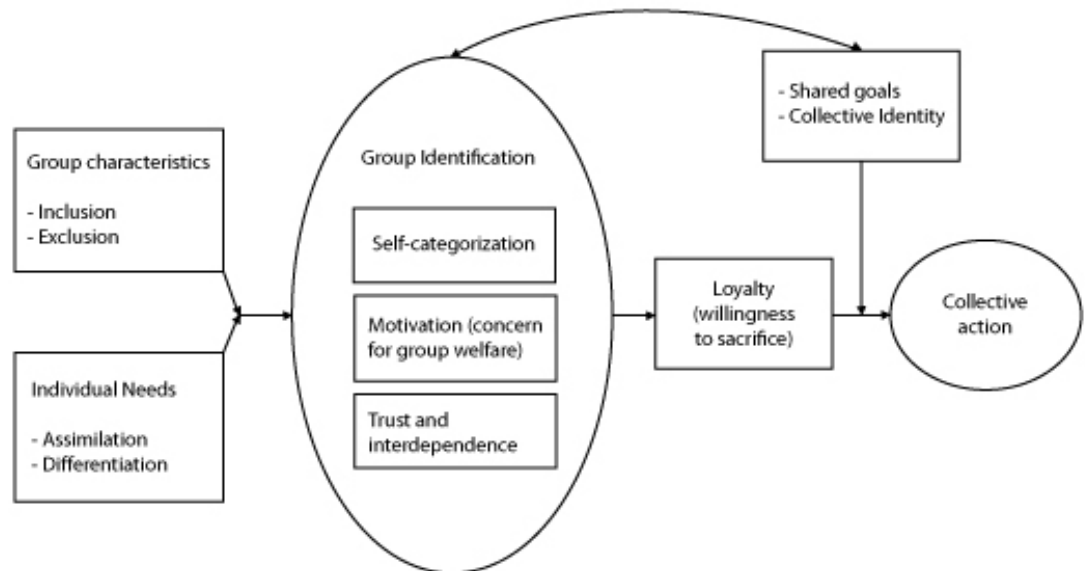


Fig.2 Model of group identification and collective action - Brewer and Silver (2000).

According to Brewer and Silver (2000) groups who are minorities will be more likely to have high group identification. This also depends on desire for assimilation into a group or differentiation from a group as well as group size (see fig. 2). This theory might suggest that disabled people, as a minority, would have high identification with the disability rights movement as a whole through ‘being disabled’, in the same way that the Assembly of the Poor identified as ‘being poor’. However, this view may be too reductionist as it does not take into account the complexity of disability identity.

As exemplified in the study in the Northeast of Thailand in the first chapter some disabled people do not identify as disabled due to socio-cultural factors, particularly projections of *songsarn* (Naemiratch and Manderson, 2009). Furthermore, disability can be viewed as a form of culture whereby sub-cultures exist where members identify through shared identity of struggling with the specific issues they face because of their disability (Kwok et al., 2002). In contrast to this Barnes and Mercer suggest that disability culture emerges as disabled people become 'politicised and aware of their collective interests', although this can be contested by identification with other, non-disability related groups (2003, p.109).

Nevertheless, we must consider that an extremely wide range of individuals with different impairments and circumstances experience disability differently. This will result in various experiences of oppression and so group identification and subsequent involvement in the disability rights movement is likely to be somewhat more complex than the theory proposed by Brewer and Silver or witnessed in the Assembly of the Poor. Additionally, the evidence used to compile this theory came from lab studies using artificial groups to measure outcomes of group identification. Therefore we must question if/to what extent it is applicable to real life groups that are more complex, especially in the urban Thai context. Mulder (1997) identifies 'urban individualism' as an interfering factor in the political involvement of Thais, whose own affairs always take priority over involvement in socio-political matters. Considering these factors, we should examine the forms the disability rights movement has taken in Bangkok.

According to Vasconcellos, (2001) political participation can take shape in a combination of different forms: individual, group or state; open (visible) or hidden; demanding (demanding change) or reactive (resisting change); violent or peaceful. In the case of Thailand, collective action has often been characterised by being open, reactive and occasionally violent. In contrast, Thai DPOs have mainly taken the form of open, peaceful and demanding political participation, for example the 1999 DPO demonstrations about the Bangkok Metro, which resulted in lift accessibility to some stations (Kwok et al., 2002). There has clearly been some progress made as a result of DPO collective action, although this has often taken a different form to that of the Assembly of the Poor and other political protests, perhaps due to the involvement of different types of NGOs.

As stated in chapter one, there are significant differences between progress in legislation and implementation, which brings about the question of how much of the

progress is surface change and how much is fundamental change in the equal interaction between government, private sector and the disabled rights movement. There is also the potential for hidden political participation, which is likely to be undertaken by individuals, as will be explored in the next section.

2.4 The disability rights movement and change

The disability rights movement in Thailand started to develop in the 1980s after the proclamation on the Decade for Persons with Disabilities (Srisuppaphon et al., 2017), which helped to begin a change in the view of disability. Civil society is considered particularly central to the disability rights movement and consequently was included as a priority in Asia as part of the Agenda for Action for the Asian and Pacific Decade for PWDs (1993 – 2002) (Kwok et al., 2002). CSOs also play an important role in providing alternative reports on implementation of the CRPD, highlighting failures by governments. The movement is dependent upon individuals, either acting alone or acting as part of a network, or disability organization, of which the many types will be outlined in the next section. The role of NGIs can also be noted within the disability rights movement, with most DPOs being led by middle-class, educated and urban individuals.

However, the difference from the Assembly of the Poor is that within the disability rights movement these individuals are typically disabled themselves; unlike the NGIs in the Assembly of the Poor, who whilst empathising with the villagers they represented, were not usually poor themselves. In addition to NGIs the disability rights movement has support of government individuals as well. For example, the blind senator, Monthian Bunthan, who has been influential in the disability rights movement (see chapter four). It is notable that the presence of disabled government officials, who, as a result of their elevated social-position occupy a high position in the hierarchy, have an important role in advocating for disability rights in Thailand.

It is possible for disabled people to challenge the hierarchy of society by using their unique position or status to create change. The study by Perlin tells the story of ‘implicated actors’ who have influenced policy change in Colombia regarding accessibility to public transport by ‘rebel[ing] against their own lack of agency’ (p.283). An implicated actor is defined as someone affected by exclusion but who cannot, in most circumstances, change this. By influencing change the person is no longer an implicated actor. In this case, it was an individual disabled person who sued the transport system company using an instrument of the constitutional court for protecting the fundamental rights of individuals (2012).

In Thailand it has generally been collective action through DPOs that has challenged inaccessibility to the Bangkok transport systems and highlights the importance of civil society in creating such change. The case of the lawsuit filed by the Thai Persons with Disabilities Network against the Bangkok Metropolitan Administration (BMA) and Bangkok Transport System (BTS) for not providing disabled access to all Bangkok sky-train stations is an example of this collective action, however it has not always been successful. Although the case ended in a ruling by the Supreme Court that the BTS were to install elevators at all entrances and exits of their stations (UN, 2015) the Supreme Court's ruling was not fully complied with due to ineffective law enforcement, a lack of disability knowledge, and lack of coordination between government bodies (DTN, 2016). Although there has been some progress in providing access, installation of lift-access for example, the progress has been slow and accessibility is still a major issue (see later on this chapter) and so the group has filed a further lawsuit, to be dealt with by the civil court (ThisAble.me, 2017). Despite the involvement of NGOs and collective action through DPOs it appears that a large proportion of the disabled people leading the disability rights movement in Bangkok remain implicated actors, unable to access the majority of public transport services despite their campaigning efforts.

As previously indicated, disability rights movement mobilisation is somewhat more complicated than group identification alone. According to Chanboon et al. there are four factors influencing participation of disabled people in Thailand in the disability rights movement; '1) the acquisition of physical services, 2) self-respect, 3) the expected benefits on personal rehabilitation and 4) the expected benefits in the management of the movement' (p.105). In interviews with 378 disabled DPO members it was found that low self-respect of disabled people led to higher involvement in the movement, which was explained by this group having lower availability of other channels to express their problems and needs. Additionally, involvement was also dependent upon expectations of personal benefit outcomes and management of the movement (2012). Benefit expectations are likely to vary hugely depending on the individual needs of each person as the needs of a physically disabled person are likely to be very different to that of an intellectually disabled person for example.

Another factor in participation in the disability rights movement is education and awareness among disabled people. According to Krairiksh, there was little backlash against the new draft of the Constitution that revoked the rights of disabled people to

access to environments and services (see chapter one) due to a lack of access to the draft and knowledge of disabled people on the significance of the changes (2016). A lack of access to information and education contributes to lack of autonomy of disabled people and ability to oppose any further infringements of their rights, thus further fuelling a circle of exclusion.

2.5. Thai DPOs and Disability-related Ministries

Institutions and their structure are additional factors involved in successful disability policy implementation. According to Barnes and Mercer (2003), there are four types of DPOs – collective, charities, single issue (of or for), and self-help/activist. Currently, in Thailand there is large number of different type of DPOs, although few international studies detailing their involvement in policy and planning could be found in the literature search. This makes the empirical side of the research essential, as up-to-date knowledge about the actual level of involvement of disabled people and the role of different types of DPOs in affecting change is absent. Not all of these organisations fit into Barnes and Mercer’s categories and so this section will provide an outline of the organisations involved in disability-related matters in Thailand.

The first type of Thai DPO are referred to as self-help organisations of people with disabilities or SHOPs; defined by Kwok et al. (2002) as ‘organisations, whose main policy-making bodies are required by their institution to have the majority of their membership positions held by people with disabilities’ (p.2). Civil society organisation in the form of SHOPs is important in ensuring that the charity model of disability is not applied (Zook, 2010) in that it strongly supports the ideology of the UPIAS (Union of the Physically Impaired Against Segregation), summarised in their slogan ‘Nothing about us without us’ (1976). It is therefore essential to study which different types of SHOPs in Thailand are involved in the policy-making and implementation processes so that the prevalence of the social model of disability can be examined. An example of a Thai SHOP is the group Transportation for All (TFA), which have been at the forefront of the campaign for equal access to public transport systems in Bangkok. They are a self-organised group whose membership is made up almost entirely of disabled people, three of whom were interviewed for this study (see chapter four).

The other type of DPOs differ from SHOPs in that their majority membership is not held by disabled people and are more likely to be organisations set up by the non-disabled for the disabled, although some members may be disabled. Usually these are in the form of a governmental organisation (GO) or NGO, which will have their

own agendas in terms of meeting government targets or supporter's needs. An example is the National Office for Empowerment of Persons with Disabilities (DEP), a GO that is a department under the Ministry of Social Development and Human Security (MSDHS). The DEP is responsible for implementing the National Plan for Empowerment for People with Disabilities, which outlines improvements in legislation and develop and implement national initiatives to improve the lives of PWD in Thailand every five years. These organisations will be referred to as either GOs or NGOs throughout the research but individual organisations will usually be referred by their full name or acronym.

Depending on the issue in question, other ministries may also be involved in the division of policy and planning, and so effective working relies on collaboration between these organisations and a common understanding. However, this is not always the case. Bualar (2016) notes that the Ministry of Education and MSDHS have not collaborated successfully on inclusive education because of different responsibilities and priorities. Similarly for matters of disability, accessibility and public transport there are three ministries involved: the MSDHS, involved in all matters of disability; the Office of Transport Planning and Policy (OTP) under the Ministry of Transport (MOT); and the Ministry of Interior. According to OTP the main organization responsible for providing transport services and support arrangements of conveniences in the public transport system for disabled people is the MOT (OTP, 2017). It is unclear from the literature the extent to which these three ministries collaborate with each other and organisations external to the government on issues related to disability and public transport, or what form this collaboration takes. This is to be investigated in the research.

The last type of Thai DPO comprises the six National Associations for Persons with Disabilities, which come under the umbrella organisation of the Disability Council of Thailand. These are not all SHOPs by Zook's definition (2012) because only three of the National Associations are majority-led by disabled people, namely, The Association for the Physically Handicapped Thailand (APHT); The Thai Association of the Blind (TAB); and the National Association of the Deaf Thailand (NADT). The remaining three associations are run by families, carers and disabled people; The Association for Parents of Persons with Autism; The Association for Parents of People with Intellectual Disabilities of Thailand; Association for the Mentally Ill of Thailand. The national associations are the government allocated, official organisations for each of the defined disability types. Each association is also allocated a budget from the government, although most also organise fundraising

activities and take donations. This makes them somewhere between a GO, an NGO and a SHOP. Therefore, for the purposes of this study, the national associations will form the third type of DPO, and be referred to as the national associations.

The three types of DPOs work together to come to solutions to various issues affecting disabled people. But there are also contestations between what is reported by groups from both sides to the UN Committee on the CRPD. For example, the report submitted in 2016 by the Thai government included several points that were highly contested by the SHOP Disabilities Thailand Network including persistence of medical-model-based policies, cooperation issues between GOs and SHOPS and continued barriers to accessibility to public services (DTN, 2016). This further indicates that the types of DPOs involved in the policy processes and the relationships between these organisations and involved organisations in the public sector are likely to have a significant impact on the overall effectiveness of policy implementation.

2.6 Public Transport accessibility in Bangkok

Public transport systems are a tangible example of accessibility within modern society and often make up one of the measures of city and country development. With rural-urban migration on the increase worldwide and urban populations now outnumbering rural for the first time in history (UNFPA, 2007), it is becoming imperative to focus efforts on the sustainability and inclusivity of urban environments. Barrier-free access to public transportation is established as part of the UN Convention on the Rights of Persons with Disabilities under articles 9 on Accessibility and 20 on Personal Mobility (UN General Assembly, 2006) and greater emphasis is now being put on accessibility for all user groups, especially with ageing societies becoming an important topic of the regional development discourse.

Thailand's capital city of Bangkok, home to 9.6 million people and accounting for 80% of the urban area of the country (World Bank, 2015) has a complex transportation network incorporating road, rail and waterways. Infrastructure and services are generally far further developed in Bangkok than the other 76 Provinces with the most rural areas more likely to receive infrastructure developments last. Despite mass rapid transit systems being put into place since the turn of the millennium, the city has been plagued with issues of transportation sustainability, helping to earn it the title of the city with the worst traffic in the world (Lee, 2017) and the highest road accident fatality rate in the Asia Pacific region and second

highest in the world at 37 deaths per 100,000 population (WHO, 2015).

Transport management is handled by the Ministry of Transport (MOT), which comprises of 8 government administrations and 15 state enterprises. The Office of Transport Policy and Traffic (OTP) is responsible for ‘submitting policies, formulating transport and traffic plans, and working out transport safety measures that are consistent with the master plans so as to bring about unity of the national transport and traffic policy’ (MOT, 2015). However, research indicates some restrictions on the abilities of OTP to successfully implement transport policy to help solve the city’s transport problems. Daniere notes that Bangkok’s transportation system has faced crisis due to decades of recommendations made to the Thai government failing to be implemented, ‘especially those which require sacrifice on the part of the elite. Thai politicians and bureaucrats are part of an authoritarian regime, which has promoted the growth of Bangkok without developing the capacity to manage this growth appropriately’ (1995, p.26).

There have been efforts to counteract some of the issues with the city’s transport systems however, and the Thai government implemented a public transport infrastructure development strategy starting in 2015, which aims to increase the proportion of people using public transport over private vehicles from 40% to 60% by 2022. To achieve this, connectivity of transport modes and ease, safety and comfort of use for passengers will be a focus (OTP, 2017). In addition, the National Plan on Life Quality Development for Persons with Disabilities 2012-2016 outlined that the target for 2016 was for 60% of disabled people to have access to travel, excursions and recreational activities (DEP, 2012, p. 24). However, issues with public transport in Bangkok highlight that design inaccessibility remains a huge barrier to the inclusion of disabled people in Thai society.

The quality of the built environment - housing, transport, buildings and public spaces, has a major impact on the extent and character of disabled people’s exclusion from mainstream society (Barnes and Mercer, 2003, p.49).

According to the Thai government public relations department (2016) universal design (UD) is being pushed forward in 30 provinces across the country as part of the government’s emphasis on improving the lives of disabled people. The international UD movement came about when architects realised that ‘special’ adaptations added on at the end of a project were costly and ineffective and

incorporating these needs into the design phase of projects was more efficient (Ercoli et al., 2015). Consequently, UD has started to replace the term ‘inclusive design’ and ‘accessible design’, to be more in line with the social model of disability. However, Steinfeld argues that UD is often incorrectly interpreted as accessible design or assistive technology for disabled people instead of its true meaning, (2013) summarised by UD pioneer Mace:

The design of products and environments to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design (1985, p.N/A).

Steinfeld argues that a new definition is needed to ensure that context, health and wellness and social participation are a focus. The new definition is therefore offered:

A process that enables and empowers a diverse population by improving human performance, health and wellness, and social participation (2013a, p.56).

As a relatively new initiative it is as yet unclear as to the Thai government’s interpretation of UD and how this will be applicable to the development of the public transport system in Bangkok, although it may mark a step forward in social-model thinking in terms of the built environment. Furthermore, the project ‘Transport for All’ (not to be confused with SHOP Transportation For All) launched by OTP aims to bring together the private sector in public transport and DPOs in order to interpret the accessibility laws and come to compromises on how to create accessible forms of transport options within the city.

According to Quim stakeholder participation like this is a rarity in transport planning. Increasing participation ‘increases the likelihood that actions taken or services provided by public agencies more adequately reflect the needs of people and that the benefits of development are more equitably shared’ (2014, p.52). As a rare occurrence however, there is little known about the effectiveness of such collaboration. It is this interaction, between the government, the disability rights movement, and the private sector, which is to be studied in the research. It will investigate the types of interactions occurring and the extent to which the collaboration is effective in bringing about change to the public transport system for disabled people.

Mass Rapid Transit

Initiatives by government and private sector organisations have tried to rectify the situation for disabled people who need access to public transport in the city in line with the National Plan on Life Quality Development for Persons with Disabilities, and have gone some way in increasing access and accessibility. The underground train (MRT) and sky-train (BTS) are free for disabled passengers who carry a disability card, and bus fares are discounted on some routes. However, a study of accessibility of three MRT and three BTS stations in Bangkok Metropolitan Region (BMR) by Prasertsubpakij & Nitivattananon (2012) showed that even though MRT trips were free, limited feeder transport options such as reliance on taxis because of inaccessible buses, made the overall cost more expensive for some disabled participants. This was backed up by reports from the interviews with physically disabled people from TFA (see chapter four), who have to rely on taxis to stations that are lift accessible.

There are different reports of the number of lift access points at BTS stations, and there is evidence of lifts being built. Currently, it is reported by the BTS that of 38 elevated sky-train stations, 17 have lifts (BTS, 2017). Whilst there have been efforts to install lifts in some stations the ruling of the Supreme Court has not been complied with; only 5 of the stations have lifts on both sides of the road and a further 12 stations have no lift access at all (ThisAble.me, 2017). From the interviews it was reported that of stations with lift access there was not always access from both sides of the road, lifts were often reported to be out of order or unsuitable for public-space use and disabled people relied on the assistance of station staff for their use (see 4.1.1).

Observations by the researcher during data collection in January to May 2017 backed up the reports that lifts in stations were not always operating (see fig. 5). Additionally, Prasertsubpakij and Nitivattananon found that more time was spent travelling by disabled and elderly passengers than non-disabled passengers, as well as very low satisfaction of provision of travel information for the majority of disabled people (2012). Comments by participants of the focus group and interviews indicated that additional travel time was still a barrier to travel for some of them, and they sometimes spent long periods waiting for staff assistance. Additionally, attitudes towards use of the disability cards created further issues in travel for some participants who felt that when using them their disability ‘authenticity’ was questioned (see 4.1.1).

Buses

In 2015 there were plans for the installment of twenty accessible bus routes within Bangkok featuring a total of fifty wheelchair accessible buses with low floors (DEP, 2015), however no such buses materialised. In May 2016 four of a new fleet of 668 buses were unveiled, however they were not wheelchair accessible (TFA, 2016). It seems that despite talk of UD the plans still exclude some physically disabled people from using the cheapest and most readily available transport system in the city.

Aside from physical accessibility it is also important to note that research into public bus travel by Nickpour & Jordan found that most barriers to bus-use are social and psychological. Therefore there is a need for a shift in mentality that takes this into account as ‘an “accessible bus” does not necessarily guarantee an “accessible bus service”. An accessible bus service requires not only an accessible bus and an accessible bus stop but also an empathic well-trained driver and a user-friendly environment’ (2013, p.83). This was found to be a theme in both of the focus groups, of attitudinal barriers from service providers such as fare collectors and bus drivers.



*Image 1. Bangkok public bus
National Stadium*



Image 2. Stair-lift at BTS

Walkways

Pedestrian walkways are an essential part of any transport system, providing foot-access to other modes of transit or as a mode of transport in its own right. Pedestrian walkways and crossings are also important for the protection of vulnerable road users, a user group that includes disabled people alongside pedestrians, children, motorbikes and cyclists, by separating them from traffic. This has been reflected in

the Regional Road Safety Goals of the Asia Pacific 2016-2020 with the aim of a 50% overall reduction in road deaths by 2020 (ESCAP, 2016a, p.1). Research in the USA indicates that wheelchair-user pedestrians are 36% more likely to die as a result of road crashes than the rest of the pedestrian population (Kraemer and Benton, 2015). Similar statistics are unknown for Thailand, but the research highlights the vulnerability of disabled people as a sub-group of pedestrians as unsuitable walkways are more likely to force them into the road. Road safety occurred as a theme in the findings, mentioned by several participants as a risk when travelling by foot in Bangkok (see 4.1.1).

Pavements and walkways in Thailand are a contributing problem to lack of access and accessibility. Walkways are often littered with obstacles – telephone boxes, sink-holes, electricity wires hanging at head-height or across footbridges, street food vendors, to name but a few, are an issue for any pedestrian. However, such obstacles also interfere with accessibility aids, such as ramps or Braille blocks that might have been added to aid navigation of a physically or visually impaired person. This is an issue both in and outside of Bangkok. UD is not considered by Mayors in modernisation of town centres and markets so that ‘uneven sidewalks, unnecessary street objects, and disability un-friendly transport systems have discouraged people with disabilities from visiting food markets’ (Bualar, 2016a, p.488). This clearly demonstrates the impact of non-universal design on the autonomy of disabled people in their every-day activities, and the importance of pavements and walkways as means of transportation in their own right.

Furthermore, the new S-guard initiative by the authorities to prevent motorbikes from riding along pavements (see fig. 5 and 6) has been noted as reducing accessibility for physically disabled people who use wheelchairs. The bollards, placed across pavements around Bangkok, supposedly prevent motorbikes from passing. In order to account for wheelchairs, wheelchair symbols show the navigation route through the bollards. Unfortunately this is not always effective and was noted by one interviewee to reduce her mobility so much in the area opposite her home that she had stopped going out (see 4.1.1).



Image 3. S-guard with wheelchair logo



Image 4. S-guard on Pahon-yothin road

Accessible vans

Mini-vans provide a large proportion of the road public transport in Bangkok and surrounding areas. Fares are generally more expensive than that of regular buses but still relatively cheap, and travel times usually faster. The vans themselves are cramped, seating 11-12 passengers plus the driver and are not wheelchair-accessible. In 2014, however, a new fleet of ten wheelchair accessible vans was launched to provide a free pre-booked taxi service for disabled people and the elderly in Bangkok (see fig.8), with plans to increase this number to 100 in the future to serve the 64,000 wheelchair-users in the city (Noyraiphoom, 2014). Although this is a huge step forward in mobility of disabled passengers the new scheme does not follow the concept of UD, providing a ‘special’ service for disabled passengers rather than allowing them access to the wider public transport system and thus continuing their segregation from mainstream society. Additionally, the low number of vehicles vis-à-vis demand means long queues for services.



*Image 5. Accessible van with wheelchair lift
Non-physical accessibility*

Whilst there are a number of studies that consider the needs of users with physical disabilities in accessing public transport in Bangkok (Pineda, 2015; Prasertsapakij and Nitivattanon, 2012) there is a distinct lack of research considering the accessibility needs of people with other types of disabilities, such as cognitive disability, one of the most disadvantaged groups within society. Cognitive disability is an umbrella term encompassing intellectual disability: ‘a significantly reduced ability to understand new or complex information and to learn and apply new skills (result[ing] in a reduced ability to cope independently...and begins before adulthood (WHO, 2017)’ as well as other types of cognitive impairment that are acquired later in life such as acquired brain injury and impairment resulting from illness or degenerative disease.

The study on the topic of public transport use for people with cognitive impairments by Risser et al. accepts its own limitations as a literature review study and suggests that further real-world research is needed on this topic. Especially needed is research that includes participatory research with people with cognitive impairments, as this is vital in understanding the specifics of issues in accessing public transport for this user group (2015). Unfortunately, many of the studies on public transport accessibility either focus only on physical disability (Prasertsapakij and Nitivattanon, 2012; Pineda, 2015; Blichfeldt and Nicolaisen, 2011; Verseckienė et al., 2016; Zając, 2016) or choose to specifically exclude people with cognitive disabilities or mental illness (Ahmad, 2015), further highlighting the exclusion of this group in research.

Especially in the case of Thailand, whilst it is clear that a lot of progress has been made in the acceptance and inclusion of people with physical impairments into Thai society, unfortunately the same cannot be said for people with cognitive disability or mental illness. It was evident from the focus groups that attitudinal barriers remain a deterrent for use of some modes of public transport, for physically disabled, learning disabled, autistic people and their carers (see 4.1.1).

It is also important to note that inaccessibility in the capital does not only extend to physically and cognitively disabled people however; other vulnerable groups such as women and the elderly are also discriminated against in access to public transport systems (Prasertsapakij and Nitivattanon, 2012). It appears that despite Thailand’s attempts to comply with international standards set by the United Nations and move towards UD concepts, disregard for inclusion of certain groups within

society remains an issue in implementation of policy.

The fight for accessible public transport

The DPO TFA have been publicising the campaign for access to the Bangkok transport systems as well as organising the lawsuit against the BTS and BMA are also regularly engaged in public campaigning activities and lobbying the government and private sector. Aside from being invited to partake in the OTP project Transport for All, TFA also seek bilateral relations with private sector organisations, although this has proven difficult due to working patterns and views of the national associations as the ‘official’ DPOs (see 4.3). However, bilateral relations between DPOs and government and private sector transport organisations were shown to be, in some cases, more successful in bringing about change than the collaborative projects under OTP. This is highlighted by the story of the implicated actor provided by TAB, and how this influenced the BTS policies on assisting visually impaired people and way in which the BTS trained their staff (see 4.2.1).

In 2015 the Committee on the Rights of Persons with Disabilities queried the involvement of DPOs in accessibility planning and its impact on accessibility issues. Whilst there is evidence of DPO involvement and the civil action by DPOs in the fight for access to public transport has been partially successful, it is still unclear as to how the Thai conceptualisation of disability impacts on their interactions with service providers and decision-makers in a negotiation setting, like the OTP project. Furthermore, how successful have their mobilisation efforts been on the rest of the disabled population, and how this might be further impeded by a lack of mobility, as indicated from the interview with the APHT representative (see 4.2.1).

In summary, the reaction by civil society to issues of public transport accessibility in Bangkok is influenced by the history of politics and citizen science in Thailand. There has been a challenge of exclusion to public transport in Bangkok by DPOs, which has led to the government responding by creating a platform for communication between DPOs, private sector and the government. However, due to the sometimes slow progress in adequate accessibility for all it is questionable how effective the collaboration has been and the factors underlying this. Additionally, mobilisation of the disability rights movement is influenced by education, perception of costs vs. benefits, self-image, disability identification and access to information. It is unclear as to how effective the movement has been in mobilising across self-identified groups of disabled people and therefore how much power the movement

has in achieving its aims of accessible public transport. The research design will address these topics and will be based on the aims and objectives and research questions.

Chapter Three - Research Design

The themes that have developed in chapter one and two include socio-cultural factors influencing the conceptualisation of disability that affects how disabled people see themselves as well as how others see them. Some socio-cultural elements of Thai conceptualisations of disability support the medical model of disability, which is still prevalent and influential in policy generation, implementation and adherence. Therefore, the ability of a disabled Thai person to increase their life opportunities and quality of life is impeded by lack of access to education and employment, which is, amongst other issues, underpinned by poor accessibility and mobility.

3.1. Aims and Objectives

The research aims to look at accessibility of public transport from two angles: firstly, from the perspective of disabled people who use public transport, in order to uncover the enablers and barriers to use of public transport in general in Bangkok. The aim is not to look specifically at one system but rather, because often many modes of public transport are used in one travel chain, to give some insight into the thoughts and feelings of disabled people who use, or are excluded from, those systems. In Bangkok metropolitan region there is a high reliance on informal feeder transport, such as motorbike taxis, tuk-tuks (three wheeled motorbike-type carriages) and songthaews (small open-backed buses), and typically these will form one part of a multiple-mode trip. For example, in a daily commute to work one might walk or take a motorbike taxi from the residential road to the main road, then a songthaew or public bus to the MRT or BTS, and another motorbike taxi at the other end to the workplace. The travel chain will vary depending on starting point and destination, traffic, and user choice, but it is not unusual for a single journey to include many types of transport in one travel chain, and therefore interaction with several different service providers. For some disabled people this already complex process becomes even more difficult, depending on the interaction between their needs and the accessibility available in each step and the transitions between them in the travel chain.

In order to give an overview of the travel chain experience the research will not only focus on physical accessibility of bus stops or stations but of the attitudinal and communicative factors contributing to accessibility for various disabled users. This helps to address the research gap related to this area, since the majority of public

transport research takes a physical-access approach (Prasertsapakij and Nitivattananon, 2012; Pineda, 2015; Blichfeldt and Nicolaisen, 2011; Verseckienė et al., 2016; Zajac, 2016; Ahmad, 2015; Oxley and Richards, 1995) and does not consider the other aspects of accessibility that are based on attitudinal or societal barriers. This part of the research will be addressed by the focus groups and interviews with disabled people and family members or carers.

Secondly, the research aims to explore the role of civil society groups in policy-making and social movement in Thailand. This will be done through an analysis of the effectiveness of public transport policy maker's coordination with DPOs and between government agencies, focusing on the types of interactions between these groups and how this reflects the social-model and Thai conceptualisation of disability. This part of the research relies on the elite interviews and focus groups with policy-makers, DPOs, national associations, SHOPs and private sector stakeholders. The research aims have led to the formation of the following research questions.

3.2. Research Questions

- What do the workings of government agencies, service providers and DPOs reveal about local conceptualisations of disability?
- How do local conceptualisations of disability affect disabled people's experiences of using public transport?
- How effective are the mechanisms implemented by government agencies and service providers to improve accessibility and usability of public transport for disabled people?
- How effective is the conversation between DPOs and service providers in bringing about tangible improvements to accessibility?
- How has the collective and individual action of disabled people in Bangkok shaped the process for communication between service providers, government and DPOs in improving accessibility to public transport?
- How easy is it to mobilise disabled people to participate in the disability rights movement to improve accessibility?

The research questions were operationalised by developing interview questions for use in the elite interviews and focus groups. See section 3.4 for details of the interview questions.

3.3. Approaches of past research

The measures of accessibility depend on understandings of accessibility, which will inform the methodology of accessibility research. As noted in chapter two, access and exclusion are routed in societal spaces, both physical and virtual, that are designed for the ‘normal’ human body for the means of production (Gleeson, 1999; 2001; Beck, 1997). The study of transport accessibility mainly focuses on access to physical space (modes of transport) but access to virtual space (i.e. accessible information) is also a factor that can impact on physical accessibility. There are many other factors to accessibility that also might not be immediately obvious, such as affordability, distance and timing, as well as psychosocial factors such as communication, attitudes of others, safety, ease of use and other environmental factors that are specific to the user. This is where the social model of disability can help, as it looks at the barriers in society as a whole for inclusion of disabled people. This section will outline and critique the different approaches to accessibility research.

A large proportion of literature on public transport takes a quantitative approach to defining and assessing accessibility. This research tends to be routed in a geographical and scientific background, such as the study by Hawas et al. (2016) which used three tools to measure public transport accessibility: transit coverage (% of population who has access in an area), transit supply (infrastructures, such as bus stops) and route diversity (variety of routes within a region). Similarly, Liu and Zhu (2004) argue that using geographic information systems (GIS) technology is well suited to measure accessibility to public transport because ‘the concept of accessibility accounts both for the spatial pattern of activities and for the link between activities’ (p.46). However the concept of accessibility for both of these studies is based mainly on spatial and geographical contexts, e.g. calculating the shortest distance for routes. It does not take into account the specific needs of the users and views the process of travel from a hard science rather than a social science perspective. This limits the overall effectiveness and real life applicability of the research. Manheim et al. elaborate, explaining that quantitative methods reduce ‘complex concepts to numeric representations, these methods can never fully capture important dimensions of human thought and interaction’, especially relating to those groups who are socially, politically and economically marginalised (2008, p.322). Whilst a scientific approach to assessing public transport accessibility is essential in the planning and improvement of systems, taking a solely scientific approach to

defining accessibility can result in oversight of the requirements of the individuals, and particularly vulnerable groups, that use them.

Alternatively, some transport studies take a qualitative methodological approach to accessibility measurement. Prasertsapakij and Nitivattananon's study of three MRT and three BTS stations in Bangkok (2012) took a mixed methods approach and used interviews with stakeholders to develop a survey questionnaire that was distributed to users of the metro stations, including vulnerable users such as disabled people, women and the elderly. The survey produced valuable quantitative data that didn't just consider physical accessibility but also psychosocial factors. However, the research was not focused on access for disabled people and therefore only included a small sample of 27 people with sensory and physical disabilities, and did not gather views of disabled people who were *not* using the services. This results in a selection bias, because by focusing on users of public transport, the views of non-users who might be excluded are discounted. Additionally, the lack of qualitative data collection restricted the user perspective input that would reveal any additional accessibility barriers that were not contained in the survey indicators.

Lättman et al.'s (2016) study of perceived accessibility is based on the question "how easy is it to live a satisfactory life using the transport system?" rather than an objective assessment of accessibility as offered by the hard science approach. Lättman et al. critique the conventional objective transport assessment for focusing too much on predetermined aspects of the system and not considering the needs of the user groups and if those aspects are relevant to them. This introduces the idea that perceptions of accessibility can be a contributing factor to actual accessibility. Perceptions may be especially relevant to disabled people considering the social stigma and marginalisation of this user group. The study by Risser et al. (2015) revealed that for people with intellectual disability perceived barriers, such as the attitudes of other passengers and service providers, inhibited them from accessing public transport rather than barriers created by the physical design. A conventional objective transport assessment would not have identified this as an accessibility constraint for this particular user group therefore it is essential that accessibility is understood from the perspective of the user groups during any transport assessment.

Similarly, Tillman et al. recognised the role of transport staff in accessibility for intellectually disabled (ID) people. 'For people with ID, bus drivers are important contact persons, as they might need more help, information, and support than others. Therefore, accurate data are needed about the role and function of bus drivers to

enhance mobility and social inclusion of persons with ID' (2013, p.308). Whilst it is important to acknowledge the non-physical factors in accessibility it is essential to allow the user group, as well as the service provider, to express their views and experiences, which the research by Tillman et al. did not. This would help to avoid assumptions being made about the experiences of the user group and highlights the importance of storytelling in research. Manheim et al. (2002) note that stories are necessary to represent the complexity of topics and allow for further judgement of the reader on the offered interpretation. This is important in adding reliability to a study because it allows for transparency. Additionally, much of Thailand's disability research is only a literature review and is not based on empirical research; therefore there is a need for qualitative data.

Person-centred research is particularly important where people's experiences of society might differ depending on their personal circumstances. Research by Schlingensiepen et al. (2015) review the very person-centred and nuanced approach of project 'Mobile' implemented by the German government to adapt public transport to meet the individual needs of users. The project goes as far as to take into account the tolerance of people with cognitive impairments to changes to services and how complicated the service information is. On the other hand, an over-reliance on assistive technology focussed on the person (in this case, the user wearing an assistive wristband) rather than an adaptation of the transport system is reminiscent of the medical model of disability. Presumably the German government worked with the user group at some stage in the development of the assistive technology, but it is unknown as to how far their perspectives were considered. In other words, did the user group suggest or agree with the assistive technology that was being assigned to them? Did they mind that it would differentiate them from other user groups?

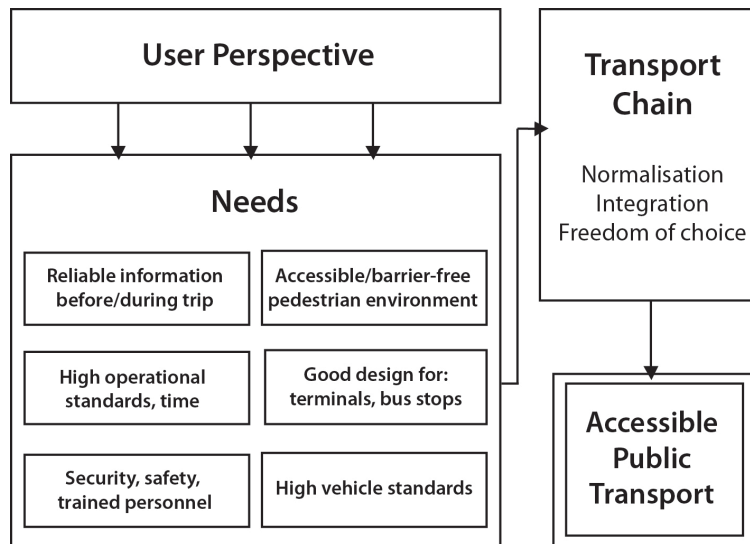


Fig. 8 Adapted from Ståhl's User perspective on accessible public transport (1997)

Some transport studies scholars have aimed to develop a model of transport use that starts from the perspective of the user group. Ståhl's model of user perspective on accessible public transport (1997) starts by canvassing user perspectives and identifying their needs throughout the whole transport chain, from starting point until destination (see fig.8). This innovative approach allows for all aspects of travel to be considered, both physical and non-physical, and therefore bridges the gap between the hard science and social science approaches. Generating data to apply Ståhl's model is beyond the capacities of this research as it would require a large data set for each aspect of the model. However, it was possible to use the user perspective element of Ståhl's model to identify some of the user needs, which could then be added to with further research. This led to the decision that the identified user group, in this case disabled people living in Bangkok, should be involved in the research so that their perspectives could be represented.

3.4. Interviews and Focus Groups

Interview Questions

The research questions helped to form the questions that were put to interviewees and participants in the focus groups. For example, participants of focus groups were asked what their experiences of different types of public transport were and how often they used them, whether they had experienced any problems or obstacles to travel, and if there were any mechanisms to help them overcome these problems or obstacles. The aim was to identify how service provider and other passenger

attitudes affected their travel experience, and to examine how effective mechanisms to improve travel experiences for disabled people were.

In order to avoid researcher bias the questions were initially kept fairly open. For example, 'Please could you talk about your experiences of using public transport in Bangkok?' The idea was to prompt the focus group participants to share their experiences without confining them to topics that may not be relevant to them. Later more specific questions were included. For example, 'Have you experienced any problems or obstacles in using public transport in Bangkok?' The focus group PowerPoint presentation (see Appendix B) acted as a communication aid but also aimed to keep participants on topic and ensure all questions were covered. The questions aimed to allow for exploration of the other aspects of accessibility as outlined in the previous section. Participants were encouraged to talk about their own experiences relative to their impairments and specific needs and talk about the experience of using public transport as a whole, rather than focusing on just physical accessibility, for example.

For the elite interviews the aim was to also keep the questions open. According to Bell (2005) this technique allows interviewees the freedom to expand on points important to them but with a loose structure to ensure all questions are answered. Interview questions were prepared beforehand but depending on the specific knowledge and position of the interviewee some questions were added or altered as appropriate. It was noted that due to the nature of the subject matter some interviewees were less forthcoming than others in their answers, so silence and occasional prompting was used to elicit more detailed responses. The interviewees were asked about their or their organisation's role in the campaign to improve public transport, how successful they thought it had been, what had been the main barriers to and drivers of progress, how satisfied they were with the progress, and what they thought could still be improved. These questions aimed to steer the interviewees to talk about the role of civil society in improving public transport, how service providers, government and DPOs thought about disability in terms of public transport use and how effective the dialogue between these groups was in affecting change. See Appendix B for the full list of interview and focus group questions.

Disabled participant involvement

Considering the number of transport, accessibility and disability studies that discount disabled people altogether or a specific sub-group, usually cognitively impaired people, there is a gap in the research for studies on the subject that involve disabled

people and seek to represent their views and experiences. Inclusion of disabled people in research is in line with the widely used slogan ‘Nothing about us without us’, which also extends to the right to inclusion in research. Additionally, considering the value of storytelling as noted by Manhiem et al. (2002) it was decided that any disabled people who either use, have used or are excluded from use of public transport should be involved in the research in order to gather first-hand qualitative data. In order to facilitate the participation of disabled people in the research some considerations had to be made from the planning stages. (See also the section on ethical considerations at the end of the chapter for an overview of the ethical approval process prior to the research taking place).

There were twenty disabled participants included in the research and five mothers of autistic adults. Efforts were made to make the research as accessible as possible for each participant and flexible to their needs. During the recruitment process participants were asked if they required any assistance or adaptation. For example, for the hearing impaired participants in the focus group a volunteer sign-language interpreter was employed to live interpret during the session and care had to be taken that the discussion went at a pace slow enough so that he could keep up. Secondly, materials produced for the focus groups (participant information forms, consent forms and power-point presentations) were written in a simple and clear manner alongside pictures, adhering to learning disability charity Mencap’s guidelines to accessible writing (2000) as much as possible. The writing was then checked with two native speakers for clarity and simplicity, one of whom was a primary school teacher with experience of working with children with learning disabilities.

In order to put participants at ease they were told during recruitment that they could also bring someone with them if they wanted. The learning disabled and autistic participant chose to bring a learning support assistant along, who helped aid understanding and signing of the consent form, and one of the hearing impaired participants brought along a friend. Although in the end no wheelchair-user participants were successfully recruited, the room chosen for the focus group to take place was wheelchair accessible to account for this possibility.

3.5. Researcher Bias and Researcher Effect

Researcher bias and researcher effect can skew research proceedings and analysis and invalidate results, and therefore should be avoided wherever possible. Bell (2005) warns of the danger of bias in interviews where strong views are held on the

subject. On the other hand, researcher empathy can be helpful. As Missingham points out in his ethnographic study of the Assembly of the Poor in 1996-7, claiming to be objective is not possible in such research because without empathy towards the group being studied, the researcher would not be able to gain access. However, an attempt to 'step back' can help to give a more accurate overview of the situation (2003). Additionally, it can be useful to be aware of one's viewpoint and try to challenge that as the research is undertaken. In order to reduce bias care was taken to be aware of the researcher's own perceptions and viewpoints so that bias could be counteracted.

Researcher effect can be equally as problematic and occurs when the participants of a study are influenced in some way by the researcher. Jones observes the presence of courtesy bias in research undertaken in Southeast Asian countries that are broken down into several characteristics. These include agreeable atmosphere; taboo of disagreeing with someone of higher status; no offensive or damaging comments to another; pleasant and complimenting comments; and hospitality extended to strangers (1993). This echoes some of the Thai cultural characteristics of interaction within the hierarchy as noted in the first chapter and therefore must be noted for the purposes of this study. Whilst some of these characteristics were unavoidable, creating situations where they were less applicable helped to mitigate their effects during the research. For example, a focus group with people who were of similar ages and positions was created to reduce the likelihood of there being any problematic *graehng jai*.

Jones also suggests solutions to courtesy bias, including the way in which topics are introduced or questions are worded, anonymity (to allow for criticisms to be made), clarification of interviewer position and network (to ensure integrity and trustworthiness of interviewer) and using a middle-man to access elite interviewees (1993). These things were observed during the research design, for example, interview questions and focus group presentation materials were checked with a native speaker for appropriateness and clarity and revised before being used. It cannot be ignored however, that the characteristics of the researcher, as a relatively young, Western, non-Thai female, could have an effect on the people who are being interviewed, and as such different answers might have been given had the interviews been conducted by an older, Thai male for example. Miyazaki and Taylor (2007) note that a researcher's psychological, physical and background characteristics can have a large influence on the outcomes of the data collection. This has to be

considered in any ethnographic research, whereby the researcher cannot be a fly on the wall, but is also part of the interaction.

In relation to researcher characteristics, Blichfeldt and Nicolaisen (2011) note that within disability studies there is the question of whether non-disabled researchers should do research with disabled participants, due to the inequality that already exists between the researcher and participant. However, rather than avoiding research altogether there are ways to reduce this. Focus groups are one solution as they reduce the input needed from the researcher in comparison with an interview and create a 'safe environment' (Manheim et al., 2002). Care was taken to ensure that a safe environment was created by holding focus groups at a familiar location to the participants (one at the university where they worked or studied, the other at the autistic centre where their adult children attended). During the focus groups an informal and relaxed atmosphere was aimed for to put participants at ease, although the PowerPoint presentation served as an aid for keeping discussion on track.

Translation of Data

It is widely acknowledged that there is a relationship between language and culture, and therefore this must be considered in any cross-cultural research. According to Kramsch language and culture are linked in a complex way; language is used to express common cultural experience; it's used to create shared social experience; and to 'symbolize cultural reality' (1998, p.3). Since the researcher and research participants do not share the same first language this presents issues that relate to researcher bias and researcher effect and must be addressed.

As Temple and Young (2004) discuss, the interpretation of the role of the researcher as the translator depends on the epistemological position of the researcher and how concerned they are about reducing bias, and should always be considered in cross-cultural research. As will be discussed in a later section it was acknowledged that the researcher is not independent of the research and, as a social actor, can influence the way in which respondents answer as well as the interpretation of this. Translation from one language to another presents a whole other set of issues in addition to this, including biases that arise from using an outside translator. According to Temple and Young (2004) it is possible to address bias of a translator or interpreter but time must be spent in order to identify their opinions on the topic first. Due to time and financial restraints of the research using a Thai-English translator was not an option, although a Thai sign language- Thai interpreter was employed. The researcher, as a secondary speaker of Thai, chose to undertake most of the interviews and focus

groups without an interpreter. The use of a recording device helped to mitigate and potential misunderstandings by the researcher as well as consultation with native speakers during translation post-interview for further clarification of topics. In the case of the first focus group with the university students the native Thai speaker had been present, which helped to mitigate misunderstandings that might arise from the native speaker not being familiar with the context of the discussions.

For research participants who had knowledge of the English language they were given a choice as to whether the interview was conducted in Thai, English or both languages. By giving the interviewees the choice it enabled them to express themselves in a way that they felt most comfortable talking about the topic. Two out of eleven interviewees chose to use English; they both had near-native-speaker proficiency and had lived and studied in the USA for several years; and several chose both Thai and English as they had high English proficiency but wanted to express some elements in Thai. The remaining interviewees chose to speak mainly in Thai, although occasionally English was used, especially when common disability-related or political concepts were being referred to, for example, universal design. In these cases, only the Thai elements of the interviews were translated.

Interviews and focus groups were recorded with consent of participants and interviewees using a portable recording device for the purposes of translation, transcribing and clarification of points made post-interview. Post data-collection, recordings were listened to repeatedly to identify important elements. These sections were then translated into English (see Appendix A). Of the elements deemed less relevant and that were not fully translated, notes were made and included between the fully translated sections. Direct quotations are included in speech marks and comments and questions made by the researcher are in **bold**.

3.6. Interviews

Nine out of eleven elite interview participants identified as disabled (nine male, two female); four visually impaired; three hearing impaired; and four physically disabled. All of the elite interviewees gave consent to have their names used in the research, and this was confirmed verbally prior to interviews. See table 1 for participant details.

Name and Position	Organisation	Disabled/non-disabled	Identified for...
Mr Monthian Buntan - <i>Member of National Legislative Assembly/UN Committee on the Rights of Persons with Disabilities/President of Disabilities Thailand</i>	Disabilities Thailand / Thai Senate	Visually impaired	Knowledge of government level interactions with DPOs and advocacy strategies of DPOs.
Ms Kaewkul Tantipisitkul - <i>Committee member</i>	National Association of the Deaf in Thailand NADT สมาคมคนหูหนวกแห่งประเทศไทย	Hearing impaired	Representing needs, experiences and priorities of hearing impaired community and involvement of DPOs in changes to public transport.
Mr Peerapong Jarusarn – <i>secretary</i>	Thailand Association of the Blind TAB สมาคมคนหูหนวกแห่งประเทศไทย	Visually impaired	Representing needs, experiences and priorities of visually impaired community and involvement of DPOs in changes to public transport.
Mr Kittipong Hadtawaiarn – <i>committee member</i>	Association for the Physically Handicapped Thailand APHT สมาคมคนพิการแห่งประเทศไทย	Physically impaired	Representing needs, experiences and priorities of physically impaired community and involvement of DPOs in changes to public transport.
Mr Saravut Eksuwan – <i>Director of architecture department</i>	Thai Mass Rapid Transit Authority MRTA (underground train and new Northern skytrain line)	Non-disabled	Representing service providers - knowledge of interaction with DPOs and government in changes to MRTA.
Dr Wiraman Niyomphol- <i>Assistant Dean for Educational Development and Research</i>	Ratchasuda College for adults with disabilities	Visally impaired	General knowledge of disability in Thailand and disabled people’s experiences of public transport/involvement in disability rights movement.
Dr Issavara Sirirungruang - <i>Assistant Dean for International Relations and Networking</i>	Ratchasuda College for adults with disabilities	Visally impaired	General knowledge of disability in Thailand and disabled people’s experiences of public transport/involvement in disability rights movement. Knowledge of DPO interaction with service providers and government.
Associate Prof Somyot Kaitwanidvilai – <i>associate professor of engineering</i>	Office of Transport Policy and Planning ‘Transport for All’ project / King Mongkut’s Institute of Technology Ladkrabang	Non-disabled	Knowledge of project between government, service providers and DPOs in making changes to public transport and interpretation of accessibility laws.
Mr Sawang Srisom - <i>secretary</i> Ms Nunthida Chitpukdeerat - <i>member</i> Mr Supawat Samurpark	Transport for All - TFA	Physically impaired (all)	Knowledge of DPOs interaction with government and service providers and campaign to improve accessibility.

<i>-member</i>			Particularly class action against the BTS/BMA.
Mr Pariya Wesabut - <i>Director of the central office of the Ministry of Transport</i>	Ministry of Transport	Non-disabled	Knowledge of DPOs interaction with government and service providers and campaign to improve accessibility and the role of government in facilitating this process.
Mr Supachan Traitsuengsakul - <i>Assistant lecturer</i>	Ratchasuda College for adults with disabilities	Hearing-impaired	Knowledge of of DPOs interaction with government and service providers and campaign to improve accessibility. Attendance to the OTP conference on improving accessibility.

Table 1. List of elite interview participants.

The aim of the interviews was to collect data to represent as many viewpoints as possible on the interaction between DPOs and disabled people, service providers and government in the project to improve accessibility of public transport systems in Bangkok. Members of five national associations were contacted and interviews requested which resulted in three elite interviews and one focus group. Views of service providers were also sought, although neither the BMTA (buses) nor BTS (skytrain) could be contacted, so only a representative from the MRTA (underground and skytrain) was interviewed. Asides from the national associations, Transportation for All were interviewed from the position of a non-government affiliated DPO. In order to give some outsider perspective of the interaction and general background in disability experience in Thailand the two lecturers from Ratchasuda College were interviewed. Neither was particularly active in the disability rights movement but both had friends who were, as well as being able to provide their own experiences of being disabled and using public transport in Bangkok.

3.7. Focus Groups

In order to address the user perspective element of the research design two focus groups were planned as part of data collection and also two individual interviews took place. Whilst focus groups can be an excellent and cheap method of collecting rich, qualitative data, Manheim et al. (2002) point out that because of their small sizes focus groups have limited representativeness and do not take place in a ‘natural environment’. One focus group was arranged at a university in central Bangkok and

the other in a neighboring province to Bangkok, at a centre for autism. The focus group at the central Bangkok university did not just include students, but also staff at the university, with an age range of more than ten years. It consisted of eight participants (four male, four female); four hearing impaired; two visually impaired; one physically impaired; and one learning disabled and autistic. One individually interviewed participant was hearing impaired and another was physically impaired and used a wheelchair (one male, one female) The two individual interviews included a university student and a government ministry employee. Whilst undoubtedly this was not a representative cross-section of the population, the participants all had various experiences of using public transport, which resulted in some rich qualitative data. Additionally, the inclusion of the focus group with mothers of autistic adults widened the participant pool, adding another area of Bangkok and including another segment of the population.

The use of parents and carers to speak for disabled people is a highly debated topic and this was considered in the research design. From the 'Nothing about us without us' campaign by UPIAS (1973) has come a movement emphasising the participation of disabled people in research, policy-making and decisions about their own lives. This brings about the question of whether carers should be used to speak for disabled people. On the other hand there is the argument that in cases where participation in research might be difficult or potentially stressful for the disabled person, particularly for some learning disabled or autistic people, that using the voices of carers can be useful. In research with autistic children by Ellis (2017) it was found that the inclusion of parents and carers added valuable insight into the experiences of their children and the social context. In Ellis's research parents were included in addition to research done directly involving the children. However, because this was a short-term research project the researcher was unable to spend time developing the appropriate communication strategies for some potential participants, in this case severely autistic adults. It was decided that in this instance it was more ethically appropriate to include only the parents of the adults in the research, and resulted in a focus group with five mothers of autistic adults in their twenties; one female and four male. This had the added value of broadening the insight into their own experiences as well as their children's. However, for further research it is recommended methods are developed to facilitate the participation of autistic and learning disabled participants.

Bloor et al. (2001) note that optimal group size for a focus group is between 6 and 8 participants, although Quine and Cameron (1995) recommend smaller group sizes

for disabled participants to allow for mobility aids and easier communication between participants. This was considered during the recruitment stage with instructions given to the intermediaries that a maximum of 8 participants was needed for the focus group. However, due to the maximum number of 8 participants in the central Bangkok university focus group and the additional people present for interpretation (one), support (two) and the two additional moderators, it must be noted that this focus group was larger than this recommendation.

The recruitment of participants for both focus groups was done indirectly via gatekeepers at the organisations to which the participants were linked. This was seen to be the most appropriate way to approach and recruit, given that the researcher was an unknown foreigner, whose position and trustworthiness could not be vouched for. Recruitment through a third party may be advantageous in terms of access but also presents some ethical issues. Quine and Cameron (1995) note the dangers of using an intermediary to recruit, especially when they are in a position of power in relation to the participants, and the loss of control of the researcher to monitor the process. In order to mitigate against these concerns were addressed in the ethical approval process via the following means. Firstly, the researcher prepared a participant information sheet in Thai (see Appendix B for an English language version), which outlined the aims of the focus group, gave a photo and contact details of the researcher and stated that participation was voluntary. It was given to the recruiters (members of staff at the university and the head of the autistic centre) and explained that it must be used during recruitment. The benefits of using an intermediary also mitigated against courtesy bias to participate due to the position of the researcher as a Westerner and a stranger.

Each focus group lasted from 60 to 90 minutes and was moderated by the researcher. There is contestation as to the use of the researcher as the moderator in focus groups. Manheim et al. (2002) advises against the researcher being the moderator in a focus group due to the risk of biasing results. Bell, on the other hand, identifies the role of the researcher as the moderator in a focus group and points out that bias risk is also true of interview research. In order to guard against this there is a need to triangulate the data with prior research, question practice and seek the advice of others during the analysis (2005). The researcher acted as the main moderator in both focus groups, although for the focus group at the university there were two other assistant moderators to aid in the understanding of participants and running of the focus group.

3.8. Methods of data analysis

For ease of transcribing and translating the interviews and focus groups were recorded once permission had been obtained from the participants. A total of 12.6 hours of data was recorded. Notes were also taken by the researcher and research assistant during one of the focus groups to outline the main themes or comments that were made once the recorder had been switched off. The interviews and focus group data was listened to in order to identify the main themes before translated directly into English (for transcripts see Appendix A). Transcripts were then uploaded to NVivo data analysis programme so that thematic analysis could more easily be accomplished.

Thematic analysis is a method applied to the analysis of qualitative data. Bryman (2016) states that thematic analysis is not as defined as some other analysis methods but involves identifying categories related to the research themes and questions and then giving theoretical insight. Considering that the interviews and focus groups resulted in a number of insightful anecdotes, narrative analysis to identify the underlying themes of these stories was used in addition to general thematic analysis of the whole data set. We are reminded that in the use of narrative analysis ‘the ‘stories’ are not assumed to be unequivocally and objectively factual, but rather are viewed as individual (or organisational) interpretations of events and relationships that are formed by the context within which they are located’ (Oxford Reference, 2016).

3.9. Ethical Considerations

An ethical approval application was made through the Faculty of Arts, Humanities and Cultures Research Ethics Committee, University of Leeds on the 7th December 2017. The ethical considerations included in the application covered the recruitment and involvement of adults with learning disabilities, whom the university classed as vulnerable participants. A justification of their inclusion was required, detailed description of how they would be protected from coercion and how they would give informed consent.

Advice was sought from the committee on the anonymisation of participant data in order to protect the identities of the participants. The response was that the reviewers advised that vulnerable participants’ details were collected but kept confidential and stored on secure university systems, and that they are anonymised or pseudonymised

for purposes of publication. Therefore names of the disabled people and carers who participated in the focus groups or individual interviews (with the exception of disabled elite interviewers in table 1) were replaced by letters or pseudonymised. Ethical approval for the research was granted on the 14th February 2017 (see Appendix B) after revisions were made to include copies of the advert, participant information forms and sample approach email to organisations. In addition a department-approved risk assessment had to be supplied (see Appendix B).

The research was designed to answer the research questions in the most comprehensive way possible given the confines of the study. However, it is recognised by the researcher that the findings and their interpretation, to be discussed in the following chapter, will have been somewhat influenced by the research design, researcher and the persons, opinions and information available at the time of data collection.

Chapter Four – Realities, Mobilisation and Interaction

NB. All quotations used in this chapter are taken from interviews and focus groups undertaken for the research, which can be found in Appendix A.

The findings in this chapter will be examined by using the main concepts outlined in chapter one as an analytical framework. It is recognised that using cultural concepts and interpretation is a non-conventional form of analysis of public transport, accessibility, or, to some extent disability. However, the aim is to provide an insight into the complexity of issues that links these areas of study in this particular country-context and highlights the importance of contextual understanding in cross-cultural research. The main concepts concerned include local conceptualisations of disability, Thai hierarchical systems of interaction between groups within society and the functioning of civil society groups (in this case DPOs).

4.1. The realities of public transport

Disabled people involved in the research had varying experiences of using public transport in Bangkok, ranging from positive to negative. Almost all of the participants had prior experience of using public transport and around half still used it regularly to travel to work or university because it was their only travel option. However, the remaining participants had chosen to no longer use public transport and instead use their own private transport (car or motorbike) or rely on taxis. It is important to note that some participants expressed that they were unable to use certain types of public transport, either because they were physically unable to gain access (particularly wheelchair-using participants to buses and some stations) or that their negative experiences had led them to stop using public transport. The aims of including disabled user perspectives in the data collection was to understand how general societal thinking towards disabled people influence the experiences of their using public transport in Bangkok and explore how effective the mechanisms to improve accessibility are in creating a positive travel experience. The analysis of data from focus groups and interviews resulted in two sub-themes: Multiple Barriers and Discouragers to Using Public Transport, and Enablers to Travel.

4.1.1. Multiple Barriers and Discouragers to Using Public Transport

Disabling attitudes

Disabled participants and carers mentioned disabling attitudes of service providers, which made their journeys more difficult, made them feel uncomfortable, or in some cases excluded them from using public transport altogether.

One day they made us get off, you know. He stopped at the side of a road, not at the stop and said 'get off'. He [my son] wouldn't stop going on and was getting worked up and I had tried to calm him down but the driver didn't understand and told me to get my son off because we were bothering the other passengers, I said 'I'm sorry but my child has special needs' and I waiid³ and apologised and said we were almost there anyway but he said no you'll have to get on another bus. I cried, you know, taking him off the bus and then got in a taxi. Sometimes they just don't understand us.

Mother of autistic son, Focus Group B

The experiences of the mothers of autistic adults indicated that they and their children were severely affected by negative attitudes of service providers, which created psychosocial barriers to public transport. Although this was the only case mentioned by the group that had resulted in refusal of service, several of them reported other negative experiences that resulted in them no longer using public buses and instead using taxis. It is important to note that the mothers reported reactions of fear of their children when they were out in public, although this was not expressed in relation to travel on public transport and was mentioned more as a general shared experience.

It is apparent that a lack of awareness about autism is a contributing factor to these experiences, but there are likely a number of additional factors that are more general issues with public transport and not necessarily directly related to attitudes towards disability. For example, participants in focus group one noted that bus companies compete for passengers, from whose fares they get commission, and so leads to speeding, poor driving, not waiting for passengers and poorer levels of service. Furthermore, it is possible that a lack of systems of accountability, training, complaints procedures and disciplinary action within the bus service organisations contributes to poor general service on buses. It is also likely that low rates of pay and job benefits, no pension scheme, for example, might also provide little incentive for bus service staff to adhere to customer service standards, although these themes were

³ A *waai* is made by placing the palms of the hands together in front of the face. It is used as a symbol of respect when greeting, thanking or apologising to someone.

not explored in the research. However, as the interviews demonstrate, general issues with customer service and negative attitudes might have a greater effect on disabled people due to interaction with other barriers, or prevention of mechanisms to enable travel being effective.

It is notable that service providers did not always accept use of disability cards, which should allow reduced-price travel on some public bus services. According to the government organisation BMTA that runs public bus services, disabled people showing a national disability association membership card are entitled to pay half price fare (BMTA, 2017). However, there are also private bus companies operating bus services under BMTA, and it is not clear if they adhere to these rules, since the reports from the focus groups indicated that the fare reduction was not always applied. There was agreement between participants that whether they received discount often depended on the visibility of their disability and on the judgement of the bus conductor collecting the fare, rather than the regulated use of the card, which allowed for discrimination against those with less visible disabilities.

One time I showed my card and said ‘I’m going to Victory Monument’ and [the guard] stared at me like ‘what’s the matter with you?’ – I’d given them the card but they wouldn’t read it. Why? It says on the card. And then they blocked me...so I said ‘I’ve got a problem with my leg’...you’ve got to make them see.

Physically impaired participant, Focus Group A

It was not only the buses where using a disability card to get the discounted fare presented a problem. Both the system and staff attitudes at the BTS were also reported to discourage users from presenting their disability cards to get the entitled half-priced fare. Similarly, the parents of autistic adults reported that they were not able to use cards at all due to the disability being ‘invisible’.

Sometimes I go with her and I see that when she gives her card in it’s like they want to ask but don’t... I asked a deaf child how he felt before... he told me ‘I don’t dare queue [to get a free ticket], I’m embarrassed because sometimes they stare.’

Learning support assistant to learning disabled and autistic student, Focus Group A

The theme of invisible disabilities appeared to be connected to the effectiveness of mechanisms for improving services for disabled people. Some of the parents group reported that other passengers rarely vacated the disability-reserved seating for their children because they were unaware of their disability, which makes journeys more difficult and stressful, although one noted that people who had *nam jai* [generosity] regularly got up for her son. When asked if they ever requested passengers to vacate

the disability-reserved seating, the response of the participants was that they didn't dare, even though they were aware of their rights (see section 4.2.1. for elaboration).

Asking for assistance was identified to be an additional barrier to travel by the three physically disabled members of DPO TFA because of the attitudes of service providers who refused assistance. Being refused service or assistance multiple times caused frustration and anxiety about travel because being able to complete the travel chain was subjective to reliance on others and therefore uncertain.

It wastes money, it wastes time and sometimes it has an effect on your mental health also. For example, if you go to a station that hasn't got any facilities and ask someone to help you and they refuse, it makes us frustrated; we have to find another way. Sometimes we argue, for example, blind people who don't need to use a lift, they insist you use the lift and so it results in an argument. We end up arguing with the service providers...sometimes it makes you not want to go outside because you know you're going to argue.

Supawat Samurpark, TFA

From Supawat's comments it becomes apparent that negative interactions with service providers and others during travel can present as an attitudinal barrier to travel. Interestingly, three visually impaired participants also mentioned negative interactions with service staff, although the cause was rejection of assistance rather than requesting it. According to the interviews it appears that expectations of disabled passengers and levels of assistance projected on them by service providers were sometimes mismatched, which caused friction. As will be explored further in section 4.2.1. this resulted in reluctance to travel but also in conflict avoidance.

Physical Accessibility as a Barrier

From the interviews it seems that physically inaccessible environments particularly affect wheelchair users who meet barriers when travelling to public transport ports (e.g. bus stops, stations and piers). Travel by foot is considered as the main form of feeder transport to the main mode of transport, other than motorbike taxis, which are inaccessible for the majority of wheelchair users. All physically disabled participants, including the representatives from APHT and TFA reported that obstacles such as uneven pavements, steps, poles and other street furniture presented as either complete barriers (i.e. preventing travel) or discouragers, meaning added time, costs, inconvenience, stress, or danger discouraged travel via a particular mode of transport. It is notable that poor physical accessibility and barriers are a general issue in Bangkok that affect many groups, including non-disabled people. However, for wheelchair users these barriers are more difficult and in many cases impossible to

overcome, thus result in higher levels of exclusion from public transport for this group.

There's still very few disabled people using the public transport systems at the moment. There are obstacles right from leaving your house to reaching the system...if I go out in my road then I've got motorbikes and water drains or if I get out of the road I have to run alongside the edge of the road [in wheelchair] and risk being hit by a car until I get to a point where I can conveniently call a taxi.

Supawat Samurpark, TFA

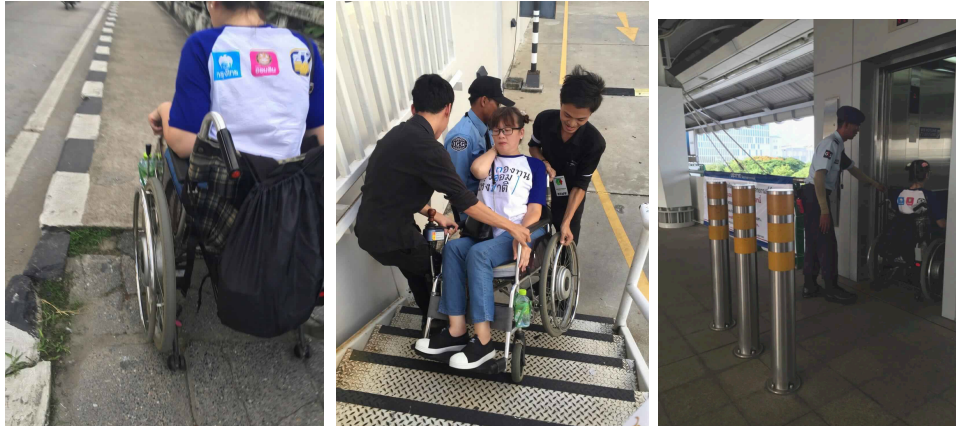


Image. 6, 7, 8. Photo-journey at Bang Na BTS station en route to Bangkok International Trade and Exhibition Centre, 2017.

Road safety was a concern of visually impaired participants in the focus group also. They noted that they didn't dare use pedestrian crossings because cars didn't stop and they had no way of knowing where the cars were or when they were approaching. As pointed out in the previous chapter, a recent initiative to prevent motorbikes from riding on pavements by installing a series of metal poles has started in Bangkok. Initially trialled in the Din Daeng district, other areas are expected to follow if it is successful in its aims of preventing motorbikes from riding along pavements but allowing access to pedestrians and wheelchairs (Thai Rath, 2017). However, one of the participants who used a wheelchair reported this initiative as being a barrier to travel, and a contributing factor to why she rarely left the university campus where she lived and studied. According to this participant and Monthian Buntan, inaccessible physical environments were still viewed as a consequence of negative karma for disabled people by wider society. Monthian explained that individuals are more concerned about their own individual path to nirvana rather than a collective path and this is why physical accessibility for all was not a priority. This links interpretations of accessibility to Thai conceptualisations of disability informed by Thai belief systems, as explored in chapter two.

Added Cost and Time

According to the interviews, those who were excluded from public transport due to physical barriers felt the impacts of this on their lives. DPO TFA pointed out that due to the extra time and money added to their travel chain the number of life opportunities they were able to engage with were limited, be it work, social or other. Despite free and reduced-price travel being offered by the MRT and BTS, the cost incurred from reliance on taxis because other feeder transport (buses, motorbikes and foot) was inaccessible, was more than the price of travel for a non-disabled person. Additionally, transitions in and out of taxis added time and stress, especially when help was needed from strangers for lifting in and out of taxis and wheelchairs. Also, if a personal assistant was needed for the journey they would have to pay a full-price ticket. Since not all BTS stations have working lifts or lifts on both sides of the road, sometimes physically disabled passengers have to leave the train a station or several stations further from their destination, which further increased time, cost and reliance on taxis.

If we don't use public transport it costs a lot of money. If we do use public transport it costs a lot of time. We have to choose between time or convenience.

Sawang Srisom, TFA

4.1.2. Enablers to Travel

Positive attitudes create a positive travel experience

A number of the participants noted that helpful and kind attitudes of service providers and other people were an enabler to using public transport, for example, the mother who described other passengers who vacated the disability seating for her autistic son as generous. Particularly for visually impaired participants, and also according to the Thai Association of the Blind, relying on sighted people for information could improve or significantly enable their travel experience, which partially counteracted the disabling design of systems.

I try to get staff there, security guard or whatever to help me, a sighted guy, you know? I need to rely on sighted people but I know where I'm going to go...I wait for the announcement then I don't know where the bus is so I stand up, I walk a little bit, I yell out a little bit, I ask people next to me please help take me or whatever, maybe the passengers will take me, maybe the staff will come and take me but I get on the bus somehow - on time!

Wiraman Niyomphol

Several mothers of autistic people also reported that drivers of minivans often went further than the set route to drop them off directly outside the Autistic Centre. However, they pointed out that this is not part of a system but is down to the *nam jai* [generosity] of the bus drivers. Similarly, in describing his travel experience from Bangkok out of town, Wiraman actively seeks assistance from other passengers, rather than relying on a specific system designed to help him. He describes Thai people as *jai dee* [good hearted] and *euua feuuu phuua phaae* [compassionate and considerate]. However, the result is that the journey is made easier and more pleasant for the user. This demonstrates that the generosity and compassion of others, both passengers and service providers, can help to plug the gaps in services.

Other users did mention staff training being an enabler to travel on public transport. Hearing-impaired participants in the focus group noted that BTS and MRT staff were used to communicating with them via writing when buying tickets and so they reported no problems in this respect. The MRT system was noted by the majority of participants as being the most ‘accessible’, both physical and non-physical, due to the helpful attitudes of staff, training and the physical design of stations to include lifts. By institutionalising staff training into transport systems travel can become much more accessible to all users, but especially users who are more likely to require assistance or information. Through the OTP project Transport for All transport providers are being encouraged to improve staff training to bring customer service in line with accessibility standards. However, as indicated earlier, other factors such as rates of pay and staff benefits and willingness of all service providers to adhere to guidelines might interfere with the success of this, and thus this element requires further study.

Reduced and Free Travel

Many of the participants who frequently used public transport reported that they took advantage of free and reduced fares available to them when they used their disability cards. Sawang Srisrom described this as a helpful interim solution, but stressed that he thought disabled people would be happy to pay if the services were fully accessible. This was supported by some of the focus group participants and interviewees, who also said they were happy to pay for good services.

The physically disabled participants mentioned the government free accessible taxi scheme, which provides free travel for physically disabled people in BMA but only caters for a small percentage of the disabled population in Bangkok. The system

works via a pre-booking system but is not suitable for every day travel, due to the small fleet of vehicles (10 with plans to expand to 100). Although the scheme was recognised as a good idea by participants who mentioned it, it was also acknowledged that it was not a comprehensive solution for travel for all in the city.

4.2. Mobilising disabled people

People who were interviewed about the collaboration to improve public transport had varying opinions on how effective it was and the obstacles and drivers of this process. Four sub-themes were identified under this category: Given Up on Giving Up; Conflict Avoidance and Expectations of Gratefulness; Time and Cost Restraints; and Reactions to Charity, which explore the different attitudes of disabled people and DPOs towards the disability rights movement in relation to public transport.

Given Up on Giving Up

Using legal mechanisms has been one of the most effective ways of improving public transport in Bangkok and the law was noted by the majority of the interviewees as one of the key pushers of change, in both the public transport arena and in general disability rights.

Many things that we've done, for example, prosecuting the BTS have made people realize that disabled people aren't passive recipients anymore, who you can do anything to. The law prevents them and is a tool for us to use in our work. Because of that they will listen...We had more power. It was like, before this we weren't really respected in our position of being disadvantaged, or as the owners of the problems.

Sawang Srisom, TFA

Sawang notes that by using the courts it changed the views of disabled people as passive, which challenges the projections of *songsarn* by members of Thai society and highlights that there is a demand for equality by the 'owners of the problems' (Peerapong Jarusarn). By organising themselves as an activist group, the members of TFA have empowered disabled individuals who are excluded from public transport systems and many aspects of society and provided a platform to challenge this.

There is evidence of some national associations providing a means for individuals to use their position to effect change in the public transport systems. During the interview with Peerapong from TAB he told the story of a visually impaired man who had taken the BTS to court after a staff member allegedly hurt him by trying to

make him use the stairs instead of the escalator. Knowing that he wouldn't win due to lack of evidence he contacted TAB who were able to use the court as a 'middle-man' to open up a conversation with the BTS through the appointment of a key man, whom the association can contact to resolve issues. Additionally, by using the TAB radio station to publicise the story they were able to negotiate TAB running staff training for BTS staff on how to lead visually impaired passengers and negotiating some changes to the assistance regulations. For example, if visually impaired passengers are travelling with other people (e.g. friends or family) the staff now do not have to lead them through the stations. This demonstrates the effectiveness of collective action through DPOs in bringing about changes to public transport systems. However, it is also important to note that although this bilateral relationship originated from an incident, in general bilateral relationships between the national associations and public transport providers are rare. Interaction is more likely to take place through the collaborative meetings arranged under OTP project Transport for All, which will be discussed below.

The blind senator, Monthian, commented on the need for an attitude of resilience and not surrendering in the fight against medical model thinking. He served as a member of the Thai Senate from 2008 and after the 2014 coup became a member of the National Legislative Assembly, previously having spent time working as an academic and a disability rights activist. His position in government is significant because he is the first blind senator and one of few disabled people in Thai government. He is also president of Disabilities Thailand, the umbrella organisation for the seven national associations and a member of the UN Committee on the Rights of Persons with Disabilities. His motto, 'given up on giving up', was mentioned by the interviewee for TAB, however, this was not the mentality of all of participants.

So that's why I always keep saying my motto: I've given up on giving up. To remind people that you cannot, ok you can give up - but you give up on giving up. You should not surrender. You should not give up.

Monthian Buntan

Conflict Avoidance and Expectations of Gratefulness

In contrast, use of legal mechanisms also appeared as a hindrance to mobilisation of both individual disabled people and national associations to join the campaign for accessible public transport. According to TFA members and Monthian this was a big obstacle to the success of the campaign and that people were discouraged from

joining because ‘Thai people don’t like to go to court...they don’t want to be targeted as radical’ (Monthian Bunthan). According to Monthian, this lies deep within the culture of Thai society, whose members are ‘supposed to be raised to be tame and obedient and feel grateful’. For some disabled people and DPOs this translates to a passivity and reluctance to demand rights, which is difficult to change.

Changing the societal behaviour was thought of being a threat to the establishment...I mean the whole fabric, the whole social fabric of how children pay respect to adults, how we do certain things in certain ways.

Monthian Bunthan

Avoiding conflict and criticism was identified as being a reason for DPOs and associations to avoid joining the campaign to improve accessibility. It is notable that the remaining National Associations, namely the Associations for mental health and learning disability were difficult to contact and much less ‘visible’ or ‘vocal’ in the project to improve public transport. The conversation tended to be focused towards physical accessibility, although it is unclear as to whether this was a cause or effect of their lesser involvement. Difficulty getting in contact with these associations to ask about this was partially due to lack of physical presence – for example the ‘Transport for All’ project conference attended by the researcher involving DPOs, government and transport service providers did not have any learning disability or mental health DPOs in attendance. When asked about the higher involvement of some DPOs than others, the explanation from interviewees was that ‘they pick and choose issues that they feel mostly affected [by]. And if they feel that there’s nothing to lose for them then they go.’ (Monthian Bunthan).

Still most of our board members avoid joining because they don’t want to have problems with the government agencies...I think this is a lot of people in the disability movement in Thailand are confused themselves, mixing up a good relationship, with you know, trying to avoid conflict, trying to avoid criticism.

Monthian Bunthan

Evidence from interviews with Issvara, TFA and MRTA supported the idea that there was an expectation of gratefulness from disabled people by others and a projection that demanding rights was not appropriate behaviour. However, this is perhaps more generally applicable to Thai society as a whole, because, as discussed in chapter two a modern political consciousness can be at odds with the traditional Thai values promulgated to keep control and order. According to Monthian ‘the law seems to go beyond the norm of the society’, indicating that although the law denotes that rights can be demanded this is not always socially acceptable. For example, the MRTA representative saw the behaviour of some DPOs who were

campaigning for access as ‘negative and very aggressive’, which had led them to avoid communication with them. TFA also reported experiencing avoidance by service providers when formally requesting to survey the accessibility of transport systems.

They’re scared. They’re scared that we’re going to go and blame them, something like that. In the past they’ve seen it as strong advocacy and they’re scared.

Sawang Srisom, TFA

When asked about the role of the associations in the movement to improve disability rights, one of the academics who was interviewed pointed out that the national associations and other DPOs still support the charity model of disability through fundraising operations that rely on making merit. The representative from APHT also mentioned that dealing with donations to support their disabled members was a large part of the association’s workload. The opinion of Issvara was that avoiding traditional and lucrative merit-making fundraising practices could be perceived as aggressive.

People go and feed the blind children for their birthdays or whatever...volunteers go but it’s like they go to make merit with us. But it’s difficult because owing to the fact that we’re a Buddhist country, if we go against everything then it’s like you are so aggressive. It’s like you’re not grateful. But it’s ironic in that we say we don’t want to be the target of merit-making but when we do group fundraising – disabled people’s NGOs and that, they still do fundraising through the monks and then you say please donate... In this way it’s more like charity, making merit. And it’s kind of like swallowing our words. We say we are equal and we have rights to do this and that and then we don’t want to be treated on a charity base but we want to get a lot of money, rather than trying to do business or whatever, a lot of money comes through this kind of asking people to make merit.

Issavara Sirirungruang

Conflict avoidance appeared to be linked to a motivation to save face [*rak saa naa*] on both sides caused by blame and feelings of shame. According to Peerapong, saving face was essential in meetings about the delays in delivery of the accessible low-floor buses because of feelings of shame when disabled people asked questions of the government stakeholders (in this case BMA). Therefore, it was implied that sensitive issues that might result in loss of face would typically be avoided, or meetings avoided altogether by key decision makers. However, according to Bunthan, this was not one sided and disabled people were also concerned about losing face by being confrontational. Therefore it appeared that sometimes the concept of saving face was prioritised over making demands or collaborating on difficult to resolve issues. This resulted in avoidance of meetings in the case of some

DPO leaders, especially of national associations, which might rely on preservation of government relationships more than other DPOs due to funding.

It's too much of a burden, you have to run around and make noise and your image is like, attacked, you know? Your image is sort of negatively perceived. Thai people love their face!

Monthian Bunthan

Time and Cost Prevents Mobilisation

One of the reasons stated by APHT representative, Kittipong Hadtawagarn, to explain why more physically disabled individuals in Bangkok do not get involved with the campaign to improve public transport was the difficulty and cost in travel to meetings and protests. Expense of feeder transport was mentioned by TFA (see above) as a discourager to travel, and this appears to translate into a deterrent or barrier to physical political participation in the disability rights movement.

Reactions to Charity

It was evident from speaking to a range of disabled people – from students to academics and members of parliament, that they all faced projections of *songsarn* and charity from strangers in the form of *haai taan* in their every day lives, including when using public transport. Projections of pity from others clearly frustrated some participants, especially when comments were intended to discourage them from travel at all.

Some people get disheartened in that when they go out it's difficult to get a taxi, when you want to get in you have to get someone to help you, some people look at it in a pitying way, 'why have you come out?' they'll say right there and then.

Sawang Srisom, TFA

Some projections of pity transcended into acts of charity and *hai taan*, as a good deed or 'favour' as noted by Wiraman Niyomphol.

Yeah, ok, whoever collects the fare – it's always a great favour to many of us when he or she says 'oh no we don't charge you'. You know, it's a great *favour*. I don't like that kind of mentality. I don't need to be exempt from paying...But people don't get the point. They say 'Why are you so picky? They want to be nice to you, why are you so picky?' I say, well I would rather pay money, I would rather pay for the bus and be treated equally and receive superb services. I don't want to be treated as a beggar.

Wiraman Niyomphol

Some of the disabled research participants, as above, strongly rejected projections of *songsarn* and offers of charity, preferring to pay the fare rather than accepting charity and feeling like ‘a beggar’. On the other hand, for others, the rejection of charity was motivated less by their own lowered status and was instead explained by *greaahng jai* towards to service providers and others. They didn’t feel that they needed the reduced fares and so feelings of *greaahng jai* arose in relation to receiving ‘special treatment’ where the authenticity of their disability might be questioned, or where someone else more ‘in need’ might be more entitled.

At first I was embarrassed, because on one side I thought that we were getting more rights than other people but then on the other side I think, well...for example when I get on the BTS, and there’s a special seat for disabled people right? And, well my body isn’t so strong but because it’s not obvious what’s wrong with me I think that I should let people who are worse than me take it. We already get the right to travel for free, it’s already free, so like for other disabled people who are worse than me, it’s better to let them use this service than me. I feel that I don’t want to take advantage of other people.

Focus Group A, see Appendix X

Similarly, from the interviews it appeared that other participants were *greaahng jai* towards the staff who were made to enforce the assistance policies so as not to make their jobs more difficult. It is possible that they also understood that arguing with staff members who enforced policies decided higher up in the company would not be effective in changing this and so accepted the charity in order to avoid conflict. Fear of inconveniencing others or creating conflict, even when it was their right to reject assistance or take advantage of the mechanisms designed to help them, resulted in *greaahng jai* for many of the participants. For example, as noted earlier, the mothers of the autistic adults didn’t ‘dare’ to bother other passengers by asking them to vacate disability-reserved seating. This was possibly because it risked being faced with confrontation or loss of face if there was resistance on the part of the passenger being asked to vacate, especially when the disability was not visible and so an explanation might have to be given.

4.3. Interaction and collaboration

Progress from Involvement of Disabled People in the Planning Process

There was evidence of tangible outcomes of the collaboration to improve public transport. MRTA reported that they had taken the suggestions of the D/deaf and hearing-impaired community and created a visual light-up map system on their new

line to indicate which station the train was currently at. This was confirmed by observation (see fig. 12)



Image. 9. Communications system showing current station on the MRT, purple line, opened 2016, taken 2017.

During the interview, the representative from NADT said that the main thing the D/deaf community had requested was visual aids for accessing information. Having this implemented by a service provider signifies progress in the collaboration for improvement. By involving disabled people in the planning process, accessible communications systems were integrated into the new system, which will be of benefit to all users, not only D/deaf passengers.

Hierarchical and Ineffective Management

From the interviews it became apparent that a hierarchical style of management within Thai organisations and within society prevents influential individuals from meeting disabled people and being able to hear their opinions during the collaboration process. The TAB representative, Peerapong Jarusarn, noted that the every day business of the decision makers is not related to blind and visually

impaired people and they don't generally get to meet or talk to them. Therefore, when they are making decisions that affect blind and visually impaired people they often follow their own beliefs that are informed by ideas of charity.

It was noted by Monthian that a hierarchical style of management prevents cross-organisational and cross-ministerial collaboration. As noted in chapter two, the main ministry responsible for disability issues is the MSDHS but issues relating to accessibility of public transport intersect with the responsibilities of the MoT. The representative from MoT, Pariya Wesabut, and NADT representative Kaewkul Tantipisitkul also agreed that there was a need for cross-ministerial collaboration on issues relating to accessibility and disability, to prevent work being duplicated or missed altogether. The indication was that a hierarchical way of working prevented related ministries collaborating effectively to push forward with progress in implementing Thai accessibility laws.

In relation to ministerial control over service providers, the representatives from the MoT and TFA acknowledged that there were some issues in progress relating to the interpretation of disability laws. Private service providers, such as the BTS and some bus services, lie somewhat outside the control of the government. Pariya said that the MoT can give accessibility improvement recommendations but not enforce them and so service providers have a level of choice in implementing suggestions. According to TFA this results in service providers installing equipment that has not been recommended by DPOs and isn't suitable for use: for example, installing stair lifts that require staff assistance and break regularly instead of ramps which do not. Whilst there are undoubtedly budget and engineering constraints in creating accessibility solutions to existing transport systems, the lack of government control allows service providers to prioritise budget and ease over equality of access.

Collaboration between government and non-government affiliated DPOs was also reported to be restricted by the bureaucratic hierarchy. For example, APHT was considerably less active in the movement for accessible public transport and the representative, Kittipong Hadtawagarn, acknowledged that APHT were not accessibility experts like TFA. However, as the national association for physically disabled people, there was a preference by government and service providers to deal with them rather than non-government affiliated DPOs.

They have money, they have power, because they're the designated organization of the government. Like, they should be the organization who are credible and are able to work with the government better than us.

Sawang Srisom, TFA

According to members of TFA, Pariya and Monthian the lack of formalisation of the movement and lack of involvement of the national associations impacted the effectiveness of the campaign for accessible public transport and its ability to mobilise other disabled people to join the movement. Not seen as a legitimate organisation to be included in the collective collaboration and political dialogue to improve accessibility to public transport, TFA have been limited in their capacity to create change within the confines of the hierarchical way of working of government and service providers. By challenging this, TFA have not only challenged the status quo of accessibility to public transport but have challenged the status quo of the hierarchy and politically legitimised themselves as an authority on accessibility, despite not being seen as the 'designated' disability organisation like the national association. Therefore, they have been able to effectively use collective action to raise accessibility on the political agenda and be included in the collective collaboration alongside the national associations, ministries and transport service providers.

However, in comparison to the bilateral collaboration, like the one between TAB and the BTS, this collaboration appears to be less effective in creating solutions to accessibility issues for disabled people. TFA representatives noted that the meetings for the OTP project, Transport for All, did not allow enough time for the voices of DPO members to be heard and as a result issues constantly resurfaced. The presence of disabled people during meetings to discuss disability issues was also considered to sometimes be more for appearances than to foster effective collaboration, although this was not specifically about public transport meetings.

It's like they take them along to be like 'Hey, I've brought disabled people along' to participate or something but in the end...and they don't have enough power to...like our voices aren't heard earnestly. It's like this still.

Issavara Sirirungruang

Additionally, during the interviews, TAB representative, Peerapong, and Issvara both noted that the collective collaboration between DPOs, service providers and government was characterised by a hierarchical management style. Peerapong noted that at meetings influential individuals are not often in attendance and so 'it's difficult to appeal for anything important'. Despite the court ruling that lifts had to

be installed at all stations, progress is extremely slow because there is little pressure for service providers to improve accessibility. By refusing to collaborate bilaterally with DPOs or send high-level representatives to meetings they can avoid encounters that would result in losing face.

Enforced Dependency

During the research a strong theme that arose was one of assistance policies for disabled people. According to TAB there are three policies belonging to the BTS that affect visually impaired passengers in particular. Firstly, visually impaired passengers travelling alone must have a member of staff guide them through the station; secondly, they are not allowed to use the escalators but must use either the stairs or lifts, and thirdly, they can only alight into the first carriage of the train.

The services were developed under the assumption and beliefs that blind people needed guiding and leading and this was really easy. Until one day, TAB had nothing to do with it, with the belief that blind people can't do anything and are limited in many ways, there was a service provider on the executive board – he had power so people listened. He said escalators weren't good for blind people, it's too easy for them to be caught by them and they don't know when it's the end of the escalator.

Peerapong Jarusarn, TAB

This forced reliance on staff is unnecessary according to the visually impaired participants who took part in the research and TAB. They were frustrated with the regulations because when arriving at stations their independence is not only reduced (having independently carried out the rest of their journey) but can reduce the comfort of their journey (reducing likelihood of being able to sit down) also can add significant amounts of time on to their travel chain; waiting times of up to half an hour according to one visually impaired focus group participant.

From the research it appears that assistance policies are mainly directed at visually impaired people. However, another policy that enforces reliance on staff is staff assistance to use the lifts at BTS stations. By locking the lifts people who need to use them must call for a staff member to assist them and then wait for them to arrive. This policy particularly affects physically disabled passengers who are unable to use stairs or escalators to access stations, although visually impaired participants also reported that they were made to use lifts as well, even when they would prefer to use stairs or escalators. According to the representative from NADT this is typical of service-provider thinking.

Maybe they don't think about if a deaf person travels what's it like? If a blind person travels what's it like? They will use say in the manuals that will be someone to help but they don't think about how travelling on your own could be.

NADT interview

Service provider policy that is based on a model of enforced assisted travel is reflective of the medical and charity models of disability. This indicates that the collaboration between service providers and DPOs has not yet been wholly effective in creating accessibility solutions that meet the needs of disabled passengers and are based on the social model of disability.

4.4. Discussion

The Realities of Public Transport

It is evident from the findings that a lack of understanding and negative attitudes towards disability, and non-physical disability in particular, act as discouragers and in some cases, barriers to travel. This is significant because, although acknowledged as a need in OTP's strategy to improve public transport (2015) there is little evidence of attitude being considered as a barrier to the implementation of mechanisms to improve accessibility to public transport in Bangkok. As such, there was an interaction between barriers and enablers; for example, negative attitudes could impede the effectiveness of mechanisms implemented to improve access and experiences of public transport for disabled people, such as inhibiting use of travel cards and access to disability-reserved seating. Furthermore, attitudinal barriers create anxiety about travel, which can both impact on mental health and leave the disabled person, or their carer, not wanting to travel at all. This echoes the findings of Nickpour and Jordan (2013) who found that psychosocial factors such as negative experiences and stories from others can act as barriers to travel in the same way or even more so than physical barriers.

As suggested in the first chapter, conceptualisations of disability are strongly linked to the body, and therefore non-visible disability may not be understood in the same way as visible disability. This might partially explain refusal of disability cards by service providers, questioning of the authenticity of a person's disability and reduced fares being automatically offered to those with visible disabilities. Those with visible disabilities were more easily 'authorised' by service providers for access to disability benefits than those with invisible disabilities, and participants felt their disability authenticity was more frequently questioned. It can be surmised that lack of

awareness of different types of disability is a contributing factor to these reactions. However, it is possible that alternative explanations of non-visible disability, such as loss of *khwan* or evil spirits as noted by Burnard et al. (2006), in the study of mental-health worker's beliefs, might also help to explain questioning, negative or fearful reactions from the public and service providers and the resulting refusal of services. It is unclear how much awareness is present of non-physical disability or if training is provided for public transport service staff.

As well as negative attitudes and lack of awareness, some participants also noted positive attitudes of service providers that helped make travel easier. The presence of *metta*, or compassion, was noted in the literature review as a possible enabler to disabled people during travel, such as the findings of Drury (2011) that *metta* can act as an enabler to the implementation of inclusive education. However, it was unclear how much of these attitudes were the result of staff training and how much came from the *metta* or personal experiences of individuals. Prior research (Aarhaug and Elvebakk, 2015; Tillman et al., 2013; Wilson, 2003) suggests that the role of staff, such as bus drivers in facilitating travel of disabled people, and particularly cognitively disabled people, is essential and therefore further investigation on how to institutionalise training in public transport system services would be beneficial.

As noted in previous chapters, lack of mobility can have a significant impact on a person's life through fewer opportunities for work, education, healthy eating and participation in society and politics. For many of the participants public transport was their only option for travel and therefore the barriers to travel led to exclusion in other aspects of their lives. This was also linked to issues in the mobilisation of disabled individuals in the campaign for accessible public transport, as reported by the representative from APHT. Since often rallies and meetings were held in the city it was costly and time consuming for some physically disabled people to join if they were using public transport to travel. This is indicative of a circle of exclusion, whereby mobility exclusion leads to political exclusion.

Physical accessibility was reported as the biggest barrier to travel for wheelchair users as several barriers may present in a single travel chain. Comments during interviews with physically disabled participants supported the findings of Prasertsubpakij and Nitivattananon (2012) that reliance on taxis as feeder transport counteracts free travel on mass transit transport systems. In addition, a physically inaccessible environment leads to dependency on others for help, which then can give rise to further attitudinal barriers. Information from interviewees supported the

ideas laid out in chapter one that negative karma was an important component of the Thai conceptualisation of disability and used it to explain and even justify inaccessible physical environments. However, both the MoT and MRT representatives displayed social model attitudes towards equitable access to physical environments, implying that there is some social model awareness on a macro level and service provider level.

On the other hand, reports from the TAB and TFA representatives, as well as experiences of focus group participants indicated that other service providers, namely the BTS and buses, appeared to have less social model awareness. This was clear from the enforced-dependency policies aimed at visually impaired and blind passengers. According to the TAB representative these policies were a result of a top-down approach and medical and charity model perspectives of disabled people. This was also linked to the third major theme of interaction and collaboration (see below for more details).

Similarly, schemes to improve mobility of physically disabled people, such as the accessible taxi scheme, are based on a segregated model of inclusion, whereby 'special' services are created for disabled people rather than existing services adapted to reflect the social model of disability. This may pose an interim solution considering the time and cost barriers incurred by the physically inaccessible environments, however it is not an integrated or sustainable solution likely to meet the travel needs of the wider physically disabled population, especially if that includes the ageing population. Additionally, it is essential that barriers are considered in relation to the whole travel chain rather than individually (Jolly et al., 2006) and by taking this approach, barriers to travel could be more effectively and sustainably addressed.

Discussion on Mobilisation and the movement

DPO and government members acknowledged that legislation and use of legal mechanisms have been major enablers to progress in improvements to public transport accessibility for disabled people. Legislation has been used in both collective action, led by DPO TFA, and in individual action, like the visually impaired individual from DPO TAB. This was similar to the case discussed by Perlin (2012) of the implicated actor who used the legal system to bring about policy change in Colombia. However in the case of Thailand, rather than resulting in direct

change, the use of legal mechanisms has raised the profile of the campaign for accessible transport via media interest, which allowed a bilateral dialogue to open up between the service provider and DPO. Although this has not been entirely successful in reversing the assistance policies for visually impaired and blind passengers, the use of legal mechanisms has gone some way to empower disabled people and allow DPOs to be taken seriously in their demands for disability rights.

On the other hand, mobilising disabled individuals and national associations to get involved in the campaign for accessible transport and use of legal mechanisms has been challenging. Conflict avoidance appeared as a major theme to explain this reluctance. It was noted in the literature review that conflict avoidance is preferred to public expression of self-interest in Thai society (Brummelhuis, 1984) and fear of upsetting relations within the hierarchy or the 'social fabric', as expressed by Monthian, may also play a role in this way of thinking. This was evident on many levels. Disabled people experiencing barriers to enabling mechanisms, acts of *haai thaan* or enforced dependency when using public transport are left with the option of being passive and accepting charity that they do not want to receive or actively refusing charity and demanding rights. Accepting charity can be influenced by feelings of *greaeng jai* towards service providers and other passengers and conflict avoidance. Demanding rights or rejecting charity, on the other hand, can lead to projections of aggression and ungratefulness and lead to loss of face and conflict.

Chanboon (2012) identified that expected personal benefit outcomes influenced disabled people's willingness to get involved in the disability rights movement. This did not come up as a major theme from the findings but it is possible that this was a factor. Especially considering the high cost-benefit ratio for physically disabled to come and join the campaigns due to the cost of public transport, it is possible that this factor combined with the slow progress and setbacks to physical accessibility of public transport has discouraged individuals from taking part. There was also indication from the TFA interview that some disabled were preoccupied with their jobs, which was a reason for non-involvement. This echoes the argument of Mulder (1997) that urban individualism, or one's own goals, is prioritised above social responsibility. Additionally, fear of being associated with court proceedings goes against the social norm of conflict avoidance and was stated by several participants as being a reason for many to avoid joining the movement.

Discussion on Interaction and Collaboration

Even though social model thinking is evident on a macro and, to some extent, the service provider level, it is possible that the social and bureaucratic hierarchy interferes with the effectiveness of implementation. As McCargo points out, universalist policies (such as a rights-based approach to disability) may struggle to fit into the particularist Thai-centred worldview, which aims to preserve the established order (2004). A collaboration that reverses the top-down approach by seeking to give power to those further down the hierarchy may be seen to threaten the ‘establishment’, defined by Monthian as the mutually understood set of societal rules and respect.

The findings supported the findings of Komin (1998) to some extent, that preserving relationships was priority for government employees and therefore may come above the promotion of other values. Although in the case of this research it also extended to the government affiliated national associations and perhaps to a lesser extent other DPOs. Employing ‘indirect manipulative strategies’, as put forward by Brummelhuis (1984, p.50), was evident as concepts of *greahng jai*, shame, *rak saa naa* [saving face] and conflict avoidance were implicated in the collaborative interactions between DPOs, service providers and the government. Whilst these strategies could sometimes impede progress, it is not to say that collaboration that is mindful of hierarchical relationships cannot be successful nor does it suggest that promotion of the social model of disability cannot align with traditional Thai norms. However, for it to be effective the collaboration must simultaneously promote a social model of disability and carefully navigate established socio-cultural norms. This is reflective of Cohen’s idea of a dualism of cultures, whereby the traditional exists alongside the modern and that there is some flexibility in how they coexist (1991). Considering that the latest and more social model aligned Thai disability definition is only a decade old at the time of writing, and almost a decade younger than the revised ICIDH-2 this flexibility is still perhaps being negotiated.

When DPOs, or indeed any CSOs, are willing to challenge the rules of this interaction by demanding to be included in planning processes it can conflict with the ‘traditional’ norms set within the societal hierarchy. Demanding of rights via petitions, use of the courts and media, campaigns, lobbying and rejecting fundraising practices based on concepts of charity can be seen as aggressive, ungrateful or threatening to socio-cultural norms. However, it is evident from the findings that progress is being made via this approach and, similarly to the Assembly of the Poor,

albeit more 'ad-hoc' according to Monthian, has resulted in negotiations between those demanding change and those in control.

A top-down approach may also enable progress, provided that the people at the top understand the social-model of disability and see it as their duty to promote it, such as Mothain. As noted by Selby (2012) duty and loss of face are linked and therefore can be used to achieve one's goals. Loss of face was evidently at play in the interaction between DPOs and service providers and gave DPOs leverage. Although this mechanism was less effective when meetings were avoided, perhaps when threat of loss of face was too great. On the other hand a top-down approach where there is a lack of social model awareness and no or little involvement of disabled people in the planning process can lead to enforced dependency policies like the ones imposed on visually impaired and blind passengers on the BTS. Rather than offering the service as a choice for passengers to enable travel, enforcing this policy reflects the medical and charity models of disability and can act instead as a barrier; increasing inconvenience and travel time, as well as frustration for the passenger. This in turn can lower the position of the disabled passenger by reinforcing passivity, making them the object of charity, setting them apart from other passengers and impacting on other aspects of their life by increasing travel time.

According to the findings, the socio-cultural concepts and hierarchically-governed social interactions critiqued in the first and second chapters have some influence on the both the experiences of disabled people using public transport and the efforts of the disability rights movement to improve these experiences. The following section reflects on the findings discussed and analysed in this chapter and draws some conclusions based on the research findings.

Chapter 5 – Conclusion

5.1. Introduction

The research aims were to explore the every day experiences of disabled people using public transport and investigate the conversation between DPOs, service providers and government in implementing changes to improve accessibility. An examination of the approaches of past research uncovered that there was a need for participatory research focussed on the psychosocial side of accessibility to public transport for disabled users. This informed the central role of user perspective, as previously outlined by Ståhl (1997), which also denoted the need for disabled user participation through focus groups and interviews. The use of human participants and vulnerable adults in the research also led to considerations of how the research could be ethically undertaken and how to facilitate the participation of disabled people in the research without compromising good ethics. Elite interviews were also used in order to gather specialist information from informants with specific knowledge of the subject area due to their positions, either as disabled people part of the disability rights movement or DPOs, or as actors in the facilitation of the improvement of public transport for disabled people in Bangkok.

5.2. Contributions and Main Conclusions

The interdisciplinary approach taken in the research allows it to contribute to the fields of Thai Studies, Disability Studies, Transport Studies and Development Studies. By using an analytical framework rooted in Thai Studies the research highlights the value of undertaking cultural analysis of rights-based approaches to development and the challenges in operationalising universal policies in different country contexts. Furthermore, the research uses a qualitative approach to study public transport accessibility, thereby representing experiences of disabled people that might otherwise go undocumented using a quantitative methodology, as is typical of the literature on public transport.

The main conclusions are as follows:

1. Thai conceptualisations of disability are still largely rooted in the medical and charity models and this underpins dealings with disability in Thailand.

Thai conceptualisations of disability based on socio-cultural concepts of *songsarn*, karma and the body remain dominant in Thai society, which impedes promotion of a

social model approach to disability. From the findings it is clear that this presents itself, at perhaps its best through a willingness to offer assistance, which in some instances helps individuals to navigate and overcome their disabling environments. However, since this conceptualisation of disability is not based on a rights-based approach, nor rooted in the social model of disability, it also leads to mass exclusion of disabled people from public space and places huge limits on their mobility due to negative attitudes and disabling spaces. The severity of disability caused depends on a complex interaction between the individual's personal characteristics and impairment and that of the environment they are in, the activities they are performing and the attitudes and actions of the individuals and organisations with which they interact. This explains why some systems are more or less disabling for people with different types of impairment, at different times and in different situations.

Additionally, approaches to accessibility are still largely rooted in ideas of individualistic karmic advantage rather than a rights-based approach reflective of ideas of collective karma. This contributes to lax adherence to and skewed interpretation of accessibility regulation, and overall poor physical and non-physical accessibility in public spaces. Although a social model approach to accessibility is present in the rhetoric surrounding public transport accessibility improvements, it is superseded by conceptualisations of disability rooted in an individualistic karmic worldview. Whilst some DPOs challenge this conceptualisation of disability, other DPOs inadvertently support it through fundraising practices utilising *tham boon*. These practices necessarily rely on views as the disabled person as passive, helpless and an object of negative karma, *songsarn* and *tham boon*. Since the disability rights movement is primarily led by disabled people, the way in which DPOs present themselves through public activity can shape the way in which disabled people are viewed and treated. A re-evaluation of fundraising activities that rely on charity and reinforce medical models of disability is necessary by all DPOs, and particularly the government-affiliated national associations, which have more involvement in policy and planning at a national level.

2. Non-effective incorporation of disabled people and hierarchical management structures can prevent progress in accessibility planning.

In regards to public transport planning, the findings show an indication of charity and medical model thinking in service provider behaviour and policy implementation was exacerbated by ineffective or absent inclusion of disabled people in planning processes, often informed by a top-down approach. There was an indication that

bilateral negotiations between DPOs and service providers was more effective than network negotiations in meetings under the OTP project, for example, the training sessions led by TAB for station staff on how to lead blind and visually impaired passengers.

However, the bilateral negotiation identified had come about as a result of individual and collective action of DPOs and is not institutionalised across service providers. Hierarchical management is identified as a barrier to progress in this overall collaboration and a top-down approach sometimes prevented the suggestions of disabled people, as the 'owners of the problem' (Peerapong, TAB interview, Appendix A), from being effectively heard and understood by the decision-makers. Even when DPO members were involved in planning processes, either through bilateral or network negotiations, absence of key decision-makers from planning meetings impacted on the effectiveness of the negotiation process. The result is a persistence of enforced-dependency assistance policies, negative attitudes, ineffective solutions and slow progress to improve physically inaccessible environments.

It is clear that there is limited capacity of legislation to force service providers to comply with accessibility laws due to lack of penalties and unclear interpretation of the law. This highlights the issues in implementation of universalist policies and a need for contextual and cultural consideration, especially in non-Western countries. By bringing all service providers under control of relevant Ministries it would reinforce the duty of service providers and increase accountability, helping to enforce accessibility policies and institutionalise the involvement of disabled people in the planning stages of public transport developments.

Furthermore, although there is presence of enablers to travel, including positive attitudes, staff training and reduced travel costs, these are not always effective due to the interaction with various barriers to travel. It is recommended that implementation of mechanisms to improve accessibility to public transport systems for disabled people consider, not only physical accessibility, but also the impact of psychosocial barriers. A more nuanced approach to training and awareness building of service providers led by DPOs that focus on these issues would be beneficial.

This is reflected in the experiences of some disabled people and carers when using public transport, whereby negative attitudes can impede enabling mechanisms by presenting as psychosocial barriers or discouragers to travel alongside physical accessibility, time and cost. This further impedes the progression of Thai society in

accepting a positive attitude towards disabled people, as they are more likely to remain immobile and therefore less visible than their non-disabled counterparts, thus reinforcing their low status within the Thai societal structure and contributing to the circle of exclusion.

3. Involvement of disabled people in the disability rights movement is impeded by socio-cultural norms and lack of mobility caused, in part, by inaccessible public transport.

Thai socio-cultural concepts such as conflict avoidance, loss of face and *greaeng jai* can impede mobilisation of individuals and DPOs to challenge charity and medical attitudes to disability. Legislation has been both a help and hindrance: use of the courts has enabled a platform for DPOs to challenge both exclusion and the image of disabled people as passive recipients of charity, but simultaneously has discouraged others from joining the movement and contributed to depictions of disabled people involved in the campaigns as aggressive and ungrateful.

This is significant because it highlights the need for bilateral planning communication between service providers and DPOs to be formalised, which would also validate the advocacy role of national associations and reduce feelings of *greaeng jai* and fear of penalisation. Formalising the mechanisms for collaboration could also improve progress in mobilisation of individuals and encourage disability culture development.

Paradoxically, inaccessible public transport leads to political exclusion of disabled people by discouraging or barring mass physical participation in protests, meetings and rallies in Bangkok that might pressure service providers and the government to improve accessibility. Subsidised private and public transport and assistance costs may help to partially alleviate this problem but can lead to further segregation of disabled people and is not a sustainable solution. There needs to be an integrated, strategic approach to improving the lives of disabled people in every aspect of society, of which mobility is only one element, and involving the disabled community in decision making from planning inception instead of retrospectively.

5.3. Limitations of the research

As the research was based on a small sample, it does not claim to be able to represent the views or experiences of all disabled people or stakeholders. Conclusions are

drawn from the data collected from these participants and interpretation is likely to be influenced by the observations and experiences of the researcher. Therefore, the findings are only able to provide some specific insight into what is one part of a wider and more complex issue, and further research should be considered in the evaluation and improvement of public transport for all user groups in Bangkok.

5.4. Recommendations for further research

The research findings outlined the need for service-provider training on non-visible disability, such as cognitive impairment and autism, alongside training on other types of disability. There was some evidence of user-led training by national associations, such as TAB, and research into how to duplicate training from other national associations and DPOs to service providers and the impact of this on user experiences would be beneficial.

A sub-theme that arose from the findings was that of fundraising by DPOs via Thai temples, and the implications this has for the promotion of the social model of disability over the charity model. Considering the importance of DPOs in the wider disability rights movement further research on methods of fundraising would help to explore how Buddhism and rights-based approaches to human rights coexist. This would also contribute to greater understanding of how belief systems interact with conceptualisations of disability: an area that is currently under researched in the field.

Finally, the findings indicate that culture and context can affect the implementation of universalist human rights policies, and so development of research that takes a socio-cultural perspective is necessary.

References

- Aarhaug, J, Elvebakk, B. 2015. The impact of Universally accessible public transport—a before and after study. *Transport Policy*. 44. P.p. 143–150.
- Adeel, M, Yeh, A.G.O, Feng, Z. 2014. Towards an Inclusive Public Transport System in Pakistan. In: *International Conference on Town Planning and Urban Management 2014 (ICTPUM14)*. 29-30 September 2014. Engineering University Lahore, Pakistan.
- Ahmad, M. 2015. Independent-Mobility Rights and the State of Public Transport Accessibility for Disabled People: Evidence From Southern Punjab in Pakistan. *Administration & Society*. 47(2). P.p. 197–213.
- Anderson, B. 1998. *The Spectre of Comparisons: Nationalism, Southeast Asia and the World*. London and New York: Verso.
- Apinunmahakul, A. 2014. Religious and Non-religious Giving in Thailand: An Economic Perspective. *Journal of Economics and Sustainable Development*. 5(3). P.p. 111-118.
- Bamber, S. 1987. Metaphor and Illness Classification in Traditional Thai Medicine. *Asian Folklore Studies*. 46(2). P.p. 179-195.
- Bandhmedha, N. 1998. *Thai Views of Man as a Social Being*. In: Pongsapich, A. 1998. *Traditional and Changing Thai World View*. Bangkok: Chulalongkorn University Press.
- Barnes, C, Mercer, G. 2003. *Disability*. Cambridge: Polity Press.
- Barnes, C. 2003. *Disability Studies: what's the point?*. 'Disability Studies: Theory. Policy and Practice' Conference, September 4 2003, University of Lancaster.
- Becker, H.S. 1982. Culture: A Sociological View. *Yale Review*. 71. P.p. 513-527.
- Bell, J. 2010. *Doing your Research Project: A Guide to First-Time Researchers in Education and Social Science*. 5th Edition. [Online]. Open University Press. [21/08/2017]. Available from: <https://www.dawsonera.com/readonline/9780335239146>.
- Bertolini, L., Le Clercq, F., Kapoen, L., 2005. Sustainable accessibility: a conceptual framework to integrate transport and land use plan-making: two test applications in the Netherlands and a reflection on the way forward. *Transport Policy*. 12. P.p. 207–220.
- Blichfeldt, B.S, Nicolaisen, J. 2011. Disabled travel: not easy, but doable. *Current Issues in Tourism*. 14(1). P.p. 79-102.
- Bloor, M, Frankland, J, Thomas, M, Robson, K. 2001. *Focus Groups in Social Research*. London: Sage Publications Ltd.
- BMTA, 2017. *Gaan baaw ri gaan*. BMTA website. [Online]. [Accessed 3/10/2017]. Accessed from: <http://www.bmta.co.th/?q=th/services>.

Borchert, T. 2014. Mediums, Monks and Amulets: Thai Popular Buddhism Today by Pattana Kitiarsa (review). *Journal of Social Issues in Southeast Asia*. 29(1).

BTS. 2017. *Structure of Routes and Stations*. [Online]. [Accessed 23/05/2017]. Available from: <https://www.bts.co.th/corporate/en/02-structure02-3.aspx>.

BTS. 2017a. *FAQs*. [Online]. [Accessed 23/08/2017]. Accessed from: <http://www.bts.co.th/customer/en/08-faq.aspx>

Brewer, J.D. 2000. *Ethnography*. New York: Open University Press.

Bryman, A. 2016. *Social Research Methods*. 5th Edition. Oxford: Oxford University Press.

Brummelhuis, H. 1984. Abundance and Avoidance: an interpretation of Thai individualism. In: Brummelhuis, H, Kemp, J.H. 1984. *Strategies and Structures in Thai Society*. Amsterdam: University of Amsterdam.

Bruun, O, Jacobsen, M. 2000. *Human Rights and Asian Values: Contesting National Identities and Cultural Representations in Asia*. Surrey: Curzon Press.

Bualar, T, Ahmed, 2009. Why does Community-Based Rehabilitation fail physically disabled women in northern Thailand? *Development in Practice*. 19(1). P.p. 28-38.

Bualar, T. 2010. Disability rehabilitation policy in Thailand: explaining why it has come under fire. *Journal of Asian Public Policy*. 3(1). P.p. 111-117.

Bualar, T. 2015. Employer dilemma over disability employment policy in Thailand. *Journal of Public Affairs*. 15(3). P.p. 231-236.

Bualar, T. 2016. What has gone wrong with inclusive education in Thailand? *Journal of Public Affairs*. 16(2). P.p 156–161.

Bualar, T. 2016a. Municipality and food security promotion for disabled people: evidence from North-eastern Thailand. *Development in practice*. 26(4). P.p. 481-491.

Buckup, S., (2009). *The price of exclusion: The economic consequences of excluding persons with disabilities from the world of work*. ILO Employment Sector Working Paper, No. 43.

Bulmer, M. 1993. Interviewing and Field Organisation. In: Bulmer, M, Warwick, D.P. 1993. *Social Research in Developing Countries: Surveys and Censuses in the Third World*. London: Routledge. P.p. 205 – 217.

Bulmer, M, Warwick, D.P. 1993. *Social Research in Developing Countries: Surveys and Censuses in the Third World*. London: Routledge.

Burley, M. 2013. Retributive karma and the problem of blaming the victim. *Int J Philos Relig*. 74. P.p. 149–165.

Burnard, P, Naiyapatana, W, Lloyd, G. 2006. Views of mental illness and mental health care in Thailand: a report of an ethnographic study. *Journal of Psychiatric and Mental Health Nursing*. 13. P.p. 742–749.

Chan, K.W. 2008. Deconstructing the Asian welfare model: social equality matters. *Journal of Asian Public Policy*. 1(3). P.p. 302-312.

Chanboon, W, Thongyou, M, Ayuwat, D. 2012. The Participation in Social Movement of Disable People. *KKU Res J (GS)*. 12 (2). P.p. 105-115.

Cheausuwantavee. 2005. Comparative study in disability law of Thailand, United Kingdom and United States of America. *Journal of Ratchasuda College for Research and Development of Persons With Disabilities*. 1(2). P.p. 1-20.

Cheausuwantavee, T, Cheausuwantavee, C. 2012. Rights, Equality, Educational Provisions and Facilities for Students with Disabilities in Thailand: Legal and Practical Perspectives over the Past Decade. *Disability, CBR and Inclusive Development*. 23(1). P.p. 70-91.

Clark, L, Marsh, S. 2002. *Patriarchy in the UK: The Language of Disability*. [Accessed 03/01/2017]. Available from: <http://disability-studies.leeds.ac.uk/files/library/Clark-Laurence-language.pdf>.

Crooks, V, Chouinard, V. 2006. An embodied geography of disablement: Chronically ill women's struggles for enabling places in spaces of health care and daily life. *Health and Place*. 12. P.p. 345-52.

Committee on the Rights of Persons with Disabilities. 2015. List of issues in relation to the initial report of Thailand. *United Nations*. [19/6/2016]. [Online]. Available from: <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G15/229/93/PDF/G1522993.pdf?OpenElement>.

Daniere, A.G. 1995. Transportation planning and implementation in cities of the Third World: the case of Bangkok. *Environment and Planning C: Government and Policy*. 13. P.p. 25-45.

Department of Empowerment of People with Disabilities. 2016. *Department of Empowerment of People with Disabilities website*. [Online]. [Accessed 5/10/2016]. Available from: <http://dep.go.th/en/role-and-responsibility>

Department of Empowerment of People with Disabilities. 2015. *Raai ngaan bpra jam bpee 2558 grohm sohng seerm lae phat tha naa khoon na phaap chee wit khohn phi gaan*. [Online]. [Accessed 5/10/2016]. Available from: <http://dep.go.th/th/publishdocument/รายงานประจำปี-2558>.

Department of Empowerment of People with Disabilities. [Online]. *Persons with Disabilities Empowerment Act B.E. 2550*. [Accessed 28/06/2016]. Available from: <http://dep.go.th/sites/default/files/files/news/2.pdf>.

Department of Empowerment of People with Disabilities. 2012. *Phaaen phat-thanaa khoon-na-phaap chee-wit khohn-phi-gaan haeng-chaat cha-bap thee see 2555-2559*. Bangkok: Department of Empowerment of People with Disabilities.

Disabilities Thailand and Network of Disability Rights Advocates (DTN). 2016. United Nations Human Rights Office of the High Commissioner website. *Thailand CRPD Alternative Report: for the UN Committee on the Rights of Persons with Disabilities*. [Online]. [Accessed 19/6/2016]. Available from: http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=INT%2fCRPD%2fCSS%2fTHA%2f23388&Lang=en.

- Donnelly, J. 1999. *The social construction of human rights*. In: Dunne, T, Wheeler, N.J (eds) *Human Rights in Global Politics*, New York: Cambridge University Press. P.p. 71– 102.
- Drury, C. 2011. *Implementing Inclusive Education in Thailand: socio-cultural barriers and bridges between rhetoric and reality*. Unpublished Masters thesis: University of Leeds.
- Earth, B. 2005. Globalization and Human Rights as Gendered Ideologies: A Case Study from Northeast Thailand. *Gender, Technology and Development*. 9 (1). P.p. 103-123.
- Ellis, J. 2017. Researching the Social Worlds of Autistic Children: An Exploration of How an Understanding of Autistic Children’s Social Worlds is Best Achieved. *Children and Society*. 31. P.p. 23–36.
- Ercoli, S, Ratti, A, Ergül, E. 2015. A Multi-method Analysis of the Accessibility of the Izmir Ferry System. *Procedia Manufacturing*. 3. P.p. 2550 – 2557.
- Evers, H. 1966. The Formation of a Social Class Structure: Urbanization, Bureaucratization and Social Mobility in Thailand. *Journal of Southeast Asian History*. 7(2). P.p. 100-115.
- Gleeson, B. J. 1999. *Geographies of Disability*. London: Routledge.
- Gleeson, B. 2001. Disability and the Open City. *Urban Studies*. 38(2). P.p. 251–265.
- Hanks, L. M. 1962. Merit and Power in the Thai Social Order¹. *American Anthropologist*. 64. P.p. 1247–1261.
- Hanks, L.M. 1975. *The Thai Social Order as Entourage and Circle*. In: Skinner, G.W, Kirsch, A.T. 1975. *Change and Persistence in Thai Society: Essays in Honor of Lauriston Sharp*. New York: Cornell University Press.
- Hawas, Y.E, Hassan, M.N, Abulibdeh, A. 2016. A multi-criteria approach of assessing public transport accessibility at a strategic level. *Journal of Transport Geography*. 57. P.p.19–34.
- Heinze, R. 1982. *Tham Khwan*. Singapore: Singapore University Press.
- Hughes, B. 2001. Disability and the Constitution of Dependency. In: Barton, L. 2001. *Disability, Politics and the Struggle for Change*. London: David Fulton Publishers Ltd.
- Iles, R. 2005. *Public Transport in Developing Countries*. Oxford: Elsevier Ltd.
- Imrie, R. 1996. *Disability and the City: International Perspectives*. London: Paul Chapman Publishing Ltd.
- Ishii, Y. 1986. *Sangha, State, and Society: Thai Buddhism in History*. Honolulu: The University of Hawaii Press.
- Jackson, P.A. 2002. Thai-Buddhist Identity: Debates on the Traiphum Phra Ruang. In: Reynolds, C.J. 2002. *National Identity and its Defenders: Thailand Today*. Chiang Mai: Silkworm Books.

- Jolly, D, Priestley, M, Matthews, B. 2006. *Secondary analysis of existing data on disabled people's use and experiences of public transport in Great Britain*. [Online]. [Accessed 19/08/2017]. Available from: <http://disability-studies.leeds.ac.uk/research/disability-and-public-transport-a-review-of-available-data/>.
- Jones, E.L. 1993. The Courtesy Bias in South-east Asian Surveys. In: Bulmer, M, Warwick, D.P. 1993. *Social Research in Developing Countries: Surveys and Censuses in the Third World*. London: Routledge. P.p. 252 – 260.
- Julien, H, Given, L.M, Opryshko, A. 2013. Photovoice: A promising method for studies of individuals' information practices. *Library & Information Science Research*. 35. P.p. 257–263.
- Jumbala, P, Mitprasat, M. 1997. Nongovernmental development organisations: empowerment and environment. In: *Hewison, K. Political Change in Thailand: Democracy and Participation*. London: Routledge.
- Kaewprom, C, Curtis, J, Deane, F.P. 2011. Factors involved in recovery from schizophrenia: A qualitative study of Thai mental health nurses. *Nursing and Health Sciences*. 13. P.p. 323–327.
- Kirsch, A. 1977. Complexity in the Thai Religious System: An Interpretation. *The Journal of Asian Studies*. 36(2). P.p. 241-266.
- Kisala, R. 1994. Contemporary karma: Interpretations of karma in Tenrikyō and Risshō Kōseiikai. *Japanese Journal of Religious Studies*. 21(1). P.p. 73–91.
- Komin, S. 1998. *The World View Through Thai Value Systems*. In: Pongsapich, A. 1998. *Traditional and Changing Thai World View*. Bangkok: Chulalongkorn University Press.
- Kraemer J.D, Benton C.S. 2015. Disparities in road crash mortality among pedestrians using wheelchairs in the USA: results of a capture–recapture analysis. *BMJ Open*. 5. P.p. 1-8.
- Krairiksh, N. 2016. *Draft constitution: devoid of disability rights*. Prachatai English. Online [26/07/17]. Available from: <http://prachatai.org/english/node/6117>.
- Kramsch, C. 1998. *Language and Culture*. Oxford: Oxford University Press.
- Kuhonta, E.M., Singpeng, A. 2014. Democratic Regression in Thailand: The ambivalent role of civil society and political institutions. *Contemporary Southeast Asia*. 36(3). P.p. 333-355.
- Kwok, J.K.F, Chan, R.K.H, Chan, W.T. 2002. *Self-help Organisations of People with Disabilities in Asia*. Connecticut: Greenwood Publishing Group, Inc.
- Lamichhane, K. 2015. *Disability, Education and Employment in Developing Countries: From Charity to Investment*. Dehli: Cambridge University Press.
- Lättman, K, Olsson, L.E, Friman, M. 2016. Development and test of the Perceived Accessibility Scale (PAC) in public transport. *Journal of Transport Geography*. 54. P.p. 257–263.

- Lee, Y. 2017. Thailand has world's most congested roads: Survey. *Strait Times*. [Online]. 22/02/17. [Accessed 04/08/17]. Available from: <http://www.straitstimes.com/asia/se-asia/thailand-has-worlds-most-congested-roads-survey>.
- Litman, T. (2002). Evaluating transportation equity. *World Transport Policy & Practice*. 8. P.p. 50-65.
- Liu, S., Zhu, X., 2004. An integrated GIS approach to accessibility analysis. *Transport GIS*. 8. P.p. 45–62.
- Lubin, A, Deka, D. 2012. Role of Public Transportation as Job Access Mode: Lessons from Survey of People with Disabilities in New Jersey. *Transportation Research Record: Journal of the Transportation Research Board*. 2277. P.p. 90–97.
- Mace, R. 1985. *Universal Design: Barrier Free Environments for Everyone*. Los Angeles, CA: Designers West.
- Manheim, J.B, Rich, R.C, Willnat, L, Brians, C.L. 2008. *Empirical Political Analysis” Quantitative and Qualitative Research Methods*. United States: Pearson Education, Inc.
- McCargo, M. 2004. Buddhism, democracy and identity in Thailand. *Democratization*. 11(4). P.p. 155-170.
- McDaniel, J.T. 2011. *The Lovelorn Ghost and the Magical Monk*. New York: Colombia University Press.
- Mencap. 2016. *What is a learning disability?* [Online]. [Accessed 01/12/2016]. Available from: <https://www.mencap.org.uk/learning-disability-explained/what-learning-disability>.
- Mencap. 2000. *Am I making myself clear? Mencap’s guidelines for accessible writing*. London: Mencap.
- Ministry of Transport. 2015. *The Office of Transport and Traffic Policy and planning (OTP)*. [Online]. [Accessed 12/12/2016]. Available from: <http://www.mot.go.th/about.html?id=12>.
- Missingham, B.D. 2003. *The Assembly of the Poor in Thailand: From Local Struggles to National Protest Movement*. Chiang Mai: Silkworm Books.
- Miyazaki, A.D, Taylor, K.A. 2007. Researcher Interaction Biases and Business Ethics Research: Respondent Reactions to Researcher Characteristics. *Journal of Business Ethics*. 81. P.p. 779–795.
- MRTA. 2016. Sit Thi Bpra Yoht. [Online]. [Accessed 4/10/2017]. Available from: <https://www.mrta.co.th/th/services/tickets/privilege/>.
- Mulder, N. 1997. *Thai Images: the culture of the public world*. Chiang Mai: Silkworm Books.
- Mulder, N. 2000. *Inside Thai Society*. Chiang Mai: Silkworm Books.

Naemiratch, B, Manderson, L. 2009. Pity and pragmatism: understandings of disability in northeast Thailand. *Disability & Society*. 24(4). P.p. 475-488.

Namsiripongpun, W. (no date) *The Implementation of the Convention on the Rights of Persons with Disabilities: A Case of Thailand*. [01/11/2016]. [Online]. Available from: www.unescapsdd.org/files/documents/PUB_CRPD-Paper-X-Thailand-20110121.pdf.

National Statistics Office. 2012. *Disability Survey 2012 – sa-roop phohn tee sam-khan gaan sam ruaat khwaam pii-gaan phaaw saaw 2555*. Bangkok: National Statistics Office.

National Statistics Office. 2014. *Summary of the labor force survey in Thailand: December 2014*. [Online]. [Accessed 15/12/2016]. Available from: http://web.nso.go.th/en/survey/data_survey/240357_summary_December57.pdf.

Neven, A, Braekers, K, Declercq, K, Wets, G, Janssens, D, Bellemans, T. 2015. Assessing the impact of different policy decisions on the resource requirements of a Demand Responsive Transport system for persons with disabilities. *Transport Policy*. 44. P.p. 48–57.

Nickpour, F, Jordan, P.W. 2013. *Mentality Shift in Public Transport – from physical accessibility to psychosocial inclusion*. In: Norwegian Directorate for Children, Youth and Family Affairs. 2013. Trends in Universal Design. Oslo: Norwegian Directorate for Children, Youth and Family Affairs, The Delta Centre. P.p. 82-87.

Noyraiphoom, J. 2014. *Jeng fut-fut – gaaw thaaw maaw phoot ai-diia thaek-see sam-rap phuu phi-gaan lae phuu suung aa-yoo laaeo khaap*. [Online]. [Accessed 23/08/2016]. Available from: <http://www.bluerollingdot.org/articles/lifestyle/185>.

Oliver M, Barnes C. 1998. *Disabled people and social policy: from exclusion to inclusion*. London: Addison Wesley Longman.

Oliver, M. 2013. The social model of disability: thirty years on. *Disability & Society*. 28, (7). P.p. 1024–1026.

OTP. 2015. *Raai-ngaan cha-bap sohm-buun: khrong-gaan seuk-saa gaan phat-thanaa sing am-nuay khwaam-sa-duaak lae pheerm bpra-sit-thi-phaap gaan baww-ri-gaan nai phaak khon sohng sam-rap khon pii-gaan lae khon suung aa-yoo*. Bangkok: OTP.

OTP. 2017. *Transport for All – lak-gaan lae heht-phohn*. [Online]. [Accessed 23/08/2016]. Available from: <http://www.otptransportforall.com/2016/?q=node/8>.

Oxford Reference. 2016. *A Dictionary of Business Research Methods*. [Online]. [Accessed 22/09/2016]. Available from: <http://0-www.oxfordreference.com.wam.leeds.ac.uk/view/10.1093/acref/9780191792236.001.0001/acref-9780191792236-e-366>.

Oxley, P.R. Richards, M.J. 1995. Disability and transport: A review of the personal costs of disability in relation to transport. *Transport Policy*. 2(I). P.p. 57-45.

- Peet, R, Watts, M. 1996. Liberation Ecology: Development, Sustainability and Environment in an Age of Market Triumphalism. In: Peet, R, Watts, M. 1996. *Liberation Ecologies: Environment, Development, Social Movements*. London and New York: Routledge. P.p. 1-45.
- Perlin, M.L. 2012. Promoting Social Change in Asia and the Pacific: The Need for a Disability Rights Tribunal to Give Life to the U.N. Convention on the Rights of Persons with Disabilities. *George Washington University International Law Review*. 44. P.p. 1-37.
- Phongpaichit, P, Piriyarangsan, S, Treerat, N. 1996. *Challenging social exclusion: Rights and livelihood in Thailand*. Geneva: International Institute for Labour Studies.
- Pineda, A. F.V. 2015. Disabilities, the design of urban transport systems and the city: a situational analysis. *Universitas Humanistica*. 81. P.p. 281-304.
- Pongsapich, A. 1998. *Traditional and Changing Thai World View*. Bangkok: Chulalongkorn University Press.
- Prasertsapakij, D, Nitivattananon, V. 2012. Evaluating accessibility to Bangkok Metro Systems using multi-dimensional criteria across user groups. *International Association of Traffic and Safety Sciences (IATSS) Research*. 36 (2012). P.p. 56–65.
- Quine, S, Cameron, I. 1995. The use of focus groups with disabled elderly. *Qualitative Health Research*. 5(4). P.p. 454-462.
- Quium, A. 2014. The Institutional Environment for Sustainable Transport Development. [Accessed 05/10/2016]. [Online]. Available from: http://www.unescap.org/sites/default/files/Article%204_Institutional%20environment%20for%20sustainable%20transport%20development.pdf.
- Reynolds, C.J. 2002. *National Identity and its Defenders: Thailand Today*. Chiang Mai: Silkworm Books.
- Risser, R, Lexell, E.M, Bell, D, Iwarsson, S, Ståhl, A. 2015. Use of local public transport among people with cognitive impairments – A literature review. *Transportation Research Part F*. 29. P.p. 83–97.
- Rosenkvist, J, Risser, R, Iwarsson, S, Ståhl, A. 2010. Exploring Mobility in Public Environments among People with Cognitive Functional Limitations. *Challenges and Implications for Planning, Mobilities*. 5(1). P.p. 131-145.
- Rukwong, P. 2008. Lived experience of middle-aged women living with a disability in Isaan, Thailand. *Nursing and Health Sciences*. 10. P.p. 59–64.
- Samudavanija, C. 2002. *Thailand: State-building, democracy, and globalization*. Bangkok: Institute of Public Policy Studies.
- Schlingensiepen, J, Naroska, E, Bolten, T, Christen, O, Schmitz, S, Ressel, C. 2015. Empowering people with disabilities using urban public transport. *Procedia Manufacturing*. 3. P.p. 2349 – 2356.

Scholte, J.A. 1999. *Global Civil Society: Changing the World? CSGR Working Paper No. 31/99*. [Online]. Warwick: Department of Politics and International Studies, University of Warwick. [Accessed 6/09/2017]. Available from: https://www.unicef.org/spanish/socialpolicy/files/Global_Civil_Society_Changing_the_World.pdf.

Seeger, M. 2010. Theravada Buddhism and Human Rights: Perspectives from Thai Buddhism. In: Meinert, C, Zollner, H. 2010. New Brunswick and London: Transaction Publishers. P.p. 63-92.

Selby, D. 2012. Patronage, face, vulnerability: articulations of human rights in Thailand. *The International Journal of Human Rights*. 16(2). P.p. 378-400.

Shakespeare, T. 2000. *Help: Imagining welfare*, Birmingham: Venture Press.

Sivaraksa, S. 2002. The Crisis of Siamese Identity. In: Reynolds, C.J. 2002. *National Identity and its Defenders: Thailand Today*. Chiangmai: Silkworm Books.

Solomon, F. 2016. Thailand Is Marking the Darkest Day in Its Living Memory. *Time*. [Online]. 6/10/16. [Accessed 6/09/2017]. Available from: <http://time.com/4519367/thailand-bangkok-october-6-1976-thammasat-massacre-students-joshua-wong/>.

Srisuppaphon, D, Sriboonroj, A, Riewpaiboon, W, Tangcharoensathien, V. 2017. Effective implementation of the UNCRPD by Thailand State Party: challenges and potential remedies. *BMC International Health and Human Rights*. 17(15). P.p. 1-12.

Ståhl, A. 1997. Elderly and functionally impaired persons' needs of public transport: problem inventory and present situation. *Aeldre och funktionshindrades behov i kollektivtrafiken: probleminventering och nulaegesbeskrivning. Bulletin 148*. Lund: Lund University.

Stancliffe, R.J. 2014. Inclusion of adults with disability in Australia: outcomes, legislation and issues. *International Journal of Inclusive Education*. 18(10). P.p. 1053-1063.

Steinfeld, E. 2013. Innovation and Universal Design. In: *Norwegian Directorate for Children, Youth and Family Affairs*. 2013. Trends in Universal Design: An anthology with global perspectives, theoretical aspects and real world examples. P.p. 28-35.

Steinfeld, E. 2013a. Creating an inclusive environment. In: *Norwegian Directorate for Children, Youth and Family Affairs*. 2013. Trends in Universal Design: An anthology with global perspectives, theoretical aspects and real world examples. P.p. 52-57.

Tambiah, S. J. 1976. *World Conqueror and World Renouncer: A Study of Buddhism and Polity in Thailand against a Historical Background*. Cambridge: Cambridge University Press.

Temple, B, Young, A. 2004. Qualitative Research and Translation Dilemmas. *Qualitative Research*. 4(2). P.p. 161-178.

Terwiel, B. 1984. Formal structures and informal rule: a historical perspective on hierarchy, bondage and the patron-client relationship. In: Brummelhuis, H, Kemp, J, H. 1984. *Strategies and Structures in Thai Society*. Amsterdam: Anthropological – Sociological Centre, University of Amsterdam. P.p. 19- 38.

Thai Government Public Relations Department. 2016. *Universal Design to Be Developed in More Than 30 Provinces in 2016*. [Online]. [Accessed 01/08/2017]. Available from: http://thailand.prd.go.th/ewt_news.php?nid=3430&filename=index.

Thai Rath. 2015. Loht khreung raa khaa BTS suaan kha yaai hai cha phaw kohn phi gaan. *Thai Rath*. [Online]. 13/3/15. [04/10/17]. Available from: <https://www.thairath.co.th/content/486592>.

Thai Rath. 2017. Gan jaaw yaaw yaaw dtaae gra thohp wheel chaae “raai ngaan wan jan” – gaaw thaaw maaw meun phaaeng khaa bpai maww dtuuh sai maa. [Online]. 30/1/17. [16/11/17]. Available from: <https://www.thairath.co.th/content/846674>.

ThisAble.me. 2017. Saan phaaeng bpohk khraawng hen mai dtrohng yeun gam-ma-gaan chee khaat ga-ra-neeriiak khaa siia haai BTS saang lif laa chaa. [Online]. [Accessed 25/08/2017]. Available from: <https://thisable.me/content/2017/08/239>.

Thomas, C. 2004. *Developing the Social Relational in the Social Model of Disability: a theoretical agenda*. In: Barnes, C, Mercer, G. 2004. *Implementing the Social Model of Disability: Theory and Research*. The Disability Press. P.p. 32-47.

Tillmann, V, Haveman, M, Stöppler, R, Kvas, S, Monninger, D. 2013. Public Bus Drivers and Social Inclusion: Evaluation of Their Knowledge and Attitudes Toward People With Intellectual Disabilities. *Journal of Policy and Practice in Intellectual Disabilities*. (10)4. P.p. 307–313.

Transportation For All. 2016. *Khaaw saaw maaw gaaw – bprap-bproong roht-maeh gao haai bpen roht-maeh mai – khohn-phi-gaan kheun mai dai*. [Online]. [Accessed 18/08/2017]. Accessed from: <http://www.transportationforall.org/ขสมก-ปรับปรุง-รถเมล์เก่า-ให้เป็นรถใหม่-คนพิการขึ้นไม่ได้/>.

UNESCAP. 2003. *Asian and pacific decade of disabled persons, 2003–2012: Biwako Millennium Framework for action: Towards an inclusive, barriers-free and rights-based society for persons with disabilities in Asia and the Pacific*. Bangkok, Thailand: United Nations Economic and Social Commission for Asia and the Pacific.

UNFPA. 2007. *State of world population 2007: unleashing the Potential of urban Growth*. [Online]. [Accessed 29/11/2016]. Available from: http://www.unfpa.org/sites/default/files/pub-pdf/695_filename_sowp2007_eng.pdf

UNESCAP. 2015. About ESCAP. [Online]. [Accessed 05/12/2016]. Accessed from: <http://www.unescap.org/about>.

UNESCAP. 2015a. *Statistical Yearbook for Asia and the Pacific 2015*. [Online]. [Accessed 05/12/2016]. Available from: <http://www.unescap.org/resources/population-syb-2015>.

UNESCAP. 2016. How Many Countries Have Ratified the CRPD in Asia and the Pacific? [Online]. [Accessed 05/12/2016]. Available from: <http://www.maketherightreal.net/how-many-countries-have-ratified-crpd-asia-and-pacific>

UNESCAP. 2016a. *Regional Road Safety Goals, Targets and Indicators for Asia and the Pacific 2016-2020*. [Online]. [Accessed 24/08/2017]. Available from: <http://www.unescap.org/sites/default/files/Renewal%20of%20Regional%20Road%20Safety%20Goals.pdf>

United Nations. 2007. United Nations Enable: Frequently Asked Questions. [Online]. [Accessed 02/01/2017]. Available from: <http://www.un.org/esa/socdev/enable/faqs.htm>.

United Nations. 2013. *Accessibility and Development: environmental accessibility and its implications for inclusive, sustainable and equitable development for all*. New York: The Department of Economic and Social Affairs (DESA), United Nations.

United Nations Committee on the Rights of Persons with Disabilities. 2015. List of issues in relation to the initial report of Thailand. *United Nations*. [19/6/2016]. [Online]. Available from: <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G15/229/93/PDF/G1522993.pdf?OpenElement>.

UN General Assembly. 2006. *Optional Protocol to the Convention on the Rights of Persons with Disabilities*, (13 December 2006). [Online]. A/RES/61/106, Annex II. [Accessed 23/08/2017]. Available from: <http://www.refworld.org/docid/4680d0982.html>

UN OHCHR. 2016. Committee on the Rights of Persons with Disabilities examines report of Thailand. [Online]. [Accessed 18/08/2017]. Available from: <http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=18547&LangID=E>.

UPIAS. 1976: *Fundamental Principles of Disability*. London: Union of the Physically Impaired Against Segregation.

Üstün, T.B, Chatterji, S, Bickenbach, J.E, Trotter II, R.T, Room, R, Rehm, J, Saxena, S. 2001. *Disability and Culture: Universalism and Diversity*. Göttingen: Hogrefe and Huber Publishers.

Valdes, L. 2004. "Accessibility on the Internet," version 1.23 report to the United Nations (16 June 1998, updated 31 March 2004). [Online]. [Accessed 6/09/2017]. Available from: <http://www.un.org/esa/socdev/enable/disacc00.htm>.

Vasconcellos, E.A. 2001. *Urban Transport, Environment and Equity: The Case for Developing Countries*. London: Earthscan Publications Ltd.

Verseckienė, A, Meškauskas, V, Batarlienė, N. 2016. Urban Public Transport Accessibility for People with Movement Disorders: the Case Study of Vilnius. *Procedia Engineering*. 134. P.p. 48 – 56.

Vorapanya, S. 2008. *A Model for Inclusive Schools in Thailand*. Unpublished PhD thesis, University of Oregon.

Wasinpiyamongkhon, N. 2013. *People's Politics in Thailand: A Critical Study of the Assembly of the Poor, 2001-2010*. Unpublished doctoral thesis. University of Leeds.

WHO. 2015. *Global status report on road safety 2015*. Geneva: World Health Organisation.

WHO. 1976. *International Classification of Impairments, Disabilities, and Handicaps*. Geneva: World Health Organisation.

WHO. 2017. Definition: intellectual disability. [Accessed 23/01/2017]. Available from: <http://www.euro.who.int/en/health-topics/noncommunicable-diseases/mental-health/news/news/2010/15/childrens-right-to-family-life/definition-intellectual-disability>.

Wilson, L. 2003. *An Overview of the Literature on Disability and Transport*. UK: Disability Rights Commission.

World Bank. 2013. *Defining Civil Society*. [Online]. [Accessed 6/09/2017]. Available from: <http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/CSO/0,,contentMDK:20101499~menuPK:244752~pagePK:220503~piPK:220476~theSitePK:228717,00.html>.

World Bank. 2015. *Urbanization in Thailand is dominated by the Bangkok urban area*. [Online]. [Accessed 29/11/2016]. Available from: <http://www.worldbank.org/en/news/feature/2015/01/26/urbanization-in-thailand-is-dominated-by-the-bangkok-urban-area>

World Bank. 2017. *World Bank Database Thailand Country Profile*. [Online]. [Accessed 14/08/2017]. Available from: http://databank.worldbank.org/data/Views/Reports/ReportWidgetCustom.aspx?Report_Name=CountryProfile&Id=b450fd57&tbar=y&dd=y&inf=n&zm=n&country=THA.

World Bank. 2017a. *Thailand Overview*. [Online]. [Accessed 14/05/2017]. Available from: <http://www.worldbank.org/en/country/thailand/overview>.

Yamamoto, T. 1996. *Emerging Civil Society in the Asia Pacific Community*. Singapore: Institute of Southeast Asian Studies.

Zajac, A.P. 2016. City accessible for everyone – improving accessibility of public transport using the universal design concept. 6th Transport Research Arena April 18-21.

Zook, D.C. 2010. Disability and democracy in Cambodia: an integrative approach to community building and civic engagement. *Disability & Society*. 25(2). P.p. 149-161.

Glossary of Key Thai Words and Phrases

English transliteration	English meaning	Notes
<i>baap</i>	<i>sin, bad merit</i>	Used to refer to a bad deed, where merit would be 'lost', both in general conversation and in a religious context.
<i>gam</i>	<i>karma</i>	<i>Gam</i> , is sometimes translated as 'action' from Sanskrit, and retributive karma refers to the principle of moral justice: the belief that future outcomes are the result of past actions.
<i>graehng jai</i>	being considerate, reluctance to impose on another person	The concept is deeply tied to one's place in the hierarchical system and therefore duty [<i>naa thee</i>] and the Thai concept of <i>rak saa naa</i> [saving face].
<i>hai thaan</i>	<i>To give alms; give to charity</i>	Usually used when talking about donating money, items and food to those less fortunate.
<i>khon phi-gaan</i> or <i>phuu phi-gaan</i>	<i>disabled person</i>	Used both formally and informally in Thai spoken and written language to refer to someone who experiences disability because of how society and the environment interacts with their impairment. <i>Phuu phi-gaan</i> is slightly more polite.
<i>khwan</i>	<i>life essence, soul</i>	Refers to the life essence of a person, animal or plant.
<i>metta</i>	<i>compassion</i>	Akin to kindness and has neutral or positive connotations.
<i>nam jai</i>	<i>Generosity, kind-heartedness; kind-spiritedness</i>	The Thai word <i>jai</i> translates to heart or mind, hence the alternative translations offered.
<i>raang gaai</i>	<i>(the) body</i>	Generally used to refer to the physical form.
<i>rak saa naa</i>	<i>to save face, the act of saving face</i>	Used to refer to preserving one's reputation.
<i>songsarn</i>	<i>pity</i>	Used when the object of the feeling is a victim of misfortune or tragedy, and therefore has negative connotations (Naemiratch and Manderson, 2009)
<i>tham boon</i>	<i>to make merit, the action of making merit</i>	In Thai culture this is often interpreted as giving and is more often than not connecting with the temple - giving alms to the monks and donating money to the temple for example. It can, however, also refer to other forms of giving, see <i>haai thaan</i> .

Appendix A

Dr Issavara Sirirungruang interview

Date: 5/5/17 and 15/5/17

Duration: approx 60 mins

Intro – lecturer at Ratchasuda college in department of rehab. Visually impaired. Work related to dis rights but not a big activist – would rather write. Work with TAB and still volunteer with them. Represented Thailand CSOs to the dialogue on the CRPD in 2016.

Wouldn't call herself a 'real activist' but is interested.

Academic work – right to read.

(3:30) Any involvement in improving PT?

I was pulled into the group! I myself didn't really go into the discussion that they have and I read it but for me, and like the wheelchair –users, but they have security guards to help you, to navigate easier, even the MRT. But sometimes they have weird policies that's not, for example, you are a person who is visually impaired, you can't use the escalators. That's ridiculous! I say I can, you know, I'm just trying to. It depends on my mood on that day and sometimes I ok ok but sometimes I say no, why not? Why can't I use? Because I heard that it's quite difficult for the security guard because they are the day-to-day who meet with us and it's difficult for them on the front line because they are the ones who get blamed or scolded by their supervisor and so that's why they are quite afraid to take a risk.'

Understands their p.o.v. If she insists it makes their job more difficult.

Policy came about because of the accident with someone with low vision who fell on the track and another accident on the escalator. But the company put out the policy and generalise amongst all visually impaired people.

(8:00) 'You have to understand Thai culture that people see people with disabilities that we have impairment and if something happens to us and society as a whole will blame the company more, I think. So that's why they are more cautious or I don't know, cautious or whatever.'

BTS and TAB training.

(10:00) First carriage policy – makes it difficult because you miss the train by having to walk all along the platform. Based on old protocol – when guards didn't used to be on every platform and so the driver would come out and get assist anyone in the first carriage, but policy hasn't been changed since.

(11:15) 'As a Westerner you might see that this is quite overprotective, right? For the smaller stations it's ok, you can navigate your way and don't want to wait. But for example if you go to a big one and it's quite busy, like Siam I think it's quite difficult and I would prefer the support. Then it's quite difficult to say ok this time I want the support and then next time I don't, maybe it's difficult for them to manage.'

(12:30) Depends on station – sometimes even with sighted friends they will insist on assisting you.

'For Thai they usually generalise and don't look at the individual needs. But sometimes it's quite difficult for them too. But if you can ask for it (help) then it would be good.'

‘Maybe our culture is more collective.’

In school – students with visual impairments compared to elders and not treated as individuals.

Michael someone? To read about Thai culture.

(17:00) Awareness of disability rights in Thailand in Thai people in general and on government level.

More awareness of rights but in practise not sure.

Pay back to society or claiming rights? – talking with friend in England ‘Thai society should be like this and those and disability rights and she said well what about persons with disability what do you want to pay back or something like that, rather than just calling for the people to do this and that. I just think but well, that’s our rights, why can’t we say something like that? But it seems like they still think that you shouldn’t request or require or ask for it too much [as a disabled person].’

Why?

Give and take – pay back to society // ‘in practise I’m not sure the rights are really there.’

‘I think that Thai people understand more – and have the belief and see that oh yes disabled people have rights, but those are maybe the things that they say and say to each other but in reality, in starting the action I don’t feel like it’s like that. It’s like, maybe they feel pity or maybe not, maybe it’s improved. But there’s still the charity model present, in my feeling.’

(21:30) ‘People go and feed the blind children for their birthdays or whatever, but in reality other countries probably don’t have that.’

Tam Bun.

‘Volunteers go but it’s like they go to make merit with us. But it’s difficult because owing to the fact that we’re a Buddhist country, if we go against everything then it’s like you are so aggressive.’

(23:00) ‘It’s like you’re not grateful. But it’s ironic in that we say we don’t want to be the target of merit-making but when we do group fundraising – disabled people’s NGOs and that, they still do fundraising through the monks and then you say please donate to...and yesterday the low vision association came and they want to raise funds to build a vocational centre and then rather than fundraising or doing other things, for Thais they will distribute envelopes and do fundraising through the monks at this day at this temple, and then people will donate. And that’s a way to get a lot of money.’

How does it affect the disabled rights movement?

‘In this way it’s more like charity, making merit. And it’s kind of like swallowing our words. We say we are equal and we have rights to do this and that and then we don’t want to be treated on a charity base but we want to get a lot of money, rather than trying to do business or whatever, a lot of money comes through this kind of asking people to make merit.’

‘But then people say NGOs you have to find a lot of money to be able to run our business, what is the best way and the quickest way, it’s this way. To do with the

beliefs of people in Buddhism and making merit and these people a hundred, two hundred thousand. So this way will be quite difficult, how we're going to communicate with the society.'

(26:00) Conflicting – rights and asking for money via charity model.

Recording 2 (15/5/17)

Role of civil society in achieving disability rights in Thailand?

I think that CSOs play a large role in disabled rights because since the past, since the rehabilitation act 2504 disabled people have fought all the time. And since then, disabled people who came together until the laws supported them or everything.'

'We were the people who started it. We have first hand experience and are the people who, what do you call it? Oppressed! We started to get educated and think what can we do to make society realise about rights. Therefore we needed to be the people doing it ourselves because otherwise the government would produce it as a welfare concept. If we didn't campaign we wouldn't have got here.'

(2:30) 'For public transport it's taking a long time but we're still campaigning to this day. Nothing about us without us. I think that it needs to be use because if we let them come and think for us it wouldn't meet the needs. So I think the role of us is as leaders.

'I've seen myself from, I myself am a blind person and I work here at the university. Actually, Ajarn Monthian has said that academics and disabled peoples organisations should work hand-in-hand, together because we do research to support or but actually in organisations like this most people who come to do don't have prior experience and will come and do the same old things but at the same time if it's the association of the blind or the association of another disability then you're in the field.'

Audio description – association started it. CSOs focus on disability rights and take it forward and are the main force in change. Research tends to be in certain areas.

(6:00) DPOs – how do they work together for rights?

All work together so they have bargaining power but then they go back and work in their own area. But have a mutual relationship and still work together. Usually is for enacting bills?

'Blind go in and participate but I feel like the leaders are the physically disabled group more. Because they seem to be the group that have the most difficulties.'

But blind might focus on other issues that they feel affect them more.

(9:24) inaccessible litter and recycling rubbish for visually impaired.

(11:00) What are the main factors and barriers to achieving awareness of disability rights in Thailand on a government and society level?

'I think the main thing is the attitude as a barrier because I feel like however it goes if attitude, and no matter what level is with the people. We have good laws, right? But the implementation is done by people, and the interpretation of the law is done by people. Therefore, it depends on the mindset of them and how they see things,

because if they view disabled people pitifully or see them as sick or disabled people need to be looked after it'll come out differently. For example here, because here is a university that focuses on medicine and so there should be opportunities for disabled people to go and study, but when we're sat in meetings some people are like 'but could they study?' like the science faculty, they see it as 'how can they do it?' One, is attitude, two is lack of awareness. Because if their attitude isn't ok then they don't think to find knowledge of actually in the future what can be done. I feel like this is a huge problem that makes the work of disabled people stay here [low level]

(13:00) 'I'm not sure if I told you last time, when I was studying in England and I was with my friend and we sat and chatted and I read out the news about disabled people and was saying disabled people should be getting this and getting their rights and she turned round and asked me 'and do disabled people ever think to give anything back?' And I was like 'oh!' because this was a friend who I thought I'd lived with and should probably have an understanding on some level and would never think anything like this. I don't think that budget or anything is that much of an obstacle. If attitude was right then I believe that money could be found. They would appoint a budget already.'

'I found some Braille blocks on the sidewalk once and after the Braille blocks then there was a telephone box that had been put right there, completely blocking, it was like I'd been blocked and I really couldn't walk past! The person who'd put it there didn't know and the people who used it didn't know what it was [the Braille blocks].'

(14:30) Example at university – sidewalk near gym, lack of awareness.

How to change the attitudes of people this is the main obstacle.

'Another obstacle is the government changing often. It changes and then they create new policies and then it's not consistent, that's another problem.'

Helping Factors?

'There needs to be participation of disabled people from the very beginning as well, the whole process. And there has to be active listening to us as well. Opposite there is a botanical garden that they're making at the moment and the head of the project is a retired professor of medical science and he was entrusted with doing this and he came to speak to me and Ajarn Tam many years ago and said that he wanted to make a herb garden that was *especially* for blind people, like this. But he said it like *especially* for blind people, like they were being segregated. And so we said to him 'it doesn't need to be like that! Because when we go we go with our families or friends and you can't be like 'oh I'm going to look over here first, you go over there' and you need to walk everywhere with your friends. So we told him this but he still wanted to do it until the latest meeting he'd written 'Herb garden for disabled people' as well, he speaks like this. And then another professor said 'no, it shouldn't be like that, it's like you're dividing them or excluding them', like that. That's not listening to us. And that professor turned round and asked us 'why is it like that?' and so we said 'look, we told him ages ago, both me and Ajarn Tam had spoken to him years ago and told him how it should and shouldn't have been. If it's sensory then everyone can use it.'

'You can see what he was thinking, what was going on in his head – they're people we have to look after specially or something I don't know! So yes, you have to let disabled people participate, but you have to accept and be open-minded in listening and looking as well.'

(20:00) Collaboration between government and DPOs in general and in transport.

Like the DEP, they're trying to get disabled people to participate in the National Board, there's groups of disabled people from all of the associations and then there's the fund for supporting and developing the lives of disabled people, so there is, they have covered all of the elements, so they go to participate but in reality, this is what I've heard because I've not had the opportunity to go in there, and it's true they have disabled people there but when they vote or make a decision on something, it only takes the Ministry of Finance or someone who's come along to say 'no, that's not ok' and it's over. It's like it's not a real collaboration. But for transportation I don't really know.'

(22:30) 'It's like they take them along to be like 'Hey, I've brought disabled people along' to participate or something but in the end...and they don't have enough power to...like our voices aren't heard earnestly. It's like this still.'

'Even when I went to the meeting of the CRPD the government took a blind person along as an interpreter. It was almost like a showcase or something, I don't know, in my feeling...I'm not sure if you've ever heard this point before. In that group they've also got a small person working there, at the DEP, and head of delegate told her 'stand up, can you see her?' 'asking the people in the committee 'in that case can you stand on the chair please?' like that, which, as CSOs we saw as very rude, to be like this. But there was someone in the group who went and posted, perhaps more than was necessary but that person, the small person who was the government employee, she said 'he didn't mean anything by it, it's just a joke' and I guess maybe the head of delegate maybe didn't think anything too deeply but we saw no, it's diversity, you shouldn't go and make fun, like that a little bit. Therefore, when they brought the blind person to be the interpreter it looked like it was a showcase, like we've got a disabled person who participates in the group, in our team, or something like that.'

'Maybe it's because we're not officers or something but we don't really have a voice to say anything. So the collaboration I don't always know if you can call it collaboration. Take them along so you've got them there, more like. This all comes from the mindset.'

'I don't dare get on the buses you know, Thai buses. Because sometimes I haven't even stepped onto the bus in time and they've already pulled away. Stuff like this. It's about discipline or something I don't know. At Victory Monument it's really difficult, really difficult because there's two lanes. There was one time I got off and it stopped in the middle of the lane and the person driving yelled to the other passengers to help the blind person or something like that, I was like where have you parked?!

'Everyone I talk to has a problem with travel.'

APHT interview- Kittipong Hadtawagarn (member of administrative committee)

Date: 15/5/17

Duration: 36 mins approx.

Main activities of APHT: rights and opportunities – emphasise building a network for people with physical disabilities. Letting people know their rights.

(1:30) What collaboration or involvement to APHT have in the improvement of the public transport system?

Problems with facilities, PT, footpaths etc – big problem for PWD to get out into society.

After Thai year 40 when the Betsit?? Games that Thailand hosted- Helped general public to know more about disability.

(3:00) Disabled people have had to demand everything for PT, lifts, ramps etc. Why don't we use them? Only 5 stations out of 23, don't know if we can get out.

Taxis won't accept them, sometimes have a gas tank in the boot and don't like to put the wheelchair on the seat.

Buses – nowhere to sit if you can walk and no low floor buses for wheelchairs.

Train –new pilot project – 4 lines with carriages for PWD. Sometimes the train stops at another platform and can't be accessed.

BTS – very difficult for us.

MRT – best for access at the moment because every station has lifts and the service is good.

(5:00) General environment is an issue – lots of building work etc. Sometimes ramps are built and then telephone boxes are put right in front of them, sometimes restaurants are in the way on the pavement or shops etc.

(6:00) The best thing is taxis that belong to Bangkok (BMA??) – first 15 taxis now an extra 20. Free service. Problem is need to be booked in advance – 2 days etc. There aren't enough to serve everyone. This and the MRT are the best PT systems.

(7:00) R: Any collaboration with the government or private sector?

Participate pre-construction because they are 'the people with the problem' and have knowledge. Some departments invite them, some departments don't invite them to participate and instead make adjustments when construction is finished. Sometimes send member of committee to protests etc.

The association has a group who look after convenience facilities and they usually go. Except from private sector they aren't always able to go, except for going and giving their opinion.

Law in (which year?) denotes that there has to be accessibility for buildings and facilities for PWD in new buildings – for government. But for private maybe they can't be controlled.

Sometimes they have facilities but then non-disabled people will use them, e.g. parking.

(8:50) ‘The problem is that in our country there is no consciousness-building for the general public. They won’t think about if a disabled person or elderly person comes along and needs to park, they’ll just see a free space and park. This is a problem for us in every shopping centre.’

The association is involved in going and sharing knowledge, pressuring people etc.

(9:30) The project of OTP – are you involved?

Yes, we go as well. Send a representative.

(10:00) Does it work?

‘Does it work? It’s better than not doing it. Maybe not 100% but there is a part of it that’s done for us.’

Not sure if it will be successful until its finished, but glad that someone is thinking about it.

(11:00) ‘At first it’s not perfect but better than not doing anything. Sometimes they don’t do it for us, they do it for their customers. E.g. hotels, they don’t make it for wheelchairs, they make it for customers to wheel their suitcases up. But we can use it too.’

Sometimes we need to go and speak to the manager and ask them. There’s only around 2 or 300,000 people who use wheelchairs.

(12:00) Is there collaboration between the association and other groups who also protest?

Yes, of course. Other 5 national associations under the Disability Council. The problems are different for each group.

At the moment they don’t want to divide it for PWD- also elderly etc.

‘Sometimes if we divide – this is a toilet for disabled people, this is for general people, sometimes it’s like we’re divided from...we try to make it that we’re citizens, like in Thailand we’re all equal citizens, not that we have things for special people, things for normal people. Because if we divide it’s like saying, you go over there, this is ours. We don’t want to divide. We want to be together, have the same rights’

(14:30) What about other organisations who aren’t National Associations?

Yes – Kritsana is about the environment and architecture more.

They’re also disabled, they work together but sometimes they are working in different areas.

‘We don’t divide, but they have some things that they can do more than us, so we let them do it.’

(16:30) R: How satisfied are the association with the involvement of the private sector in solving the problems of accessibility for physically disabled people?

Service providers etc. Actually this is all PT belonging to the government but they let the private sector come in and take over.

Not satisfied because there are often facilities but they’re not appropriate but ‘we are not able to go in and order them because it’s not our duty. We can only say we need

to do this, we need to do that. We can recommend but the orders that's got to be the duty of...if it's a big project, building something then it has to be the duty of the government. The private sector have to follow the MOU (?) that they've signed with the government. Are we satisfied? We need to go and look at the contract between the government and the private sector.'

(18:30) 'If we have the platform to go and give our opinion we have to go. We need to participate at least, have disabled people going to present or going to give their opinion, be on the committee. If we can't though then we have points that we will send to them and we have to go. It's our duty. Not just for in Bangkok, but people outside Bangkok as well. Actually people in Bangkok don't really come out and use it much, it tends to be people from other provinces, who come and use the PT system in Bangkok. Bangkokians don't really use it. Usually it's people coming from other provinces who use it, coming to meetings etc. In Bangkok there's not many people who will use it.'

Why?

'Because, there's many things. Sometimes our country...people come and demand things but there aren't many people so they get people from other places to come, to meetings and protests, they get people from other provinces to come, sometimes people from Bangkok don't really go. Very few. For example the T4A group come from Chonburi. Sometimes it's not people in Bangkok. It is their right because they live in Bangkok and need to use these services but it's very few who come out. Sometimes they'll say oh they have work etc and they won't really come out and help much. But when disabled people come out they have to spend money, just coming out of the house, taxi fare, food, wage for the person looking after them, right? So they come out and it's not just 100 Baht it's 500. They have to spend money so they don't come out really.'

(21:00) 'They want to see improvements but sometimes it's like they say that there isn't a response. They will let the mother organisations deal with it, they think like that.'

Duty of the association already. Go to meetings etc.

(22:00) Is there anything that would help improve the collaboration?

They think of us (PWD) last. They think of saving money first and they won't think about us using the facilities. It's investment and saving money. The government doesn't think about the rights of citizens – they'll look at the costs of facilities and the numbers of people using them. They don't build it for us. And disabled people don't use it, very few.

It's not worth it for the number of people using it.

What can we do to make the government build for us? If they were disabled them selves or had disabled family they would do it. But there isn't the awareness. Not like developed countries that they have awareness and systems so they think of weaker people.

Now there is more understanding but still not 100%. We need to make them more aware. We need to protest and show them that it's necessary.

(26:00) R: Anything else you want to say?

Our work isn't just related to PT, it's related to everything. 5 things – medical, education, livelihood, sport, society. About accessing services.

For people who are knowledgeable it's ok but for people who aren't it's difficult to access. E.g. in other provinces – getting equipment etc. Education – schools not prepared to accept kids.

Livelihoods is quite good – legislative no.25 and 35. 1% disabled people in workforce. Not enough for disabled people but also disabled people aren't ready to work. E.g. no.33 about working full time - Education, physical condition of people doesn't support this. Travel, still can't.

35. – short term contracts year to year – this is better. 50% successful. A path to work for PWD to find work.

Sport - Thailand is successful in this – Gold medals have been won and made this into a career for people with disabilities. Still not enough coaches, equipment, techniques etc.

Building a network. Every province has a sub-association with a big meeting each year. Every 4 years there's a new committee chosen.

(35:00) We have more problems than our friends, and there are more of us. There are more than 1.7 million registered as physically disabled. But get the same amount of budget from the government. Donations to the centre – don't get a lot, depends on the economy. Wheelchair workshop – fix and donate them to people who need them.

Charlotte interview (physically disabled student, uses a wheelchair)

Date: 15/5/17

Duration: Approx 40 mins.

Where do you travel in Bangkok?

Hospital to do physio every Monday. Lives at the university.

These days I don't go anywhere at all. Sometimes I want to go shopping myself but I don't dare to propose it because ??

Car isn't always free etc.

'Thai people have the wrong attitude about disabled people, they see it as you don't need to go, you don't need to use it, the car isn't free and two people have to go with you...I think to myself if I was normal and I was a civil servant, like I was a teacher at a school before then I could drive myself or call a car myself...It costs a lot of money to go there and back.'

The person who organizes the car doesn't have the right attitude about disabled people and doesn't make it easy for disabled people to use [the university car].

(6:20) 'I just go nearby, but the way to the bridge here, at first you were able to wheel a wheelchair over it but afterwards they added a (???) and it's made the path not convenient for wheelchairs at all. Wheelchairs turn this way and that and then get stuck at the poles to stop motorbikes. It's opposite the university and aren't convenient to use at all.'

Adds pressure to travelling. Was going to study opposite but then decided not to because it was too difficult (?)

'I tried to call and contact the vans that someone recommended [government system of accessible vans] that I remember there was only one van but the disabled people's organization said that there was ten vans in Thailand, but where I phoned that time there was only one. Here, they said it was only road route 3, *** has route 1, route 2, route 5. I was at route 4 and they said it hadn't got that far, whenever it did then it could come and collect me. Since then it's been three years and it's still not come.'

Vans don't have lifts or room for wheelchairs.

'If there are people who have good attitudes towards us, want us to live like normal people, but there's another group of people, whom if we use it then it's not convenient in that we're using their vehicle...[service providers] they don't have the heart to serve disabled people.'

(12:00)

'If I were to have travel like in England, it would be my heaven, like being born again. I could go to new places and learn, because travel is learning. If you don't really travel then when you speak to people you can't really understand...it's good that there's the internet so I can find things out otherwise I'd be what Thai people call stupid!'

(13:30) 'In the future when I study my PhD I will campaign and pressure for better travel in Thailand but I don't know how far I'll get because of the attitude towards disabled people of Thai people is really difficult to solve. They don't educate about

disability from being children until being students. Anyone is going to study a Masters about disability will study, but undergraduate students don't have a clue, from primary school to high school until they graduate. They know from what they see but they don't understand.'

Should have stricter laws and solve attitudes – most important things.

(16:41)

'getting into taxis, they need help to be lifted so they can get in. This is severe disabilities, if it's your arms you can't even more so. It's even more so in other provinces, you can't go anywhere. Because out there there's no one to help lift, taxis don't want to help lift. There's very little getting into cars.'

Thailand emphasizes tourism but not disability like UK and Japan.

Other countries have facilities so it's possible for Thailand too.

'Thailand sees disabled people should (17:50 ???) because they believe in karma. It's said we're being punished, some people say that it's punishment, it's too late to do anything about it now. They (make us wait 18:16???)'. That's a downside.'

(19:00) Experience of using PT

No, because it's not possible. There's no connections so it's not possible. Not many buses – you might be able to get one way but not back (from the university).

No low-floor buses etc.

'Most disabled people live with their families, and I don't usually go anywhere.'

(24:00) Any recommended improvements?

Low floor buses, seats for disabilities,

'Usually when you go out the service providers show that they're not really interested.'

Some things have improved for accessibility, like ramps etc in buildings but for public transport it's still not much has happened. PWD can go to different places but only when someone takes them, you can't really going on your own. Other provinces it's worse there's no services at all, Bangkok there are some.

(29:00) 'The pavements here, if you keep going, they don't have ramps, so you have to come back. You can only wait for the bus, because travelling on the pavement is difficult.'

Lack of ramps etc. Lack of understanding about disability.

'I don't understand what they're thinking. Opinions, attitudes, understanding of disability and thinking, they see that it's a waste of time, waste of their work.'

(31:30) Lack of services at university.

(33:00) ramp – one engineer offered to do more ramps but problems with money ??

(36:00) Even getting small things done is really difficult and takes years.

People don't dare say?

(38:00) Getting in and out of bed is difficult, no equipment to help her so relies on people.

Lots of volunteers to help at the uni who are students, but not many staff.

(42:00) not many physically disabled at the uni – uses a lot of budget. She thought there were other students but it was only her, mostly deaf and blind. Has asked for equipment to help her get in and out of bed – asked but hasn't got it yet.

Comparison of UK and Thailand – policy etc.

(46:00) Studying about disability.

Associate Prof Somyot Kaitwanidvilai interview

Date: 8/5/17

Duration: 32 mins approx. (telephone interview)

(2:00) The project has come about because of the standards and unclear laws, often it emphasizes buildings etc. The laws are there but aren't clear, e.g. characteristics of suitable convenience facilities – it's too broad a term. In making the standards clear it's hoped they will be followed for any future projects.

Training staff is the second objective of the project.

(3:00) Why is it important for DP to use PT?

Policies are in place, in line with the government strategy. At the moment the system isn't perfect, although the strategy is there. Everyone needs to accept the standards.

What's the main factor in improving the system?

(5:30) Understanding that we have to do it of service providers, government and acceptance of the expenses. Consulting with disabled and elderly people so their needs can be met, e.g. the hydraulic buses, deciding on how often they need to run, many countries don't have every bus as an accessible bus. Need to understand on each side about budget and about the suitable amount.

(7:30) What are the main obstacles of the project to improve public transport in Bangkok?

Probably budget. And measuring the progress of whether standards have been followed or not.

(9:00) Willingness of service providers to improve/comply?

They probably want to, but it costs a lot of money, especially when it's done afterwards. Things that are easy, like signs, they're happy to survey. Things that cost a lot of money are more difficult because they are also limited by their business needs.

(10:00) In your opinion how successful is the project?

Many years for overall OTP project, but the current project only 3 months. They've done a lot already but now are focusing on quality?

(12:30) Apart from ramps and accessibility for physically disabled people what other considerations are taken into account for other types of disabilities?

There are convenience facilities noted for every type of disability.

Adjustments to structures for physically disabled cost a lot of money and are talked about often.

(14:00) For learning disability?

Altogether there's 20 items for (???) vehicles and for buildings 24 items, which cover accessibility issues for all types of disability, e.g. signage for visually impaired or sounds for hearing impaired. Blind groups have already noted the characteristics, which are used to add to the accessibility specification.

(15:30) What about the National Associations – do they all attend the meetings and seminars?

Every association attends – deaf, blind, every association. Because at this time they want to help with this a lot.

(16:20) What about the Association for Intellectually Disabled?

The association for Autism were invited but didn't come, we invited them all but they didn't all come. But they will do it but they do it online.

'I'm not sure, we ask but they don't come. But we do have a questionnaire about the public transport system. We have three ways of collecting opinions, one way is through the seminar, another way is by going directly to the people, for example for intellectually disabled people who have behavioural issues we might go to their homes and another way is to do the questionnaire online. The online questionnaire means that anyone can come and fill it out. There have been questionnaires online filled out by people with intellectual disability, so we are complete [every type of disability]. But not many, so we use the method of going to them when they don't come to us, because...I don't know either why they don't come but we go to see them anyway.'

(18:00) Does each association have equal participation?

Are they equal? Maybe it's more that they aren't convenient to attend that day but we go to see them. At the moment every association has given their opinions. We don't know if they will always come on that day and so we go to see them or use online or it depends on what's convenient. Because, actually, they might have association business on the day we arrange the meeting. If you ask is it all? Well, yes because we use several methods, not just one. If we only used one we probably wouldn't get it completely.

(18:40) Low-floor buses?

I'm going to complain a little bit here, ok? At the moment the current buses aren't low-floored. They're going to have low floors because there will be a ramp system but I'm not sure what type it'll be, whether they'll be folding or not, if they're folding then they need someone to look operate them and then the buses will lower to be able to collect disabled people and allow them to get on.

All the new buses will be low floor, but it'll take five years.

'The problem is that disabled people will have to come out when that particular bus comes, for example, in twenty minutes there will be five buses but there's only one bus out of those that can take disabled people. I think in this five years not all the buses will be changed. They can't change them all, the old buses will still have to run, no? The reason is about economics and investment.

'And if disabled people come out and there's no bus then they'll have to wait twenty minutes and what will it be like waiting a long time like that? Other countries have an app where you can see where each bus is, and so the disabled people can go out. But in Thailand the timetable isn't certain and so they don't know when the bus is coming. In the meeting there were people talking about this and when it happens we'll be stuck on this. We'd need to change the whole system because they already don't use it; they use taxis or call private cars and this is the problem. There's a lot of issues, it's not just that we can fix the buses - we need to fix the whole system. We'd need to fix the whole and use a million baht.'

Need to install GPS so that disabled people can see when buses will arrive before they leave home.

Do you know if there will be technology like this?

There probably will be.

(22:30) Who looks after this (the buses)? OTP?

BMTA, but I'm not sure.

Training is difficult because of a lot of staff but is necessary if the system is going to work. It's possible.

It'll probably take a lot of time.

(23:45) How will the project develop in the future?

There's lots of plans that link together for disabled people.

(25:00) In the project, are there a lot of people involved?

There's three experts and then about 20 staff, mostly doing work on pushing the standards.

Does that include disabled people?

The disabled people are from Ratchasuda and are usually teachers there. They'll come and help. But for disabled people they're on the committee, they're the committee who give advice and say what's suitable or not. They're experts as well.

(26:30) How often do the committee meet?

The committee meet about every 8 months, altogether we've have 5 or 6, and each time they'll submit comments. There are reps from different orgs – disabled and elderly and all the different service providers.

And they follow the suggestions of the associations, right?

'Sometimes they do, sometimes not and they discuss it because some things they need to talk about to see what's suitable. The experts have that responsibility already because they have the information and pass on this issue and that issue. But they all talk.'

Do you have anything else to say about the project?

Actually the project is finished, in its execution, it's concrete in that, actually I want them to talk together until it's over. If we finish it off for the project we will have some standards.

We need to talk until it's finished for the project to have any benefit. Everyone has to agree and we need to listen to every side (28:50) Profit and loss and economics and the cost for engineering affects what they have to consider.

(30:00) BMTA. Issues with buses – not sure, TOR? Terms of reference, spec?

In Thailand there's lots of steps to go through. If there wasn't things would go a lot faster.

Dr Wiraman Niyomphol interview

Date: 26/4/17

Duration: 75 mins approx.

(1:30) Work and involvement in disabled rights movement.

Studied in the U.S.A. Assistive technology for the blind. Doesn't consider himself an expert on laws and policies – more of professional skills for blind and low vision, software development – Thai Braille translation.

(7:50) Supports the movement 'in theory'. Gets involved with TAB to 'a certain extent but I'm not an activist'. Doesn't push things in the name of an association but keeps up with what's going on. Puts this down to personality and skills of different people. Supports the movement but doesn't get involved in running organisation etc. More activist in youth re. rights for the blind.

(11:00) More inclusive society – need to be connected with non-disabled people. Interdependence. Living life in society as independent as possible – using help when you need it. 'Make the best of this situation'.

(13:00) Main factors in achieving progress in awareness of disability rights?

'The demand and outspokenness/pushing for change of disabled people in Thailand in the past 20 years has cause changes in policy, in government, opening up new opportunities for the disabled.'

Certain politicians who are also trying to push disabled rights but a smaller percentage. Disabled people in power- empowered to help make decisions.

Names Monthian as an activist – TAB, senator, UN representative.

Ajarn Wiraya – Thammasat – influential in government committees. 'Disabled people advancing themselves professionally and making known their demands.'

(19:00) Also true on general society level?

No, government level more aware. Various things to help. Private sector awareness is less – an international thing?

Attitude – ignorance. Despite laws, there will always be people/organisations who think that disabled people cannot perform // charity model ideas - still prevalent.

Negative attitude or ignorant? Once they understand they will change. E.g. universities not accepting blind students, even like at Mahidol. A student who learnt Chinese at Chiang Mai and tried to go to the Chinese language department – initially she was turned away – 'we're not prepared to teach the blind'. Ajarn Wiraman had to prepare a letter to explain about discrimination and how they might accommodate her, and eventually they let her take the exam. 'They couldn't work it out, how a blind person would function. So we had to explain it to them, well, there's alternative ways to take the exam, like this, like this. Once they understand, ok they try it, and once they pass ok, they are accepted. It's not like giving free entrance, we just want to have a chance, that's all.'

(24:00) We shouldn't be so serious about the negative attitude perhaps? An international thing.

Because of more interaction of DPOs with gov than private sector?

‘Yes. Because of the disabled people push more towards the government to change and less towards the private sector to change. I understand that you cannot force them.’

(26:00) No central control for businesses, you can’t work with the whole sector, whereas in gov it all follows from the top (top down).

e.g. the disabled people’s labour laws, but they are companies that won’t or can’t hire and so they pay into the fund. But it’s difficult to get money out, but the channel is open. The law is working businesses are changing –setting aside sectors for DP or sub-contracting for DP.

But it’s being done because of the requirements, they’re not doing it because they want to do it. But not all, some companies do hire DP even before law. But motive doesn’t matter so much if it helps DP have opportunities.

(30:00) DP still don’t get the opportunities to go in the direction they want in employment and education. Compared to US – studying all different majors at college. Whereas Thailand - ‘Typical things that people think disabled people can do’.

(32:00) Why? Where does this thinking come from?

Thai culture. Charity-model thinking, pity. Giving. Making merit.

‘I go to a restaurant, I go to S and P. I sat down, I ordered a meal. I was fine, I was enjoying my lunch. When I was finished, I stood up and I asked the waitress I wanted to pay. She said ‘it’s ok sir, it’s already taken care of.’ Well, how? ‘Oh, the two guys that were sitting next to you at the other table, they paid for you and they left already’. What does that mean? They think I have no money. They think I have, you know, maybe *songsarn* me. Pity on me, whatever. I can pay! I have money, you know. If I can’t pay I won’t go into S and P restaurant. But I think there’s still the feeling of helping charity. In certain levels it’s ok though. But not too much. If it’s too much then they feel that we can’t do things. So from that side, from the general public or general society, if they have less of that attitude and have more ‘hey! Maybe they are not perfect, disabled people aren’t perfect but they have certain skills or abilities in what they have left and they have potential and they can perform to a certain level so give them the opportunity’ that kind of..if there are more people thinking that way I think it would be more like what I say in the Western world.’

(35:45) ‘I have to also blame the disabled, because first, the disabled has to be qualified, have to develop, have to have skills. If you want to work in a good job, in certain jobs you have to have the knowledge to at least be able to do that job, even if you can’t see. I’m not saying that blind people they can do everything, every job, but the rest is more like accommodations within the workplace. A blind person can do that, can do this, maybe the manager has to decide how to handle the part that you cannot do or whatever. Obviously you cannot read or whatever, so what can be done? But the skills required for that job has to be developed and available. I think not enough disabled people train themselves to that part. Not enough people do their part to be qualified to be higher. But there are also some people that I think I admire them though.’

(38:00) ‘In the teaching profession, you know, now there are blind people taking exams to be teachers and they go teach in regular schools. So blind persons teach sighted kids! So that way may contradict what I just said about all that but just some

examples, but I think over all it's like what I said. There are lecturers in universities who are blind and they are teaching in regular faculties, not like Ratchasuda college but they teach regular students in the field that they learnt, like politics or political science or psychology, or whatever, you know. So there is more and more of that. But I think in the states they've done that for a long time before this.'

(39:35) Why don't enough disabled people train themselves?

'I'm trying to think, I'm not quite sure. I'm trying to think like everybody. We have a system, I think everywhere in the states or over here, we try to have a system so there's a way to help. You think disabled people become disabled, of course they don't want to be disabled, they might be born disabled or got in an accident then you got to go through counselling, adjustment period, you got to go through some kind of rehabilitation training or whatever. I mean, all of that is good and you got to help them to get education and help them to get a job and all that, but in reality I don't think the system helps disabled people get jobs that much. I mean, a disabled person who wants a job, they care about the system. They may get some help, they may get an education, they need a job, they look for a job, they go in for an interview somehow and they get a job and start their career, without the system to help. I think everybody thinks like that, to try to get work on their own, somehow. Because basically it gets back to your living and bread and water, and making money and food and feeding yourself or you have a family or whatever, you know. One needs to keep going if..doesn't have to wait for the system to get them a job.'

(42:47) But why do I think that people are not qualified in Thailand? I'm not sure but I think what I said is just from my observation among people that I know, or what I heard from the employers. They like disabled people to come and be able to do what they want to do but it's hard to find qualified disabled employees. I'm just saying from what I heard. I think. It's hard, I don't know. Some people may feel like they cannot do much also.'

R: Their own perception of their abilities?

Some people may be disabled and they cannot do much and they just stay at home, let family take care of them, or some people just do a little bit that they can, whatever.

(44:20) R: So also in the attitudes of people about themselves?

Yeah, it's hard. This may be off the subject but I was talking to people about inclusive education. You know the idea that, let's say a family has a disabled child and back in the Western world they will say, 'keep your child with you' so family connection is more important, right? Keep the child at home, with the family, getting the love there is more important. And also, nearby. Go to local school. And then there'll be special teachers to go and help now and then or whatever, but keep your children where you live and go to local schools. Unless it's really severely disabled children for certain institutions or whatever. I talk about that in Thailand, that is the ideal situation isn't it? You stay at home with your family, with your mum and your dad, that's where you get the love and you go to school where you live.

(46:15) Instead of going to residential school. Like Bangkok school for the blind, it's a residential school right? You stay away for most of the year, you go back for summer breaks, things like that. But when we start discussing, in Thailand some parents, especially low-income parents, they are glad to send their kids to residential school because they feel that people are taking care of their kids and now they can focus on working. So the idea of staying, keep the disabled children at home with

parents is an ideal thing but it's not like that in every case in Thailand. It only works with rich parents, with rich families.

R: Because they don't need to work?

Yeah, yes. They're doing well, maybe they can, the mother can stay home and stay at home with the kids or even in some cases they can even hire an assistant to help to tutor the kids or whatever and they try to focus on that ideal situation of stay at home with mum and dad and go to local school, you know. But I don't know why I went to that example but I just thought about it that it's not always, whatever I saw that is an ideal thing it should be done in the Western world it doesn't always work in Thailand.

R: No, no because it's a different culture.

(48:22) There's a lot of people in a bad situation, I don't mean bad bad, I mean like poor situation or just struggling to make ends meet, that kind of thing you know. And on top of that they get a disabled child, you know? It's a very stressful thing for some people, difficult situation.

(49:30) Transport, role of civil society and disabled rights movement.

(50:40) I think Thailand system still needs to be improved and keep improving as far as accessibility and different disabled groups need different things, the blind, the deaf...I'll just say, four groups for sure, you can divide them into more than that. But visual impaired, hearing impaired, physical disability and maybe learning disability. They all are different, you know.

(52:00) And I think transportation is more, from my sense of the demand in Thailand I think the physically disabled group push more, demand more in this area. And of course it has to do with architecture, anything with architectural environment, accessibility into buildings, ramps, lifts and all that stuff, they push for all that. Handicapped parking, handicapped bathrooms. Many handicapped bathrooms throughout the country now. But transportation, people with physical disability seem to have stronger voice in that. But from my perspective, I think it's more like a dream no? I don't hope.

R: really?

Yeah, I don't know. Things like, as a blind person, to be able to get on the bus, of course it's hard, you need to ask somebody sighted along the way, on the sidewalk, please help wave a taxi for you, please help look at this bus number for you. Totally blind is difficult. I don't know there's a way to change the whole system to make it better, it's hard. Once you get on, we make it among the difficulties like this. A nuisance way of living but once you get on the bus of course, knowing where to get off to stop and we learn to know the direction and observe the turns and all that stuff but to know approximately, sometimes we have to ask someone sitting next to you or the person who takes the money to tell, to make sure you get off the right place. And of course, sometimes you get off the right place, sometimes you go past it (laughs) and all that stuff. But, you know, I think people that have to do real public transportation they have to have a lot of patience. And I used to do that a lot too, but lately I mix, I take taxis and go the easy way (laughs). I can pay for the taxi but younger people, students who cannot afford taxis all the time they have to rely on buses, you know.

(55:40) I think the BTS is quite good, it has its staff to meet us and take care of us and have the way to do walkie-talkie to tell the receiving end to come and get us and

that's quite good. The bus system needs to be improved but I don't know if it's going to be improved or not. Also, again back to the physically disabled, I heard that they are getting lower level buses so that it's closer to the sidewalk and so people with wheelchairs can just go on easily. I don't know how much they have done that?

I don't know how many..there's a lot of physically disabled people do they really rely on buses? They demand a lot but do they actually come out and do that?

R: I guess the argument is that if you're in a wheelchair you can't use the buses at all so you don't have the choice.

Yeah, but then it has to be the whole environment, the sidewalks have to be ramps, there has to be curb-cuts, to modify it, you cannot go to...basically from where you live to the bus stop you have to go easily, independently, right? If the society doesn't provide that it's difficult for them to come out and wait for the bus. But I think it's worth exploring different options in public transportation.

(58:35) I like to have people say the stops for example, sometimes they say, sometimes they don't say. But I must say, after all, living in the society you have people. You have people that you just have to open your mouth and say what you need – some people will help you, some people will ignore you, you know.

(59:15) And the nice thing in Thailand is, I guess the saying is that Thai people are *jai dee* and once they see ok you need help, they'll come and try to help. *Euua feua phuua phaae, jai dee* but the Western world...well, they have that too but there's a more like a my space, or independence – *tua krai rua mun (each man for himself)*. I like the easy-going *jai dee* attitude of Thai people as well.

(1:00:15) We would talk about waiting for the bus, we don't know which bus is coming, we meet somebody at the bus stop and say 'please let me know when this bus comes'. I don't know if they joke around or it really happens, I think it really happens also. So the person who offered to help, they had a well-intention to look for the bus but apparently that person is going on another bus, so when his bus comes he forgets, he just gets on his bus and he's gone. So that blind person is still standing there thinking that there's another person standing next to him looking for the bus for him and all that! (Laughs). After a while, he found that out and, I think it can be told as a joke but I think it happens as well (laughs).

(1:01:50) How effectively do you think that DPOs collaborate with the government and private sector?

I think whatever they do they should include disabled representatives to come and think and I think they are aware of that more and more and they invite disabled people to come and talk more. So I think it's moving along, and if disabled people have problems and they see it's not working, they will, it gets back to what I said, they will say what they need, what they want. And the stronger you speak the more often you complain, sometimes things will get done.

BTS used to not have elevators and it is kept pushing and talking and talking and now it is there. So I think it is being worked out, how effective it is? I think it is. I would not say it's very effective though. I think there's still different sides, have some reservations of different things but they are willing to come together to talk, to listen to disabled people. And I think they are doing according to what disabled people want more and more. I think it's going to get better.

(1:05:00) I don't think we're going to have, I don't know if you know about the Japanese model, I don't think we're going to have Braille blocks all over the place

like that. We more want to have warning than guiding so when it's really dangerous you have some warning tactile, but not a guided everywhere, that kind of thing.

R: about not having Braille blocks everywhere as unnecessary.

I think the way blind people travel, we don't know every route, there's no way we're going to know all the routes or how to navigate from certain places. If it's something that we know we're going to go all the time, let's say I come to the college and I live in the dormitory and I need to come to this building every day, sure, I need to learn the way and have somebody practise with me. Once I know that I can be independent. Or if I want to go across that big bridge to go somewhere, maybe I practise some. But no way we going to know how to go to all places. So the way we travel is a mixture of things, walk by ourselves, some us transportation, some arranging for motorcycle, to taxi, to friends, buses or whatever. But one thing is we need to know our destination, we need to know where we are trying to go, have an idea of how to get there, yeah, whether it's by bus or by taxi and just go for it.

(1:08:00) I go to Khon Kaen, it's my hometown in the Northeast. I get a taxi to the bus station from my home in Bangkok, of course I don't know what else to do, but I get off at the bus station, I try to get staff there, security guard or whatever to help me, a sighted guy, you know? I need to rely on sighted people but I know where I'm going to go, I'm going to Khon Kaen, you know? I go to the counter, I get the ticket and of course, I don't know where the seats are, the waiting area, someone needs to take me to sit down so I think it's all obvious. You don't need to learn all the routes to everywhere, I think the Braille blocks isn't going to be helpful for every situation anyway. So when I get to the waiting area I wait for the announcement then I don't know where the bus is so I stand up, I walk a little bit, I yell out a little bit, I ask people next to me please help take me or whatever, maybe the passengers will take me, maybe the staff will come and take me but I get on the bus somehow. On time! (Laughs). And I get off at the end and I get to go to my house, somehow. Whether somebody over there comes to pick me up or I get on local transportation. I need to know where to tell them to get to my house in Khon Kaen or here, in Bangkok, I need to know that. I need to tell them the directions where to go. But along the day you need to know an idea of what your goal is, what your destination is and you keep going until you get there.

(1:10:24) I travel by myself on the plane too, you know. When I have projects to go to, Cambodia. If I can take a sighted person with me I go but sometimes I go by myself to do projects. It's more difficult to go to a country where you do not speak, and sometimes they can't speak English with you. Sometimes I go to Malaysia by myself and it's challenging, it's difficult but I get to my destination somehow, and get to do what I need to do and get back. But of course, is it easier to go with a sighted person? Sure, have a sighted person to go with you, sure it is easier.

Airlines not accepting blind or partially sighted people without an assistant.

(1:11:30) Of course, it's a stupid policy because some of us we travel by ourselves and we don't have the money to pay for another person. Unless you're going to give us a free ticket for an accompanying person. So we go by ourselves and I think I heard of that story too and I may have been involved in a situation like that. But I just told them I've come by myself and I don't have anybody here but I need to travel. I think they changed that to allow, sometimes they ask another passenger, would you please be a buddy for this person but it's not that necessary, as long as there's staff to take us on the plane. They try to arrange us so we don't sit near to the emergency door, I understand that. I don't want to be the person responsible for opening that emergency door (laughs), so we would be far away from that

emergency exit. But having someone sitting next to me, a sighted person next to me or travelling along with me, no it's not necessary. As long as you have staff to take me and I'm not going to ask you to take me more than what you need to do, take me out of the plane and get my luggage and go to the waiting area and I'll take care of that. If I have somebody picking me up they'll see me, if not please take me to the taxi line and I get on the taxi and I go you know. The whole world is sighted, you know! A little bit of help, what's wrong with that?

(1:14:00) I've done a lot of travelling like this, I go to the states back and forth by myself many times. People ask me 'how do you travel by yourself?', oh come on, it's not that hard.

Willingness to help of other people?

I would say, it doesn't matter, Thailand or in other countries. Of course in the countries where you don't speak their language it's more difficult but in America or Thailand there's people willing to help, somehow. But America is more business like, it's more rushing, you know? But you can still get help somehow.

Interview Monthian Buntan

Date: 21/04/2017

Duration: 53 minutes

Location: Thai Parliament, Dusit, Bangkok

*Interview conducted in English

R: Can you tell me a little bit about your current role as a senator and how this has linked to your work on disability rights?

M: Yeah, actually the official title has changed due to the military coup two years ago. I served as a member of the senate from 2008 until May 2014 and then there was a coup, which means that my position was dissolved. I stayed unemployed, not exactly but without any official title for two or three months and then the military government decided to appoint me as a member of the National Legislative Assembly, which is an acting single chamber, acting on behalf of the lower house and the upper house. So this interim assembly is like a two-in-one. Acting as a lower and upper house at the same time. So I've been serving in this capacity since July 2014 up to present and it will probably continue that way for a year or so, until we have a general election. So that's my official title. And my disability related work, well, too many hats and I'm currently serving as the president of Disabilities Thailand, which is an umbrella organisation of National DPOs getting together. I'm a member of the UN Committee on the Rights of Persons with Disabilities and I'm in my second term, I just started my second term this year and so I will continue to serve in this capacity until 2020. And then the rest are different hats, like I'm an honorary life member of the World Blind Union and after serving as Executive committee for four terms and I'm a board member of APCD and so all of those are ongoing.

R: What would you say have been the main factors on achieving progress in awareness of disability rights and progress on disability rights in Thailand?

M: I think at the policy level we are, I am at least to some extent, quite satisfied with our legislative achievement. We have one of the best laws in this region, we just, this morning, again we're going to ratify the Americas treaty (?) to have cross border access to books in accessible formats and we just, a few months ago, ratified the optional protocol to the UNCRPD. This is the first country in this region that ratified the optional protocol, no other countries would do that, which means that individuals with disabilities after going through exhaustive lists of remedies available in the country, the individual could then file a complaint to the committee directly, so then the committee can then back investigation, whether there's any violation of human rights. So that's, in principle, logistically, even policy I think we are quite satisfied to some extent when we compare ourselves with say 20 years ago.

4:35 However, in practise it seems to me that we have not been able to materialise such legislative policy progress down to the practical level, the societal level, the attitudinal level. So, you could have a good policy and once the policy is put into place people could still ignore it. And from your observation on transportation you can probably see, even after the high administrative court ruling, Bangkok authorities still slowly and gradually follow the court order without feeling ashamed. So they just do it when they're ready. I think some people would feel very embarrassed, you know, for some countries I would say, if they received this sort of court ruling they would feel ashamed (R: that they haven't complied with it?) Yeah, yeah, but these people they can just walk away and just 'oh you know, we will just

do it when we are ready.’ So that’s disappointing to some extent. And transport is concrete enough that you can go after the failure or the slowness. But what about access to something more abstract like information, you know. The implementation is even slower, much slower. But, lets come back to the transportation. We were almost able to secure purchase of the low-floor buses, but then because of the scandal of tax avoidance or whatever, false tax report to the government could cause the whole thing to be jeopardised. We don’t even know the fate of those 489 low-floor buses, what they’re going to do with them.

R: It’s such a shame, because that would be a real development for Bangkok.

M: Yeah, I mean, I’ve been after this since the inception of the project, since I’ve started to serve as a member of the Senate in 2008. We invited the Bangkok Mass Transit to testify in my standing committee many, many times. It’s very difficult to convince them to change their minds because they thought that low-floor buses wouldn’t work in this country because Bangkok is still underwater sometimes. Why do you think you cannot change the environment? Why do you think you just have to live with it like this? You know, but finally, they gradually changed themselves. Again, not only because of mind-sets of people under the ground level, under the practical level, we still have a lot of difficulties in a very hierarchical societal style of management.

R: So you think it’s a problem within the organisations themselves?

M: Oh yes, yes. Across all the different Ministries, and that causes a lot of problems because now disability issues are still centred in the Ministry of Human Development and Social Security. Even when it’s supposed to be handled by all Ministries by law people still feel that all roads will go to this particular Ministry. So it’s a non-disability related problem. It’s the governing style, it’s the infrastructure, it’s the governance of governance.

R: So what do you think the best way that this could be solved, in your opinion?

M: Well, many things. I think that right now we have the CRPD, we have the optional protocol, we have good law in the country, we have some persons like me in the parliament, but we need to do more of the public awareness raising campaign. And we need to put a new paradigm shift, a new concept of disabilities by investing and accessibility isn’t a social investment, it’s a long-term economic investment. And it benefits everyone, it means that the whole country, society benefits. It means that society will be more productive, it will be more energy sufficient, it will be more inclusive and it means that the tourist industry will flourish even more. Thailand is so proud of its hospitality and it’s welcoming environments but it could be even better. They could make a lot more money. So that kind of mind-set, so you know, looking at disability as something else. A human rights issue, a social development issue, rather than welfare or just charity, sharing to the poor, that kind of mentality. So we need to do more public campaigns, we need to do more of that.

R: Could you elaborate a little bit more on the attitude, the current attitude and as you say the charity model of disability, ‘looking after’, and how you think that might change?

M: It’s changing, but very slowly, but it is changing. We never tell people to stop feeling sympathetic, I think that’s counter-productive. But I think feeling empathetic is not enough because you can lose your empathy any time. You can feel differently right away once you’re emotionally distracted, right? But if you look at numbers, if you look at economic advantage of investing, if you look at the overall picture of the country, the advancements politically, socially, economically, then you will think

that that makes sense. So we really need to educate people that combining good will with more strategic thinking about how to move with out investment. Again, but I think we spent too many years on the social aspect of accessibility. Of course now we have more human rights aspect but I think we need to do more on the economic side, economic benefits of investment on accessibility. You have to look at why a gigantic company like Apple can go out and say that accessibility is their business. Why not transportation? Why not physical environment? You now, you can get stuck with the mind-set that we are a caring sharing society and you know, but why don't you say we are making business out of it. We are making economic advantage out of this? (R: it's a marketing strategy) Yeah, so we can say that 'we are so proud and look at our business model', or something like that. So we should be more aggressive and we have to sell this idea to the economists and to the business investors and to the thin-tanks that gives advice to governments. So that's why I'm shifting now, not shifting, but put more focus on a business or economic strategy on making money out of accessibility rather than feeling like, oh wait, are we investing too much money? Who is going to use it? How many people are going to use this elevator? Or lift as you say in the UK! So, alright, so look at the positive side of it, economic advantage of it, I think that would be more promising. (R: Yes, so achieve progress quicker). Yeah.

(14:40) R: So, in terms of the role of civil society and the DPOs, how much or how effective do you think their involvement has been in terms of government change.

M: Well, I think they're doing quite well, actually, they've been to court many times. But only people in Bangkok and surrounding greater Bangkok. Most people outside the urban area tend to focus on basic living and also Thai people don't like to go to court. And even though we have a good law, we have a complaint mechanism, they could come here or they can go to the Department of Empowerment of Persons with Disabilities, they can go to court, but most would rather complain in a seminar or conference. They don't want to be targeted as radical, they don't like to me like me! I've been known in my time as being radical. Radical, but diplomatic, it's kind of a personality conflict. (R: Maybe a good combination) Yeah, so good that we have a good infrastructure, that we have a good structure of disability movement in this country. But when it comes to the content we may need to develop further. We may need to develop the mentality of not surrendering. The mentality of fighting for the rights and protecting their own rights, claiming the rights. So the infrastructure of the movement is there, we even recognise by law but many countries don't have that, you know. The movement, the infrastructure is there but the mentality of fighting, the mentality of claiming and protecting the rights in my feeling, I think it's still centred around the mentality of disabled people in some certain aspects.

R: Just jumping back to build on what you've said about that, why do you think that is, why do you think there is such a reluctance to fight and reluctance to claim rights from disabled people?

M: Well, because of the cultural context. We're supposed to raised to be tame and obedient and feel grateful, right? As I said the law seems to go beyond the norm of the society (laughs) our law is far more advanced than the societal factor, the societal culture. Even the mindset of victims is sometimes surrendering, you know? So that's why I always keep saying my motto: I've given up on giving up. To remind people that you cannot, ok you can give up but you give up on giving up. You should not surrender. You should not give up. It's a feeling of surrendering, that contentment, that what we've received is already enough. We should be thankful, we should be grateful and the sense of claiming the inclusiveness, the equality, the non-

discrimination, which is already in the air is still now, I would say, being put into practise to the ground yet. Although I say it's much better than 20 years ago.

(19:20) R: Yeah I can see a lot of progress has been made in the last 20 years. Tying back to what you said earlier about the society model and the hierarchy, how do you think this ties in to the feelings of disabled people and their reluctance to fight? Do you think that's part of it as well?

Well, I think because changing the societal behaviour was thought of being a threat to the establishment. This is just a general thinking, OK? Not necessarily specific to disability issues. However, I think we don't need to challenge the establishment. We can point out to them that there are greater benefits, even for themselves, to promote disability inclusive development, disability friendly environment, you know? Disability accessible environment. So it's to their advantage as well, so I think perhaps both disabled people and other people do not feel at ease with the idea of changing the mind-set because they thought it would be a threat to the establishment. When I say establishment I mean the whole fabric, the whole social fabric of how children pay respect to adults, how we do certain things in certain ways. It doesn't mean that way necessarily, you can still be calm and polite but you don't need to victimise people, you don't need to exclude people by doing that, right? And you can continue to gain a lot of benefits out of tourism and you can do a lot of cultural tourism, there's nothing wrong with that. What if it's more accessible? What if it's more inclusive? It's beautiful!

R: Yes, somehow if we can work out a way for both to go together...

Yeah.

R: You already told me a little bit about the attitude of transport service providers. I've seen...

You know, I'll tell you my story. It's always been a favour for me to go on the bus. And you always run into the coin-collector, how do you call that in English?

R: We would say a conductor

A conductor? Ok, but not driver?

R: Well, we don't have conductors in England, we only have the driver and he collects the fare as well.

Yeah, ok, whoever collects the fare – it's always a great favour to many of us when he or she says 'oh no we don't charge you'. You know, it's a great *favour*. I don't like that kind of mentality. I don't need to be exempt from paying. If they think it's too much money for disabled people to travel they can make it known to the public and turn it to a public policy but what is more important is services. Good services. Accessibility. Safety. Quality. You know? That is more important. And don't make it as a favour to an individual. But people don't get the point. They say 'Why are you so picky. They want to be nice to you, why are you so picky?'. I say, well I would rather pay money, I would rather pay for the bus and be treated equally and receive superb services. I don't want to be treated as a beggar.

R: No of course not.

I'm willing to pay.

R: And that mentality comes from the charity model...

Yeah, so I always, people are always shocked by my refusal to sit without paying for the ticket. I say, I can pay, but please treat me well. I want to do that. So that's another point that we'd like to communicate to the whole society.

R: Whose responsibility do you think that is to educate society and to really start challenging the perceptions of people with disabilities?

Well, there are many, many layers of individuals and agencies responsible for this. I think we need to talk about disability concept; a new concept of disability in the schools, since elementary, secondary, tertiary. We need to have public information, talking about good services and good treatment for fellow human beings no matter how different they are from you. All kinds of things. It's almost like a cultural reform. I'm not trying to be too dreadful here by saying cultural revolution

R: No, no we don't want any connotations like that do we!

Like 1960's or something in some countries. But we need that. We really need to change the cultural value. Of course I don't want to be treated as if I'm a stranger either. I don't want people to ignore me either. To be nice is ok, but I want to be treated well as well. I want some friendliness, I also want to get a good service. Yeah, so that's fine. So it's more or less shared responsibility. Especially *we* in the disability movement; I think we should not be shy to let people know how we feel. I think Thai disabled people are too shy to some extent. You can be polite, but you don't need to shy away from getting something right. Straight, tell people what you really think, in a polite way, of course. Individuals must do that and disability organisations of the movement should also be honest enough to let the public know that this is not right. Now of course, so far we have done. Bangkok and Greater Bangkok have been known that we're not going to patient of accessibility or transportation, and some of the services, we've made the public known from time-to-time. But that's not enough, because I would say a personal mentality of many of us is still a passive rather than active, proactive. I think we need to be more proactive.

R: Would you say that that is true of other civil society groups outside of the disability movement? That there's similar issues with...

I think that...well, in terms of policy, you know, legislative and policy change disability movement has done even far better than many CSOs. Many CSOs spend their time putting pressure on government on the street, a lot of rhetoric, whereas the disability movement put a lot of effort on legal change, policy change. We need to do more of public campaign now - now we have good policies, we have good legislation. We also have a good infrastructure, organisational infrastructure, than many CSO's. But then again I think that we are too humble, many CSOs are more aggressive than us when it comes to claiming the rights. I would say the women's movement are more straight forward although I'd say we are much better when it comes to legislative achievement. The women's movement just got the gender-equality law only a year or so ago, so much later than the disability community. But again, we are too polite, sorry, we are too passive outside the parliament. I think sometimes we're not ready to proclaim the right that we have in the law. We're not using it enough.

R: Although the policy is there, it's perhaps not being implemented by the service providers as well because they know that it's not going to be

If you look at the complaints, the statistics of complaints is so low compared to some countries like Korea, South Korea. I served as country repertory I think it was quite shocking to know, well actually it was quite good news to know that the highest rate of complaint against discriminatory practices is disability related. And the majority

of this disability-based discrimination are concerning accessibility, believe it or not, in South Korea. So they are more forceful in that way. Australia, another example. The human rights commission of Australia – the highest complaints to the commission, highest number are disability-related complaints against human rights violation and of course disability-based discrimination but the Australia one is employment. Accessibility is not a priority.

R: But perhaps because they're further ahead in terms of actual accessibility.

Yeah, that's true. You know, we've had this anti-discrimination provision in our law for ten years. The number of complaints is probably very minute. See?

R: But is that part of Thai culture, do you think, that Thai people don't make complaints?

It's too much of a burden, you have to run around and make noise and your image is like attacked, you know. Your image is sort of negatively perceived. Thai people love their face (laughs).

R: Yes, of course. You can lose it if you go round making noise I guess.

Yes, unlike me (laughs).

R: Well, you managed to have kept your face and..

Well I manage to smile and be me (laughs).

R: So the other thing I wanted to ask you about, I know that there does seem to be a lot of cooperation between; there's lots of different platforms for DPOs to come together with service providers and tell them what they want and what they need and what changes they want to be made, for example the skytrain system. But then it seems that this doesn't always happen, although on the surface there's this great collaboration and they're listening to each other and having these meetings but then when it comes down to it, it doesn't happen, and this is what I'm interested in.

Yeah, as I said we have a good infrastructure but when it comes to making priorities a lot of formal disability, formal DPOs don't tend to act on this. We try to convince them, as president of an umbrella organisation we try to convince the national DPOs to take action in a more progressive rights-based approach but I would say a lot of times this movement tends to be delegated to informal gathering, which weakens the effectiveness of the campaign. Like this case of transportation is a very good example. Most national DPOs don't take action on this. So, this action is left to coalition, loose coalition of ad-hoc gathering. So it weakens the result, somehow. Because a lot of formal DPOs are afraid of having sour relationships with government officials, you know, because they're making a lot of money out of government subsidies. Much of it is from our own law that we've fought for, actually it's not a favour. They should recognise that the funding from the disability empowerment fund is not a favour, it's a right by law, so they should not be confused. Still, the majority of them are confused and they think by joining some kind of hush straightforward movement against government officials or against government agencies would jeopardise their sweet relationship, romantic relationship with government agencies so they can enjoy receiving government grants from the empowerment fund. I have a good relationship with government agencies but I criticize them openly; I don't think it has anything to do with it.

R: So you don't think that it jeopardises it?

No, not at all. These people thought that I'd been to hush, many times, but they use my ability to their advantage sometimes as well. If they receive too little budget they ask me 'Sir can you help us during the budget bill debate in parliament', I look at the substance I say 'well ok, I feel sympathetic, you have a lot of things to do and I will do that'. I don't think it's a favour, I think it's my duty to do as a member of parliament. But they should also not take my criticism personally. I think this is a lot of people in the disability movement in Thailand are confused themselves, mixing up a good relationship, with you know, trying to avoid conflict, trying to avoid criticism. So I think this is another problem in our cultural context. I think if more formal DPOs take leadership in this transportation for all movement more openly I believe it will be more effective.

R: So you think it needs to be more collective?

It's more ad-hoc, if you go and observe.

It's very ad-hoc. They don't have enough established funds to help them and most DPOs leaders don't go. Only people who feel affected, directly affected themselves go. So even though within my power I'd say Disabilities Thailand would serve as a platform for this coalition, still most of our board members avoid joining because they don't want to have problems with the government agencies. It's a shame, yeah.

R: Is that the same across all types of DPOs or is there some that are less involved?

They pick and chose, they pick and choose issues that they feel mostly affected. And if they feel that there's nothing to lose for them then they go. So it's, I think we don't have enough public mind, in that we don't feel empathetic towards issues unless we are directly affected. I think that that's something that we really need to improve within the disability movement ourselves.

R: Collaboration within the disability..

Yeah, collaboration. We collaborate when we fought for the legal framework for the policy but when it comes to achieving it, the real practice of such a thing, people are too busy doing their own thing. I'm being self-critical in this sense. And that's not only disability issues, that's all issues in this society. And that's why we have seen the xylo style of administering organisations as well because people don't feel that they don't want to work across all ministries, they want to protect the interests of their own ministries. So you see, very hierarchical, you know, order. Command and control, without comprehensive, cross-ministerial. This is not only disability issues, this is all issues. Which is actually contradictory to the teaching of Buddhism. I mean, it's ridiculous.

R: So you think that this doesn't reflect that Buddhism is the main religion in Thailand?

No, because Buddhism is, if you look at the prayer of the Buddhism, it preaches that all beings are interconnected, you know, are...the concept of selfless doesn't mean nothing you know, it means that we do not identify self as a permanent self, it means that we are always interconnected and we have to move together. So the concept of inclusion is there but we tend to develop ourselves in a very different way.

R: Do you think sometimes the interpretation of Buddhist teachings, or maybe that they're interpreted in a different way?

Yes I think that to the more isolationistic approach, which is wrong, I think. I don't think Buddhism teaches isolationism, I don't think so. Being one with nature, being one interconnected, interdependent is probably more so of Buddhist teaching. But the establishment, the religious establishment, or at least traditional establishment focuses too much on isolationism. (laughs) I'm being critical!

R: Well, it's good though isn't it? Because in being critical you start to unpick the very complex problems that affect these outcomes, things like accessibility and progress in human rights.

Yeah. I think perhaps the establishment, the religious establishment in the - Mahayana Buddhism do better in this aspect, because I think they have a social harmony ideology, like in Northeast Asia. It's the same religion but they choose that approach, social harmony. Whereas in our establishment we choose more of a serenity, isolationism. Actually, it's not supposed to be isolationist, it's supposed to be peace in your mind but people interpreted it wrongly, right? In order to gain peace in your mind you need to isolate yourself, I don't agree with that. An individual path to Nirvana is a misinterpretation.

And this is really, really affect the idea of accessibility; individual path to Nirvana. You know, if you are strong enough, if you are good enough you will enter the state of Nirvana by yourself. It's not that way, actually. So accessibility for all, it means that unless all go to Nirvana we're not achieving Nirvana in our society.

R: What about the role or the idea of karma, or the interpretation of the idea of karma?

Yes, the idea of karma has been focussed on the idea of individual karma and not collective karma. You could call yourself Christian, Muslim, Buddhist, but as long as you think as these whole issues as individualistic; karma is a result of your own deeds on an individual basis so you could only achieve that through you own...of course there's some point in that self-determination but that doesn't mean that you go alone. Independence doesn't mean go alone, right? Could be interpreted by some people that independence means alone, on your own. I don't think self-determination means that you should live alone. It's the same thing, karma. You know, I determined that I would like to be good and to contribute as much as possible to my fellow members of society tomorrow, so we could all go to Nirvana tomorrow.

R: It's very interesting and I think it's very relevant as well, since it's such a part of Thai society and the way people think, and the way society's made up, so...

So, ramps may not be available because it's the karma of the people using the wheelchair that they have to struggle by themselves, it's their karma that there's no ramps on the sidewalk.

R: And do you think that that kind of thinking is quite prevalent, still, in modern Thai society?

People could deny that it is not true, but I think it's in the inner-self. Sometimes people don't realise. If you go and interview people they may not realise. But I think it is part of how people have been brought up. It's none of my business, but only if I feel that I would help these poor people or that I might make good deeds so that I can go to heaven and then I share it with them. But if I feel like ok, I look at karma as more of a collective karma, the social benefit, the collective benefits is through the value of friends and brothers and sisters in the society you take a different approach. And who knows, that person may need it somehow, someday.

R: Of course. There's been a lot of joining together, in terms of accessibility, and the elderly. That seems to be something that can maybe reach out to people because everyone knows that one day they're going to be old and they might need it.

That's what we're trying to do, we're trying to sell the idea of all people benefit because we're all going to get old. However, we have not been much successful in convincing the senior citizens and that we owe it to them and that they should be treated differently. The way they want respect is different to what we think, so that's why we've not been well supported by the senior movement as much as we want to. And a lot of senior citizens are feel retreat, that they have been serving for too long now, it's time for them to sit back and relax and then let go. But I think, let's make a good challenge. I'm making my best bet. Bringing economic benefit is really the key here. So I think that's the way to do it, we're going to have to win the hearts of business people. And once the senior citizens know that they can still enjoy themselves when they're in their eighties. A lot of senior citizens now want to go out, but when they realise that have to face a lot of difficulty they retreat. Once they see that with accessibility, transportation, physical environment, transformation of communication and digital and they can get around so easily and have a lot of fun I think they will be great supporters. But we have to prove to them first, that's the problem right now. Thai people do not approach things conceptually. They approach things through experience. One they experience the benefit then they will join you.

R: Right. So it's almost like a catch-22 situation then isn't it? Because you always need to do it beforehand, before you get their support to help do it!

So disability movement has to be pioneered on this. So you know we're preaching universal design, nobody really knows anything about it, they thought it was only for PWD, but once they get benefit out of it they would agree with us. So right now we need to be more patient and we need to keep doing what we're doing right now. And when they see the economic, let me say it again, if they see the economic benefits of it they will jump and join us.

R: So you just think that it's a matter of time then?

Oh yeah. And money talks in this society.

It's really Nirvana on Earth. (laughs) Believe it or not! Look at the success of one very famous temple, that I don't need to mention. I think they set a very good example, whether you like them or not.

R: Yes, you can't disagree with the business model.

Yeah! So I'd like to apply their model, but I'd do it more positively.

R: That's an interesting idea.

Accessibility for all is really a Nirvana of the whole society.

Mr Supachan Traitruengsakul interview

Date: 4/5/17

Duration: approx 60mins

* Conducted in English and Thai

Lecturer and researcher in assistive technology for blind and deaf – communicative programming for translation of sign language grammar to spoken language grammar.

(3:30) Awareness of disability rights in Thailand in society and government

‘For me as I am hard of hearing, but I can speak to general people. But for my girlfriend she can’t talk much, unclear and her hearing is like almost deaf. But if you speak to her and it’s something that she needs to understand by reading lips then it makes sense to her. But the hearing people don’t consider this. For example, the bank service call her and she says please text her the message, but they don’t do anything for her and seems like they ignore her.’

Call-centre talk to text service – only one way deaf to hearing, the other way doesn’t exist yet. Will call and if you ask them to email instead but they will keep calling.

(07:00) ‘For example, the desk people they want to apply for a job and apply for a job by sending their resumes to the company and they also mention that they are deaf and prefer to send them with email or text. But most companies don’t do like that, so they call to them and the deaf people are like ‘who is calling?’ and cancel the call. I think the big problem is that hearing people have to understand how to operate with the deaf or with people with disabilities and as you can see, the people who are in the wheelchairs and try to get the bus and the bus driver does not accept. And he says he doesn’t have any space for the people in a wheelchair, this is a big problem.’

‘So the last time I remember we had a meeting last month, and it’s very slow progress’

Why?

‘Even though we have the funding for the research, they aim to have people with disabilities, but many researchers want to do that but after they completed the research and send it to the foundation or DPOs or something like this. The president of DPOs may not be clear to the general people and so it’s very slow progress.’

It’s like the Thai people get the research grants, there’s funding for research, for example outsiders will get it like Rachasuda has done some, other people, different universities will do it again. Once it’s done they have public relations. Then they will advertise and ask if anyone wants to continue it. DEP etc will come and find them, I don’t know if they do it or not. It’s like they get hold of the issue and then that’s it. There’s no continuation. It makes the process too slow. They have funds for academics but they should use this research to continue the work. It’s like they don’t continue to invest in it, it’s just spoken about with people in meetings. People outside don’t know.’

‘There are results to the research but it’s like no-one carries it forward. It’s like so what? And if you want to do anything it depends on how interested the service providers are. Therefore, Thai people don’t have the information and understanding, for example how to treat deaf people. You shouldn’t call them up, you should send messages and you need to prepare. For example, people who work in the bank need to have a telephone that can send messages. Or one person needs to be sacrificed and

they need to spend the money to contact deaf people, that would be better. But they don't do it, they just call them. It's like this. It's an attitude that's a communication barrier.'

People don't know how to behave with disabled people – e.g. eating with blind people.

(15:10) What is the role of civil society –DPOs, NGOs, associations in achieving awareness of disabled rights?

Actually, I don't know!

Work for PWD. Low education and knowledge of deaf and hearing-impaired people. High school student's knowledge comparable with primary school. Can follow orders, but problem-solving or complex orders can't be followed. Can work in coffee shops, supermarkets etc.

'I went to work at a company once and I'm partially deaf and didn't speak very clearly at that time. It made one person, it was like they were angry with me, 'what did you say? You don't speak clearly, I've told you before' Like they were teasing me, making fun. Wanted to slap him!'

Changing attitudes – can be done but the older people are the more difficult it is.

Art for all – get High school students and people from outside come along and do art together.

(26:00) The collaboration between government and service providers and PWD?

Actually, in my understanding the government have to set the concensus and set the policy for the PWDs and then force the service providers to change anything to support disabilities and if we don't have the government to set the policies we cannot persuade the providers of anything. So in my conclusion, first the government have to set the rules and then announce the rules and the service providers must follow the rules and after that the providers change or adapt something for disabilities, the cars and the spaces for the wheelchairs, the bus stops so the blind people - they don't know what bus number is coming and they want to hear what bus number is coming, like the technology. But it depends on the government and the service providers, both. Also, hearing people have to understand how to collaborate with the disabilities.'

(36:00) Do you think the meetings are useful?

'Not really, apart from the meetings, who does things? Some people only talk and talk but they don't actually do anything. If there's a good leader, someone with a good attitude and was netural, a mediator, someone who could be on either side, you need to link the two sides. One side agrees, one side doesn't but how do we talk so that we can...we need a leader who can do this.'

Is there one?

[shakes head]

'Do the meetings get results? It's missing, no one actually starts anything. After the meetings are over, who does anything? It's up to each person. But some people don't do anything and it's let go, some people

Greng jai – people working together – neither side wants to pressure the other in order to preserve working relationships.

(41:00) What about disabled people who are working with service providers? Do they feel greng jai?

The one this there is reluctance to impose on (greng jai). The more you want something, for example, deaf people want, do you remember? When that deaf person was standing ‘I want this, that, this that.’ The non-hearing impaired people were trying to do it but how far they’d got, was it too long or not? They didn’t announce the problem solving in advance which made the deaf people ask ‘how long do we have to wait?’ Going to the airport, for example you don’t know the announcements, for example the plane is leaving at this time but deaf people don’t hear, if you can read the sign then it’s ok you can go, but if it says this plane is delayed for one hour then deaf people wouldn’t know and are wondering why they have to wait and aren’t getting on. It’s a lack of information. But they’d told them and then he referred to it like ‘well we’re doing it now but it’s not finished yet’ and it’s too slow. It’s like this and so there’s no progress. And then deaf person wanted to keep asking, wanted to keep on about it and then the non-deaf person asked him ‘have you done anything for them?’

Because...?

‘Because the deaf person was maybe [แบบมี้อ] asking for stuff with no promise of return (?) they were asking for lots of things, technology, he wanted a free telephone, free internet, everything free, like just asking for stuff. And it was like has the deaf person ever done anything for non-deaf people? Maybe some but, how can you say it, he maybe didn’t think about other people. But the deaf person had to stop, like he was greng jai. And the non-deaf person wanted to help, really wanted to help.’

(55:00) Bad experiences of wife – people not understanding her speech and having negative attitude.

Mr Pariya Wesabut interview (MoT)

Date: 9/5/17

Duration: approx 32 mins

Location: Ministry of Transport, Thanon Rachadamnoen Nok, Bangkok

R: Background and work at the ministry?

I: Well, my name is Pariya Wesabut and I'm the director of the central office of the Ministry of Transport, the areas related to disabled people and the elderly that I look after are about improving construction – at the moment we have received the objectives of a survey, a survey of basic structures, various stations on land, water and air, every mode.

(1:18) So, the surveys look at whether this implementation follows what the laws specify or not. So, Thailand has had a Royal Act come in, right? An act that is about disabled people, the elderly, and children. It's similar to the Human Rights Act, it protects these [people?].

(1:52) This Royal Act appoints the relevant Ministries, it's called Ministerial regulations? and each Ministry (เพื่อออก will issue them??). For the Ministry of Transport, relating to transport, we have to issue ministerial regulations relating to transport infrastructure and also including service - service providers have to look after matters relating to disabled people as well. These ministerial regulations protect both of these things – infrastructure and service providers. So, the duty of the central office here is to go and do surveys around the whole country, Bangkok as well, and in each place see does the implementation follow the Ministry? Following the law? If not, we give recommendations of what you need to do. Sometimes, owing to the fact that the law came out after construction has taken place, we can recommend them what to do. In recommending them, we can tell them what to do but we can't control them, just tell them two or three times. In this controlling, we issue a checklist that says 'according to the law, you need to...' and a list of the things they need, or need to do. After the checklist, there needs to be a standard drawing, a (3:26) (???) right? Together. Both of these things we can use to recommend them. We've done surveys in Bangkok already, the East already, the South already, now we're doing the North. That's an overview of what we're doing at the moment.

(3:52) So, the organisations that we recommend, there will be a document sent to them and then maybe they can go and implement it, some things they can adjust straight away and don't need much budget, but anything that needs to change the structure or anything like this needs to be appointed a budget.

R: Where does this budget come from?

I: If it's a government enterprise it will come from the organisation's own budget. [In English > If it's a state enterprise they have their own budget, but they have to propose the project before they get the budget]. But for the government you have to go through a lot of steps as well so that you can get the budget. If we recommend this year, in order to get the budget they have to go through a lot of procedures.

R: And in your opinion is this an obstacle?

I: Yes, it's the main obstacle for the governmental sector, to do with limited budget. At the moment, if you look at infrastructure, just infrastructure, the whole country has many thousands of places, there are stations in every province, but if you look at

airports there are 30 or 40, then there's boat piers, buses, trains, it's several thousand. If we have to do all of these at the same time, it would be a lot - a billion already. So we need to gradually do it on each level. The organisations need to arrange the important things, like which points have a lot of passengers using them, a lot of disabled passengers using them, but for a lot of disabled people using them is quite difficult to see, but we should focus on where has a lot of people using the services, a lot of tourists using services, it's a hub, a transport hub, or in tourist areas, go and do those areas first, improve those areas first.

(6:02) And then as it reduces arrange them by level (?). But at the moment the most problems are with the boat piers, [maritime transport, water transport. River transport has many obstacles and difficulties to develop]. One, is the budget, two is the conditions and capacity (of the waterways) that maybe need a lot of improvement. But there is a plan to do this still. In the implementation, because the waterways have probably the most problems when it comes to travel for disabled people, especially for wheelchairs and blind people, getting on to the boats is very difficult. It's dangerous. Therefore, as far as we've surveyed the service providers, very few disabled people use the services because one, getting on and off is a problem, accessibility is a problem and then if there's an accident on the water helping yourself is difficult, they don't make you wear life-jackets, right? Therefore, for waterway transport few disabled people use the service. They are quite a minority; you don't really see disabled people using it. But you can look at it that it's not just disabled people, it's also elderly people, pregnant women, and so we have to do it. Maybe they will use it, maybe not but we have to do it first.

(8:50) Bus terminals are better than boat stations – although there might not always be low counters for wheelchair users there are usually disabled toilets, parking spaces and ramps.

The five things that are the basic minimum standards: toilets, ramps, disability signs, lifts and parking spaces.

(10:00) Sometimes the space isn't enough, even when people want to make the changes, e.g. with ramps and toilets. Another issue is lifts – sometimes this is a burden on organisations who build them and then no-one uses them. So we have to go and change their attitudes to show them it's not only disabled people using them, everyone can use a lift, we have to change their opinions.

(11:00) R: How willing are service providers to make changes?

If we look at organisations that are under the ministry they are somewhat willing to develop. But the problems are limited budget and that the standards are still not clear.

(11:30) There are several organisations who are involved with looking at the standards. Ministry of Social Dev and Human Security, they have standards and ministerial regulations that generally control/protect the standards. The interior ministry generally looks after disabled people and buildings, and the Ministry of transport looks at buildings that are related to transport.

(12:00) There are three main organisations looking after this subject and every organisation will go in and check, which makes it really complicated. They don't go at the same time. We're just trying to think of how we can link together. We look after transport so we look and things related to transport, toilets we could maybe make a note and send to them.

(12:35) But there's something some thinking that isn't aligned, which makes the complicates the ministry's actions – you do it like this, you do it like this, right? And we should try and get all three organisations together to decide who should be doing what. We're trying to do this but there's still some issues that aren't aligned. For example, on a ramp there needs to be warning blocks – some people think there should be warning blocks before a ramp but some disabled people only want warning blocks to warn when there's a road. So that's an issue of disagreement as to where we should place them.

(14:00) Recommendations from DPOs and collaboration with DPOs?

When we do a survey we invite DPOs to participate in each stage – the research, survey and opinion stages – participation seminars, and we invite every association – blind, wheelchairs, 'mental', carers, children, elderly, women. We invite every related group and they've given us some good opinions and thoughts. But, like I said, each group are going to have different opinions – there's still some conflict between them. For example, blind and wheelchairs will disagree quite a lot, because blind people want warning and guiding blocks but wheelchairs say that sometimes these make them get stuck on them.

(16:00) This is a bit of an issue, to get everyone to see eye-to-eye, so that everyone can use everything. Airport – is very convenient and so has a lot of people using it. If a lot of people use it there tend to be a lot of comments.

Mostly comments are about ramps, or parking spaces not near to the ramps. No signs telling you etc. Some places don't have signs.

(17:30) Disabled people are very active. They give their opinions regularly to the Ministry.

R: Are these from every association or just some?

Who come most often are the association T4A, they are the most active and they have prosecuted the BTS because they didn't have lifts for them. That's an issue because the BTS built before the law came in and they are doing it.

(18:32) As for other associations, they try to participate, and come to meetings, they're somewhat active. And then there's Line group, the Friendly design group of Mr Kritsana, many groups. We invite many people and then go and survey different places, government places, private places, schools, hotels.

(19:26) It's an information exchange. But I want it to be formal.

R: But at the moment there's not a lot of collaboration between the ministries?

(20:00) At the moment we're thinking that there should be more collaboration and everything should come under one ministry – no need for it to be divided into three, it's complicated, and there's a recommendation of what we can do to make it all one, so we can all use the same standards and the people executing can all do the same thing.

(20:27) But the host of all this is, of this this implementation would be the Ministry of Social Development and Human Security. They need it to be like that - to call us all together to talk and then issue the same law. We're waiting for it to be like that. But it's good we have the same standards – there are only two or three standards that focus on different things.

(21:00) R: What importance do you think that accessibility to public transport has for PWD and for Thai society?

I think that everyone is equal and it's the duty of the government to look after and ensure that every person in society can access state services equally, conveniently and safely. This is something that should always be a standard. We shouldn't leave anyone behind. It's in the current policies that we should look after everyone, every group, every bodily condition.

(22:00) We also need to look at the future that Thailand's population is ageing. Everyone needs to be ready and prepared to meet with this. As elderly people increase, the needs of services to abide by standards increases otherwise the future will be difficult. Therefore, it's a duty to prepare everything, in every area. It's a collaboration between the private sector, they need to also participate and there is a law enforcing this already. We need to look after livelihoods, and services of every type. I think we need to understand the needs of each group as well, how much support they need. It doesn't necessarily mean they need it, and elderly as well, some people are able to look after themselves, and so the government needs to change the environment for them so they can look after themselves. We need to do it in every area.

24:00 R: What objectives and plans do the ministries have in developing the PT system so that PWD can access it in the future?

At the moment the ministry has a strategy to develop the standards in the future 20 year period, for the public transport system all over the country. In the short term, we need to link the organisations.

Green transport, environment, service, safety, accessibility, inclusive transport. This is the strategy.

(25:00) In the next 20 years these points, in the Ministry of Transport, have got to come into place. If there's any developments or if we build anything new, if there's new trains, we need to know already that the station must be accessible for every group and convenient. And that includes links together with other transport systems, so that it's convenient. That's for buildings.

(26:00) For cars, we need to certify and correspond with the standards also, disabled people's cars that come in, once they're bought they need to be certified. We need places for disabled people, so that they can get the benefits and help themselves, conveniently. That's the strategy of the next 20 years, every mode, land, air, water.

(26:44) R: Is there anything you'd like to add about the attitudes of service providers or the general public?

This ministry shares its work with the Office of Transport Policy and Planning, do you know them? They take responsibility for changing the structures for PWD. There's also services, the service providers and there's training for every mode, we've done it many places.

R: Is this a requirement or optional for service providers?

At the moment it's a collaboration - it's for service providers that have a lot of disabled people using the services. There's a technique for making enquiries with disabled people and how to help them, pushing wheelchairs etc. We need to know how to approach it.

(29:00) How successful is the project at the moment?

We need to survey again, look again at how it's been implemented. We'll probably not see the results of old projects (improving existing projects?) for a while, not straight away. For new projects, we need to do it 100%, it needs to be certified. It needs to follow the laws. Any new buildings must be certified.

(30:45) R: What's been the biggest push for change?

Clear policies. For policies, the government and the ministry - if the Minister sees something as important and follows it then it'll make the organisations more aware, the government are focussing on this, we need to hurry and do it. It needs to be a priority, but also have the budget to do it.

Elderly people and disabled people's organisations working together. If it's clear in this area then it will be successful. The policies need to be constant and it'll make it be a lot more consistent.

R: And the obstacles are budget?

Budget is an issue but also if the importance isn't recognised then the budget might be spent on something else. They need to come together.

Saravut Eksuwan Interview- (MRTA)

Date: 16/5/17

Duration: approx 50 mins

Three areas – New Purple line; Blue line extension (open for three years); Green line – extension of BTS in the South to Samut Prakarn and North from Mochit

Three departments that look after trains in Bangkok – State Railway of Thailand, BMA and MRTA. All separate.

Don't really work together or build together because of policy and budget.

Twenty people in the office but the whole department is about 1000 including engineers, lawyers, architects etc. Architects look after stations, facilities and accessibility etc.

(4:30) Is there someone who looks after accessibility especially?

There are two architects who look at universal design.

(5:00) Why is it important to have facilities for disabled people to access PT?

It's a basic need. It should be something that comes with the designing process, like when we design a house and there's a bedroom, a bathroom, it should be a basic function. Everyone needs to be able to use it together.

Used universal design before the laws came in – they saw the BTS problems and implemented universal design beforehand.

**Universal design – shouldn't necessarily just be for disabled people to use. Like lifts, disabled people can use, ramps they can use, anyone can use it. We don't need to divide them.

The standards of MRTA – (see drawing) include access by lift already for inbound and outbound journeys (2 points) up to the platform. But for a crossroads, where disabled people might not be able to cross they would build extra or at places that were limited access.

(10:50) Land acquisition – need to get the land off the public, which caused a lot of opposition. It's people's houses or businesses. We can't just build lifts wherever we want, we have to ask for permission. Not able to build lifts directly because of flooding – has to be elevated 1.2m everywhere. Looked at the flood records for the past 200 years. Stairs and ramps are needed but ramps caused an issue because of the regulations which denote the dimensions –takes up a large area for land acquisition – if people refuse then they have no choice, can't force people.

(13:00) Try to explain to PWD about lifts and the necessary number. The purple line – during construction 'the different association have separate opinion so when some of them visit our project and they have feeling that it's not a good facility and they, some people, the big group who are the authority they accepted it. But there were some groups who didn't accept it.'

R: Maybe the groups have different needs?

Different needs and don't talk to each other, didn't come to a conclusion of what they wanted as a group of disabled people. We wanted them to come to a conclusion

of maybe what points they wanted so that we could all go in the same direction, but they didn't do it. That was an issue for us. Mostly that was the only problem, that issue.

(16:00) Constant meetings with the disability council because they join the meetings with the ministry of transport and they're the main authority so they have to trust their recommendations first. Otherwise it wouldn't work.

'There would be meetings at the Ministry almost every month, there are still now and the Ministry follows up all the time and they'll write a report of which organization has what to offer, and make a report each month.'

Only the disability council attends as one partner of meetings organized by MoT.

(18:10) Old stations – lifts added later.

Stair climber equipment – 'disabled people come here and say that they accept this and then MRTA bought this machine and others came and 'no, no, no'.

For existing stations with no lifts – for some cases.

(20:00) Evacuation times and ramps etc.

(23:00) Is there anything that will be changed in the future or done differently?

'Not much because we learnt from our past but I don't think it's a big change. It's similar but we improve for the visual and sound and signage and maybe the position of facilities but not completely different.'

Took on board the recommendation of the light-up board that tells you each station where the train is at – came from the suggestion from the deaf community.

(25:00) Do you think the project has been successful? Are the associations satisfied?

'For the associations, in the meeting they're satisfied because we have a conclusion in like a side visit and they came back and visit to review our project and develop the existing project to have more facilities and they said ok. But not for all associations. I think now in the MoT they have a consultant to review all the projects under the Ministry and we are involved in that project to review and develop the existing projects.'

Disability Council and BMA.

'I can say for the MRTA it is the best, the best example for the disabled planning in Thailand.'

(28:00) Buses – BMTA. Under MoT. BTS is under BMA.

Limited access for bus and boat but train has developed a lot.

'The main problem is the way that they travel from home, it's difficult, the pavements.'

R: But BMA look after the pavements?

Yes.

Do MRTA consider pavements when they build?

‘We have, when we construct we get the land and we have the right to construct only in this area, so we improve all the things for the people, like we make ramps to get up and down and cut the corners off the pavements so you can walk through, and do these things.’

R: But outside this area you can’t?

No, it’s not allowed.

(31:00) R: Is there any collaboration at all?

‘There is but loosely (?) Thailand doesn’t really allow that much collaboration and so we try to do things as best we can in our area. We try to notify them but sometimes they don’t do it.’

R: What’s the problem here?

The budget is divided. Do building work about 3 years apart.

R: And this is a continuous problem?

It’s even worse when it’s across Ministries, if it’s not within the same ministry then it’s really difficult.

(32:30) R: Yes, I can see that there’s about three ministries responsible for accessibility and they don’t always go in the same direction.

Sharing areas of Bangkok is difficult in that (???) in giving us areas to build on.

(33:20) R: What’s the main obstacles?

Budget. Because compensation has to be given and there’s a timeframe – if the public won’t give up land then it impacts the structure. Can’t just take land off people, they have the right to be there also.

‘I’m not complaining about them but you have to look at the issue, for example lifts, wheelchairs hardly ever use them, it’s a long time, perhaps a month and then we have to go and expropriate land and make people move and live somewhere else for something that’s hardly used, it’s difficult to give an answer. It’s shattering the life of those people. There only needs to be sufficient for use so that they can use it - not too much of a problem to use but you have to ask are they able to move from (???) they are able to use it all the time, didn’t say that they had difficulties. There are signs saying which way you can get up, just that. They need to understand also that they’re demanding their rights, demanding their right to things that they need but they’re affecting the rights of other people and they shouldn’t. Because they have the right to stay.

(36:00) Anything else?

(37:00) Need clearer objectives from collaboration as to what they want (associations).

Can’t just agree to do whatever someone says when it’s not been agreed previously (by associations) because it means in the future the agreed requirements can also be changed/ignored by unofficial bodies who come along. It’s got to follow on from the opinions that have been given.

Wants them to agree to other methods when their preferred one (e.g. ramp/lift) isn't possible (because of limitations on structure etc) – stairlift etc. Hydraulic lift (draws diagram).

(39:00) R: But they don't want it?

'They want a ramp. But a ramp takes up a lot of space and because it takes up a lot of space we'd have to go and take land off people. If everything has got to be perfect it's going to affect other people.'

(39:30) R: but they're scared the lifts will break

'But MRTA's lifts are serviced all the time.'

R: You mean that the associations aren't happy?

Yes.

R: Which other groups?

Transport for All.

'They have somewhat of a negative opinion. They only started about 3 or 4 years ago.'

R: In that time have you spoken to them?

'We spoke to them in the beginning but then they had somewhat negative thinking, and although it was a collaboration they would go and curse them and so no-one wanted to collaborate with them or be tied to them. After meetings were finished they'd invite the media to come and announce the information and we hadn't yet confirmed what we wanted to do, what we could do and they wouldn't accept that way of doing things so it all went backwards. This group don't really have...after that we would avoid them. We focused on the associations more because we believed that it was right by the law. Because if anything happens we've passed the associations.'

(41:30) 'Sometimes it's like...the rights, they've given their views but the association have given their views in the past and they have to respect that the association have views as well. Not that they don't agree and so don't want it and want everything changed, no. It's been a conclusion since the past and it has to end, there's been an agreement already and they need to respect the decision. It can't be that new people come along and aren't satisfied and so we have to change it.'

Need to look at what can and can't be done and MRTA need to make the decision.

R: Apart from coming to meetings will they come to assess new stations etc?

Yes, but it passes the ministry and they come as a team. We have our staff go as well and they go and check.

Will make small changes afterwards etc.

R: In your opinion what has been the biggest help in developments of accessibility in PT?

(44:00) 'Actually it's been the collaboration but creative collaboration, people coming to join and like it's the real form. Say if we work together as friends and everyone works together and try to work without accusing others or blame all the

time. If we work as a collaboration then the work will really develop faster. It has to be positive thinking, we need to change the attitudes...because everyone wants to do it already. It's only that they need to understand what limitations there are. Everyone, every department are trying to do it. But it can't be that we do it and then people get criticized, people will get bored. They do it but we try to communicate with them less.'

R: You mean communicate less with..?

'With the disabled groups. Because they tend to be negative and very aggressive.'

R: So you try not to communicate with them?

'Yes, because when we go to meetings we get complaints we get criticized. I know disabled people who I'll talk to and there are many who are lovely when we talk. I'd like to emphasize the working environment – if we're going to communicate with them. But for development we have to look at the development...at the moment it's what we call a main issue for arranging the associations of the disabled, at this time it's developing quickly. Everyone understands that it's something that has to be done, it's basic.'

(47:00) R: Why, because there's more understanding? Or policies?

'there's more understanding.' Ageing population – looking after elderly parents so everyone has their own experience. Everyone knows its necessary when they take elderly people out of the house. Elderly people like disabled people. Also young children and babies. They can experience it themselves.

(48:45) Communicating with many groups helps. Understanding between every organization and the work would go better, instead of blaming each other. E.g. Friendly Design of Kritsana – everyone collaborates with him – a good example. Attitudes of working together.

NADT interview - Ms. Kaewkul Tantipisitkul (Committee member)

Date: 27/4/17

Duration: 30 mins approx.

(2:00) 8 people on the committee. Voluntary position.

(3:00) Main activities of the association – supporting and improving lives of deaf and hearing impaired people. Projects, raising money etc, awareness of laws etc, activities with Thai sign language.

(4:30) How is the association involved with improvements to PT?

About the policies – invited to meetings to express opinions on what improvements there need to be and what needs to be available for PWD.

(5:30) What's the main obstacles for deaf and hearing impaired people using public transport?

Mainly rely on vision so anything that can warn us or give information via vision. But the PT system isn't like that, often only sound so they can't access information and news. If it's a message or a light-message or colour then it would help. Some places do have – to tell you where you are and what station you're at. But if you can't see the symbols then it's still a problem.

(7:30) How successful has the project been to improve accessibility to PT?

It's still difficult, we're able to make recommendations and say what we'd like but the people who go and take it forward are the investors and they make the decisions so we can't go and order them.

How successful? It's difficult because we haven't seen concrete examples of things we've suggested and then they've done. But there are still some things that haven't changed. Like flying – deaf people can't sit together when they travel together. Limited numbers of deaf people allowed on the plane – but when you buy tickets it doesn't say and so they can refuse to let you on when you arrive at the airport.

It's the policy of airlines – safety. If you look from their opinion. But don't understand why?? Depends on the airline.

(13:00) Apart from airlines - Driving licence testing – won't let the sign interpreter come along – but now they've sorted group testing and organising a sign interpreter to come too.

(15:00) Buses – difficult

Know that getting up and down from stations is difficult and people with physical disabilities have more issues than them. Difficult to compare with other disabilities because the problems are different. Never seen the results of what they've asked for.

(18:00) Private sector – how satisfied are you with their improvements?

Half government and half private. Difficult to say. Buses need to be improved a lot – moving signs to say where you are etc.

(20:30) Has this helped a lot? Campaigning?

There's a tendency to have (what?) because many people have campaigned. The government have to understand that architecture has to be accessible but they should make it happen in a shorter length of time

Think of physical more than communication. They don't think there needs to be much. If the private sector can try to develop and do it for society, but it depends on the policies as well.

(22:15) How satisfied are you with the contribution from the government?

Each ministry does different things, if the ministries could share information with each other it would solve problems and make things work faster. Creating standards for new developments.

'They maybe don't think about if a deaf person travels what's it like? If a blind person travels what's it like? They will use say in the manuals that will be someone to help but they don't think about how travelling on your own could be.'

What information and training the staff need to know to assist.

(26:00) Any other improvements / anything else?

It would be better if when they were making decisions to do anything they would bring different types of disabled people in to be consulted – not just that it's done at one time because it's a hot topic.

Not that things need improving afterwards but they say it's not possible because of the budget.

They've invited the associations – this is good because they never used to have it. Now there is some of that.

Accessibility laws already exist to support it but just extras like what other equipment would help – this could be achieved by chatting through the associations.

'Deaf people nowadays they think their lives are good already, everything is good already if they don't see anything that is better. But then you get someone who goes and sees something better and they ask 'why doesn't our country have that?'

Signs, running signs (?), warning signs and emergency signs. If possible sign language.

Paul – interview (hearing impaired government employee)

Date: 7/4/17

Duration: 30 mins approx

Background :worker at *a government agency for 4 years. Got scholarship to study in America. Lives in *** in Bangkok, about half an hour away from workplace. Also studying a Masters at Thai uni.

Info about disability – hearing impairment that affects communication. Needs to see someone’s face when they communicate so he can lip read. Using telephone is difficult or being in places where there are lots of people or at meetings. If people speak quickly or quietly it’s difficult to understand.

(6:00) Travel in Bangkok –where?

From home to work or go shopping or going out – go to lots of different places.

(7:00) How do you travel?

Many different ways. Starting from bicycle around the local area– problems with car drivers, if they beep the horn at him, depends on the pitch of the horn but sometimes can’t hear.

Car – sometimes drives. People ask him ‘can you drive?!’ and ask if his mother is worried, suggest that other people should accompany him. But his parents are quite open-minded and eventually have let him have more freedom, especially after studying abroad.

(10:30) How do you come to work?

Have to be careful because of his impairment.

Has tried most types of transport to see which is the best.

Driving and bus is most convenient because there’s no need to change – the bus goes from the end of his road.

Buses – sometimes they’ll shout to say the bus is full and he doesn’t hear and anything they say along the way, stops etc. But he just pays attention to what’s happening instead so he knows what to do.

(15:00) Communicating with staff? Any problems?

Need to ask where the bus is going etc. Sometimes there are obstacles in communicating, when asking for information staff don’t hear. They speak faster.

Different between aircon and non-aircon buses in that you have to say where you’re getting off on aircon buses. For people who don’t hear me I’ll say it again.

(18:00) Any obstacles with other transport?

For the MRT there aren’t really any problems because it was a more recently developed system – understood the policies and trained staff properly. Also was a Japanese project therefore there was a better understanding of service. If you can’t hear they know what to do next.

BTS and MRT different?

Not too different.

Boat - Chaophraya

The boat has signs that help to aid accessibility. MRT etc will have a sign saying when the next train is due, the BTS doesn't have it, boat neither.

They announce when they get to each pier but by sound, there's no visual symbol (although it will say on each pier the name). and can remember what the piers look like. In busy times can be difficult to see.

Anything you'd like to improve?

Equipment to help people with hearing impairments access information – messages, communication not via sounds. Using systems from MRT for the boats etc.

Should be an app to help – an app that tells you when the train/boat/bus will arrive – uses GPS.

(27:00) Anything else? On behalf of friends who are also hearing impaired?

Friends have more problems because they can't communicate via speech at all.

Deaf people also often have lower levels of education and might only have the understanding of a high-school student, so there are many words they don't understand, e.g. public transport – symbols or pictures should be used too.

Vans – 'the person driving will say the price but be facing the front window. You need a sign to say the price.'

Hearing impaired have fewer obstacles than visually impaired.

Peerapong Jarusarn interview – (TAB)

Date: 11/5/17

Duration: approx. 90mins

(5:00) Role in TAB

General secretary in TAB. Qualified lawyer so looks after law and advocates about rights and public policy – including accessibility.

Non-disabled people don't understand that access and ability aren't the same thing.

(7:00) 'For example, the BTS, blind people can walk in without any problem, I won't talk about other types of disabilities because you probably already have that information, if there are stairs we can walk up them. We haven't got a problem with travel. But the body shape, no matter if they've gained more weight or whatever, that's not a problem. The problem is knowing whether the train has arrived yet or not. This isn't access but it's ability. It's like a couple of pieces of paper, we know that it's paper but the information on it we can't access. So access plus ability means we can access it and gain benefits from it.'

(8:00) PT is an important public facility for everyone, including blind people.

Do you have to show your disabled person's card (to get free service on BTS)?

'You do have to use it, and show it, but these days they aren't very strict, which I will talk a bit more about, about how I see it, what I think. When you walk in you have to show your disabled person's card so that you can get the passenger service because we have the disabled person's card, that's written in the law.'

(10:00) Main activities of TAB?

Group activities with the belief that solving problems by using the owners of the problem is the best way.

'Thais have the belief that...I don't know how it's come about but they believe that blind people can't do very much, and some things they can't do at all, they are limited in many, many ways. These things make each blind person not able to develop to their full potential.'

'Because of the belief that blind people can't really do anything and should stay at home because life is hard and they don't want life to be hard.'

R: Who, the blind people or other people?

(12:30) 'Parents don't want blind children to have difficulties, I don't think there's the thinking that they don't want other people to have difficulties, but I'm not sure, it's an interesting question. But here there is an expression – don't forget that Thai society is a society that will use more emotion than reason. And so they will say to blind people and including other types of disabilities that they are people to whom we must gently give charity. (???) poor people have to receive social welfare (???)

Welfare has to come from the people asking, I need this and this and this from the government, but charity is like pleasing the person who gives. Today you have a doughnut and you divide it into two and give one piece away but then tomorrow you have a doughnut but you don't give any away, it's your choice.

(14:00) Fifty years ago, in about 1967 blind people tried to say things back on their own but weren't heard and were easily denied. But when they came together to change the minds of society. Emphasise self-advocacy, but not like LD, but in terms of getting the needs of blind people considered in the laws to make it sustainable and rights are guaranteed.

(16:00) Use the laws as a tool. Secondly, to build positive thinking about visually impairment people. 'Actually blindness is like an identity, it's a self identity or characteristic of each person. If we're going to introduce ourselves to anyone we might say 'I'm going to meet Mr Peerapong.', 'which Peerapong?' 'Peerapong who is blind and works here.' It's no different to if I say 'Peerapong who is tall and chubby.'

(18:00) Support in society – not welfare that pleases the helper, but support and empowerment of people who receive it. Empowerment and development will lead to quality of life. When you have quality of life you turn into someone who has value. More like a partner of society. Inclusive society where everyone is a part.

(19:45) ** About being happy, but it's not about being happy alone it's about being happy together.

Visually Impairment Person = VIP.

(22:00) How is TAB involved in accessibility?

They've helped to change the laws which has come from campaigning and presenting.

Sub-committee in each province will meet on average 2-3 times about disabled people's seating??

TAB believe that guiding the laws is important.

PT is one point that is looked at

Services – people working know how to look after blind people.

Although the system isn't great the human resources understand and will help.

(25:44) Training BTS staff?

BTS was built nearly 30 years ago, 1999. At that time they didn't ask about the needs of blind people at all.

Back then blind people didn't really have much power, universal design etc wasn't thought about.

'If I'm still hungry please can we not talk about rights? Let me be full first.' That's how the members were back then.

The services were developed under the assumption and beliefs that blind people needed guiding and leading and it was really easy.

Until one day, TAB had nothing to do with it, with the belief that blind people can't do anything and are limited in many ways, there was a service provider on the executive board – had power so people listened. He said escalators weren't good for blind people, it's too easy for them to be caught by them and they don't know when

it's the end of the escalator. Came from his own belief first and then an incident happened afterwards. He suggested that blind people should use the stairs.

One day there was a staff member – perhaps not used to helping elderly and disabled people. A blind person almost fell, but didn't fall because of the way he was assisted by the staff member. Like he pushed him and didn't make him hold on. It was a big deal. The BTS used this as an example and then there was a regulation put in place to make blind people use the stairs or an elevator if there was one. But elevators aren't all finished so they have to use the stairs.

Member of TAB wouldn't go up the stairs and he was pulled towards the stairs by the member of staff. The TAB member was able to prosecute in court saying that they hurt him physically. He let the TAB know- he knew he wouldn't win because there was no evidence.

(35:00) Before then we didn't have a reason to ask to go and speak to them (BTS), saw it as an opportunity. I studied law so I know. And so we formed a relationship ? with the court in the middle to negotiate. If that hadn't happened there would still be problems.

BTS weren't interested before in speaking to them.

(36:00) What about other associations?

TAB has a weekly radio programme which shared the story. After going to court everything became a lot easier. TAB asked to go and train them and they agreed because they didn't want to get bad press. Asked them, do you not feel ashamed that you've seen the system in Japan and you can't compare?

After that had training on looking after blind people and how they travel etc.

(39:00) This is where the training came from for guiding PWD. Training how to walk with a cane etc and also training people with visual impairment so they aren't a problem for the people looking after them.

TAB social media and radio to spread information. About a month after the incident they were invited for training and then a network was established with a key man in the BTS, so if there were any problems they could directly contact them. As friends – eat together as well. After that it became a lot easier, when there's a problem they can just call up and tell them.

(41:45) Has this changed anything at the BTS though? What if the key man resigns?

After the negotiation it all came together and if the key man resigns it would continue. There was an agreement and in the manual of the BTS staff there's a section for passengers who are blind – firstly that you ask passengers what they would like to use first, elevator, escalator or stairs. Secondly, for partially sighted people security have to walk behind them, and give them the chance to walk themselves, they don't need to hold on to them. Thirdly, if they come with sighted people, with friends as a group, they won't separate them. You can let them walk with the people they came with and ask them if they've come together.

(43:30) 'This was an interesting point. The BTS said 'let our security lead them it's safer'. They have strange beliefs like this. And so I asked them 'TAB believe that you can look after us but can you prove it's more safely than the people who've come with us? How do you know – because if they are the child, their parents have

looked after them and taught them and are familiar but you, security come and how many blind people have you ever led? And what if it's a couple? Of course they have to look after them even more - their love. And what if it's classmates? How do you know their relationship and how many years they've been friends? Is it safer or not? You can't prove it I'm sure, if you're scared it's not safe you have to check, right?'

Joked with the BTS – asked them what about a new couple in love? How are they going to feel when you separate them for the sake of safety? They were silent and then laughed and agreed it was true.

(46:00)

Husbands and wives who come together but only bring one white cane because they didn't think they would be separated and have to find each other again in the station.

Stopped using one security and one blind person. They've already done Mobility and Orientation training and know how to travel in a group.

There's not anyone who leaves the house without knowing how to keep themselves safe – blind or not. Safety first.

'So we asked them to stop but in the end it wasn't all successful. There's a regulation that says visually impaired people have to get in the first carriage. And wait for security to take you to the platform if you're completely blind and have come alone. If you're with sighted person you no longer have to wait. But the thing that wasn't successful was stopping them from making them get in the first carriage.'

The reason – 'for your safety, because if anything happens the driver can see you and come and help you quickly. And when you get to your destination they will come and get you from the first car and know you're there.'

**They know safety is important but they can't always guarantee a place in the first carriage – which is always full since it's near the stairs. Sighted people are allowed to get in any carriage and aren't limited in the same way.

In Japan the first carriage is for disabled people and pregnant women as well but it's different in that the first carriage is only for children, disabled people, elderly people and pregnant women.

Blind people have to wait for the next train if the first carriage is full, e.g. at prime time you can be waiting three trains. The effect is that the blind people will be late for work, even though they have left the house at the right time.

(54:00) Not arguing about safety, arguing about the guarantee that they can travel. Campaigned to ask them to change the first carriage into a priority carriage. They said they would consider it but it's not successful yet.

It has continuous effect on working lives on visually disabled people.

(55:30) Do you have any hope that this collaboration with the service providers might develop in the future and be more successful?

Started to get disappointed – because they've started to outsource new staff and they haven't been trained by TAB, and the standards have started dropping. Maybe need to go and train again.

First carriage issue – needs to be resolved. Why can't they radio ahead and say which carriage they're in?

Buses – campaign to get disabled people’s spaces was successful, the same could be done on BTS.

Buses are better for training of staff, there is constant staff training.

(1:00:20) The Thai government system, it’s a (blood? สายโล) line and such a specialist system that it’s said that it’s not (mainistration?) and so they won’t get involved. Because it’s different ministries it’s difficult.’

R: So the Ministry of Transport look after buses?

They look after buses directly, but the BTS, no, it’s BMA, which is below the Ministry of the Interior.

R: But for each Ministry it’s divided?

‘Even though they have a joint committee, which the Ministry of Transport who look after buses they arranged a committee which has disabled people on it, but when we’re invited to a meeting the BTS sends someone who’s not the keyman and so it’s difficult to appeal for anything important, sometimes.’

(1:02:00) R: How much understanding is there?

It depends on the policy, sometime the keyman thinks that an issue is unimportant. Training, well we’ve already done training!

And for the buses?

For the buses, because the Ministry of Transport started this committee themselves, when disabled people ask in a meeting there has to be a way of saving face - remind them of shame (uses English word - shame), people complaining at the meetings. But the BTS, the big one, the keyman doesn’t come.

R: And so doesn’t hear what the problems are?

Yes that’s probably one part. Because, 1, he doesn’t really hear, 2, there are loads of other problems that need to be resolved. I don’t know either. Despite the fact that we work somewhat closely with the BTS and fairly well...

Maybe it’s because of numbers. The number of blind people using buses is more than the BTS. But it depends. The bus system, we tried to ask for a sound to announce each bus stop or have a sound that let’s the people waiting at the stop know which bus is going where.

** This system came at the same time as the low-floor buses, which the physically disabled, activist wheelchair users were campaigning for.

(1:04:00) This was a joint issue, because it was a joint problem or something to be (??) so it created power and in the end (???) because the government wouldn’t approve the 4000 buses...’ (?)

Blind people use boats very little – they run on time so it helps because there’s less likely to get on the wrong boat.

MRT – when it was being built the TAB had power and already were experienced with public transport accessibility. What also helped a lot was having a blind person as a senator in parliament (Monthian) sub-committee, he called them in to speak when he heard that the MRT was being built.

(1:07) ‘Thai people (??), if someone of authority or a senior summons them, they aren’t bothered if they’re blind or not they’re see it as ‘Oooh, senator! Wow!’ like this. ‘honoured’. The senator has a word and says ‘I don’t mind what you do just please make sure you look at blind people, and include other types of disabilities as well.’ and so it builds up nicely. MRT have never mentioned the issue about the first carriage. And there’s no problem with training the staff, except for there’s not many of them and so you might have to wait a bit if you want help from a member of staff to lead you. This I can understand because their system doesn’t have a lot of people like the BTS. The MRT is one thing that blind people are quite happy with.’

(1:08:30) What has been the main reason behind the improvements in accessibility?

‘Nothing about us without us.’ – if the owner of the problem doesn’t raise the issue, the people with the power or who are involved won’t know because they haven’t ever been blind before in their life, they’ve never had a relative who’s blind before. Thai blind people there are only around 100,000 of us, compared to the Thai population of what must be 70 million. Thailand isn’t very big but the circle or society of people who are service providers on a high level and who have power, work in the morning and in the evening play golf, they don’t really meet [blind people] or if they meet them in passing they’ve never really spoken to them or sat and had a coffee with them like normal people because they’ve not got any business with them. Their business isn’t really anything to do with blind people. When they do have business to do with blind people they follow their beliefs, which I explained before, oh, you’re blind? Oh I’ll wait for you. Charity, like this. Because of that, accessibility, whether it’s accessibility for whatever reason including public transportation, has to come from pressure from the owners of the problem. Which means if blind people can’t access then it has to come from the TAB and other organisations in the network who work with blind people – other types of disabilities who can’t access then it needs to come from other DPOs. It has to come from these things. As for the government or Ministries or organisations that are public sector, this is at the end, they agree because they’ve had the opportunity to speak to blind people, they’ve had the chance to speak to disabled people.’

(1:13:00) ‘It’s not something that’s talk of the town.’

Not something interesting that people really talk about. So it makes it difficult to push for accessibility for PWD. It’s come from the people with the problems pushing.

(1:15:00) What about the collaboration between the National Associations? How much do they work together?

‘This is difficult to answer! I’ll try to explain slowly. DPOs in Thailand they’re divided by the types of disabilities and are appointed as the special association. Nowadays we have TAB, which was first, since 1967, 50 years already. Second is physically disabled who use the term disability association of Thailand, who the current president is called Supacheep. Third is Thailand Association of the Deaf, the president is Wittayu Bunark (?), he’s half Thai and half Italian, a friend of Ajarn Pomme’s. The fourth association is, they use the word ‘parents of people with autism’, look after autistic people and their movement is by the parents. And number five is ID – they use the name ‘parents of people with intellectual disability’ and movement is by the parents. This concept I won’t comment on, because it’s maybe nothing to do with the topic. The last one is for people with mental health problems, psycho-social. It turns out that the people who are working for the movement on mental health are parents as well, and volunteers who look after people who are

disabled via mental health, who are ill people, bi-polar, many diseases that are to do with mental health. But there isn't really psycho-social, they don't really go and get treatment. The trend of the mental health association has become people looking after mentally ill people. So they don't use the word psycho-social, they use the term 'association for the mentally disabled', which isn't really in line with the philosophy of DPOs, but nevermind, it's the last association that was established.'

(1:18:50) 'All six of these associations combine to organise another organisation, which is called the Disability Council of Thailand. This is a member of DPI as well. This Council, even though it's a mechanism of disabled people who will create a movement about an issue, a combined issue, a large issue. For example, we say we need smart buses, which is low-floored buses, although we don't use low-floor bus because it gives the feeling that it covers physical disability – we need a smart bus for all. Every body can get on, every bus. You get on and there's a moving sign that says the bus number and where it's going, and has sound as well, low floor as well, and a special seat for persons who have problems physically, weak muscles as well. A smart bus is the responsibility of the council especially. For example, it's necessary for there to be sign-language interpreters everywhere and this is the responsibility of the association of the deaf, they has to be Braille plus a screen-reader on the internet, which is the online community of TAB, there needs to be lifts, slopes, no steps, they said they don't want steps – this is the responsibility of physical (group). There needs to be education in schools that uses pictures so that it balances with text - this is the responsibility of autistic and ID. Each association, altogether, if there is a joint issue we will use the Disability Council. An example of a movement that is happening strongly at the moment is protection of the budget of the disability fund. Which the Ministry of Finance says that this fund is big already, there's a budget of 20,000 million baht, it's a lot, give 2,000 million to the treasury, lend it to them. Disabled people said the money from the disability fund is a lot of money, but You (polite) Sir, disabled people who live in the countryside are disadvantaged, they still haven't gotten any development and empowerment, there's a lot as well. Nowadays there's so many people going to register as disabled, it's more than a million. They use their rights to go out in society, I'm not even talking about ability, I'm just talking about going out in society, there's not even 50%. And they want to take our money. Please, use this money for disabled people.

(1:24:00) Issues like this the council will create a movement. Like I said, special needs of an association they will take responsibility for.

'Last thing: solve problems. In Thai society, like I said, sometimes, or maybe it's mostly but it's difficult and the reason is that the basics of the beliefs of associations, government and private sector. They have beliefs about disability and blindness that are very different. Some people don't know anything at all but they get the opportunity to be in the position that they're in to solve the problems. Solve problems altogether, work together, many times it takes time and perseverance, it takes a long time. You talk just once and it's not successful. It takes perseverance. And when you propose things, we propose them by chatting, like friends chatting. We're friends. 'I am your great friend' – we meet as friends and bring nice things to say. Even though we're talking about laws sometimes we have to talk softly. Like 'Look, if you follow the laws like this, you'll get 1, 2, 3 you'll get tax reduction, it's remarkable. Right now Thailand is facing an ageing society. You do this for blind people today and in the future for elderly people.' And you just ask them, 'are you sure that you will not get old?'

(1:27:45) Therefore, the last thing I want to pass on is that TAB stick to the principle method of solving problems together. We solve problems like this all the time. But some things take time and perseverance until you get some success. Some things

aren't successful. But we...if I use the words 'never give up' it doesn't seem enough. One senior in the society uses the words 'given up on giving up'. Refuse to give up. 'Give up' doesn't exist in the dictionary of life. The new blood of the association pass down this ideology and pass down that yes, working together to solve problems might take a long time and perseverance but we don't give up. Today we might give in but there has to be another day where we take the issue that we'd given up on and we start again. We call it ทด which means to just rest for a little while, not rest forever and then when the time is right we raise the issue again.

(1:30) R: Like prioritising? Choose your fight.

Yes, prioritise. But for blind it's difficult because you ask what's priority and this is first, this is first, everything! Everything is important but we don't need to ask what is first, we need to look at what we need for this issue. Do things that are easy first, save things that are difficult. The first carriage issue – do this first.

Transportation for All Interview**Date:** 9/5/2017**Attendees:** Mr Sawang Srisom (secretary) – A, Ms. Nunthida Chitpukdeerat (member) – B, Mr. Supawat Samurpark (member) – C**Duration:** 60 mins approx.**Obstacles for disabled people, and specifically wheelchair users in Bangkok?****A.** Can use some public transport (BTS/MRT) but not fully. Need to use taxis to get to the station which costs money.

Time is another obstacle because using the system depends on waiting for staff to arrive – no way of knowing how long it will take. Lifts are locked, can't be used independently. Are told by staff 'just wait, the staff will come and look after you.' But then they might go and do something else first. Have to plan in advance, sometimes it takes twice as long as a non-disabled person.

'Every point will result in added time, some points two minutes, some points three minutes, some points 5 minutes. Altogether it's double, it adds up.'

'If we don't use public transport it costs a lot of money. If we do use public transport it costs a lot of time. We have to choose between time or convenience.'

'The cheapest public transport, which is buses, we can't use at all. It's not an option for us.'

MRT and BTS is free, which reduces the burden – 'we don't want to use it free forever but it's an interim solution. But in the future we're happy to pay but it has to be fully accessible. We need to be able to use everything.' Using taxis is expensive so it's compensation (free MRT and BTS).

'It wastes money, it wastes time and sometimes it has an effect on your mental health also. For example, if you go to a station that hasn't got any facilities and ask someone to help you and they refuse, it makes us frustrated; we have to find another way. Sometimes we argue, for example blind people who don't need to use a lift, they insist you use the lift and so it results in an argument. We end up arguing with the service providers...sometimes it makes you not want to go outside because you know you're going to argue.'

'Because we don't want to go out, it has an impact on your life. It's like this – for example, in one day for a normal person they leave their house, go to work. After finishing work you can stop off to exercise, sometimes you stop off to buy something in the market, sometimes you stop off to see your friends, some people might do some extra business on the side. Which, altogether in one day you travel to three places, four places, five places. It means that you have more opportunities in your life...but disabled people can't do this. You finish work and you have to go home. If you stop off at the second place, the third place, the fourth place you have to pay extra. It's not possible! I've tried it before, travel costs ended up being over a thousand Baht. [laughs]. A thousand Baht per day! We just can't.'

(7:00) Impacts also on other things in your life – reduces the opportunities in your life – exercise, extra work, socializing etc. Adds extra points on to your travel chain but for us it increases the cost. It ended up being a thousand baht or more per day. Limits opportunities in life.

(8:00) B. 'For me, I have what is considered a very severe disability and I'm not able to help myself at all. When I travel I have to look at where the station is situated or if anything reaches it, for example the BTS or MRT, do they go that far? Because I can't help myself at all I have to use taxis when they don't go that far.'

Taxis refusing service. Need extra assistance to lift him. Taxis sometimes are reluctant to help, or have to ask a passer-by to help. Takes time to find a taxi and get into the taxi. Takes a long time because of traffic in Bangkok and then costs a lot of money.

(11:29) 'Sometimes it looks like the BTS or MRT has the systems in place but then when you actually go and use it for real it takes time. Before the staff come down you help you'll be waiting a long time because there's no one at the station ready to help, so they have to go and call a member of staff who is already doing something to come and help, or call a staff member from another station to come and help.'

(12:00) Especially at peak times where there's a lot of people using services, it makes it even more difficult to get a car (taxi) and so it impacts on mental health because you're constantly refused.

(13:15) 'It impacts our mental health, because sometimes we call a taxi and it's 'won't go, won't go, won't go' and you get bored of travelling. You could say that you experience this a lot and get used to it, sometimes you can go, sometimes not, call another taxi, but some people get disheartened in that when they go out it's difficult to get a taxi, when you want to get in you have to get someone to help you, some people look at it in a pitying way, 'why have you come out?' they'll say right there and then. This is an issue of attitude. As more disabled people go out and about it makes them realize that it's difficult for them to travel. Or it makes them feel sorry for them.'

(14:15) PT still doesn't satisfy the needs of disabled people's lives. 1. The routes don't cover everywhere, 2. The service, safety and facilities at stations or on the trains or help, and the prices.

Disabled person's card is free but a helper has to pay.

(15:30) 'The vans that the government have installed lifts for example, there are only a few compared to the number of people who need to use them in Bangkok.'

(16:00) 'There's still very few disabled people using the public transport systems at the moment. There are obstacles right from leaving your house to reaching the system...if I go out in my road then I've got motorbikes and water drains or if I get out of the road I have to run alongside the edge of the road [in wheelchair] and risk being hit by a car until I get to a point where I can conveniently call a taxi.'

(17:00) **Transportation for All history**

A: Started in 1995 when the BTS were building, opened for service in 1999. 'Architects came from Hong Kong and sent the draft to Disabled People's international in Thailand. The first draft included lifts at every station, but they were taken out until there weren't any lifts at all. So we were so surprised and that's when the movement started, before building, to say 'there has to be lifts'. In the end there ended up being 5 stations out of 23, Mochit, Siam, Sukhumvit, Onnut and Chong Nonsi. Five stations and some only had lifts one one side. Since then disabled people in Bangkok started to become aware that there needed to be advocacy so that the PT system, like the BTS, had facilities like lifts to help disabled people. The movement started and DPOs started working together.'

(20:00) Started to meet with (reps) from Bangkok, arranging training, arranging seminars talking about this issue and rallies.

‘At the time we were prosecuting at court, in 2008, that was the time that we started to have a name, be an organization, a group. It was called Transportation for All Ally or something, we didn’t use the name T4A at this time. It was collective movement, anyone who could come would come and volunteer.’

(21:00) Started in 1995, went to court in 2008 and became transport for all in 2014.

(22:00) Is there any collaboration with the government?

Lots of things have happened. After prosecution it created awareness.

Accessibility laws 2005 helped a lot and became a platform.

‘after the laws came in awareness started forming and it created a change in society. For example, the Ministry of Transport, at first they didn’t work with us. They saw that disabled people’s issues were to do with the Ministry of Social development, nothing to do with them. After that, the laws came out and said the Ministry of Transport have to participate and take part. They came in because the law dictated it. But at first there was a gap between the two sides, they didn’t understand each other. For example, there were some things... that was a time when Thailand had problems with budget, convenient facilities was to do with that, it was expensive, if we’re going to do it it probably won’t be at every station, there were efforts to reduce the costs. Or even if there were facilities built, for example the BTS there are 4 exits, we need how many accessible exits; there was argument over this point.’

(24:21) The MRT is better – all stations have lifts. New purple line has lifts at every station and on each side. But at an intercession we need 4 lifts.

(25:00) But the Ministry of Transport didn’t trust us, they didn’t know who we were, but as they worked they saw us, and we showed ourselves often so in the end they accepted us and started to listen to us.’

‘Many things that we’ve done, for example, prosecuting the BTS have made people realize that disabled people aren’t passive recipients anymore, who you can do anything to. The law prevents them and is a tool for us to use in our work. Because of that they will listen.’

****Fighting against the ‘passive’ image of disabled people****

Positive changes that have come about now as a result.

(26:00) ‘For example, the trainline that’s to be built in Khon Kaen, it turns out that convenience facilities will be everywhere, it’s translated to there. It will cover every station. We can see that the things that we’ve done have started to see results already. They’ve started to understand, ‘oh, if we want to be a country for all’ and this is part of their brand for tourism, Thailand for the number one tourist destination. They need to commit to this and be remarkable in this area.’

(28:00) What’s been the main factor in getting positive results in changing the PT system?

B: ‘Like Sawang said, at the time when we prosecuted the BTS, the coordination with the World court or the coordination with the Ministry of Transport or (???) PT also, I got the opportunity to attend meetings with the MoT in deciding which convenience facilities, they began to see that adapting places such as, PT systems or

other system, planes or piers, bus stations, many places, it was like they started to listen to the opinions of disabled people more and after we had given suggestions or contradictions they would listen to us more and gradually change.’

(30:00) Why?

‘One reason was because of the laws, that was something that helped issues of travel of disabled people. One was laws, also referencing them. And then, laws in our country and laws in other countries that we needed to follow and report on. We had more power. It was like, before this we weren’t really respected in our position of being disadvantaged, or as the owners of the problems. It’s like they think that they’ve arranged it all for us and now it’s sorted, but they didn’t come and ask or consult.’

After we had the regular meetings with the MoT the issue of changing the attitudes of service providers on a high level, there started to be instructions given to arrange convenience facilities more and more and we followed the organisations who were responsible, which we followed each organization or team that were convenient and ready but on a policy level or for large organisations we could see that the meetings weren’t able to motivate or have an impact on anything with them. And then we had a group on the network level which had the result as well, for example with the buses, before there was an effort to try to obstruct the TOR (terms of reference?) in order to publicize, and there was an auction but in the details there wasn’t anything for convenience facilities for disabled people.’

In going to participate, in requesting to go in and obstruct, in requesting to...through being participants or committee members it had no effect. It was all in the laws and in the network, it was using pressure on a public platform that made them aware, it’s not just that they could design something and it would all be over, but that there and to be participation with every person, every side. Which has made many fractions start to have an understanding about why we need to provide convenience facilities for disabled people. Until recently, with the BTS, although there was an order before starting to build but actually it was the movement of disabled people in each organization of the network which have put pressure on each level.

(35:00) What about the attitudes of service providers? Willingness?

C: Role of the media in creating awareness of the movement.

A: ‘I think there’s still some issues of attitude, no?’

R: Of service providers?

‘Like of the service providers, what are they called? BTS, MRTA, yes. DPOs need to participate a little in the planning and deciding about whether the convenience facilities are ok for us because were experts in this as the users. In regards to the building and things we’re not asking to get involved but we’re just asking to be support so that any trains that will be built from now on will be convenient and truly accessible, more.’

Do they invite you?

‘We want to go but they’ve not invited us. So we’re still trying.’

A: ‘I must say for the BTS and BMTA they are the two organisations who are the most difficult to reach.’

Why?

They...1. BMTA (Bangkok Mass Transit Association), they are an organization that don't belong to the government. Therefore, the government can't control them. Therefore they have the power to listen or not listen to us.'

Even though there are laws and policies?

'Yes.'

C: 'It's like, they do stuff for us but they don't do what we think they should. It's more like that. They fix things but they fix it like...you can see.'

R: I've seen the stair lifts, that in the group they aren't satisfied with.

A: For example, at National Stadium we asked them to build a ramp, but they installed a stairlift. At first there was a study and they made a design for a lift, so why didn't they use it? I don't understand. Why don't they listen to us?

R: But the government, they won't...because it's not really against the law because they've provided a way to get up and down it's just it's not suitable for you?

A: If you interpret the law then it is wrong in one way because it's not for all. For all means that they didn't make it so that everyone could use it. This is almost certainly against the law. Because those are supposed to be used in the house more, it's the wrong type.

R: But in the seminar, like last time, they invite the service providers and DPOs along...when you talk how is it? Do they listen?

A: 1. There are loads of people participating at the meeting, too many participants. So from the MRTA to the BTS to the buses to the authority of...I can't remember, airport or something? They all come. And the meeting is for about 3 hours. And then the first hour or two is a report of what's been done. After that there isn't much chance to talk or present. If it's really going to be efficient we need to split up, e.g. we talk to the BTS only, or the rail systems, talk to all of the people doing rail transport. For air transport it can be another one, it should be like this more.

(41:00) But because everyone comes together there's no chance to speak. And so it means that the movement isn't efficient, it's just a meeting. That two, or three times only, there's no benefit. It's more like a presentation.

R: There's no result?

A: It's that we can't enforce anything in some cases. For example, water transport, what do you call it? Like for this we need to speak to them, for piers, ferries have special points that will take a long time to talk together. We can't. And sometimes there are people with many types of disabilities as well, blind, some people will talk about that, some people will talk about this and it all disperses.

R: Apart from this, do you have the chance to speak to every organization? E.g. with just the BTS, do you get the chance? Have you before?

A: In the past, for the BTS it was through BMA so we got to speak to them sometimes. MRT, since, before with the former governer we got to speak to them a lot but then they changed and since then we haven't got to speak to anyone. We haven't spoken to the BTS, we haven't spoken to BMA, (gor tor mor?). The Bangkok governer, we haven't spoken to at all.

R: Have you asked to?

A: We wrote a letter. But they wouldn't allow it.

R: And do they meet with any other associations?

(43:30)

C: It's difficult. We don't know because it's not news.

B: You ask if there's any conversation...Maybe there is for some things, e.g. the blind group, they have some meetings for training the staff to be knowledgeable about assisting (passengers). This is for the BTS, for the MRT there hasn't been any training yet. But...what do they call it? It's explaining face-to-face, I can't say we have had anything as clear as for the BTS, this for the blind. But if you ask is there anything for companies who provide service, to come and talk about providing convenience facilities directly, there's barely anything. If we didn't write letters or have large meetings or ask them directly we wouldn't really get much information out of them.

R: They don't approach you? But for the government, they're ok...?

(45:15) B: In one way they're a central body that make it possible for us to inquire, talk to and get them to...like having an order or having small groups so that we can contact them. We will use the Ministry and OTP to help us to connect with the companies more easily. But if you ask is it 100%? Well, after the orders are given we follow up on it then we repeatedly come across problems. The meetings aren't continuous, we get some answers, we don't get others. Implementing the work is slow, we go in circles coming across problems.

R: Do you have any hopes for the future about collaboration between service providers, DPOs and government? How it could be more efficient?

A: For me the first thing is awareness, for the government sector there is, everyone is somewhat aware and knows that accessibility is important. The thing I want to develop is for some DPO, I'm thinking of the National Associations, for example the NAPHT, that's their name, they should come in and play the part of supporting us more. In the past they haven't really emphasized this issue a lot, directly. The leader has been more interested in other issues, interested in the lottery and stuff like this, which...

R: Why? Do you know the reason?

(47:30) A: It's to do with the benefits, to do with money and that. If they do accessibility they don't get any money (laughs, uncomfortably). There's issues that...(inaudible) but owing to the fact that they're the National Association they should be helping us. They have money, they have power, because they're the designated organization of the government. Like, they should be the organization who are credible and are able to work with the government better than us.

(48:15) There's been many times where we've had meetings with the MoT and they will ask the National Association, why don't they go? And because we're not [the national association], they're like 'you're not'. At first they tried to keep us out because they thought that we aren't the National Association and they should speak with the National Association more.

R: Can you pass the National Association? Is it possible?

A: We've tried to ask them before, if it could be a project or something and it was like, they promised that they would give us the money and resources but in the end...there wasn't anything.

Firstly, organisations like (ror for mor), at the moment they won't let us meet them or talk to them.

R: Which organization?

Bangkok Mass Transit Authority, BMTA. They won't let us meet them, even when we've sent letters. We asked if we could survey the new extension, like I told you, and they refused. They gave the reason that it was under constuction and not safe. They said it was a mutual submission process (?) and so they wouldn't allow people to enter. Which I think probably isn't the reason, because regular because are able to go and look, I've seen on YouTube that people have taken videos, howcome they can go and we can't go? I don't understand.

(50:25) Which goes to show that they need to keep the doors shut.

R: Why?

A: They're scared. They're scared that we're going to go and blame them, something like that. In the past they've seen it as strong advocacy and they're scared.

C: If they ask disabled people who are engineers, what do they call it? The prestige of people. We haven't graduated in engineering, so we can't go and argue with those who've graduated in that directly. The attitude...

R: Is there anything you want to say about generally about disability in Thailand or awareness or disability rights?

(52:30) A: For the disability movement it's somewhat difficult to find people to come and work. People who've got the time and are interested in this are very few, maybe they're working.

And at the moment there's employment promotion for PWD, which is going quite well, so that disabled people have work to do. And so a lot of people are working now and that means that there are only a few of us who are working as activists. But we've had to adjust as well, in working and know how to be able to use the limited resources and manage things well. But its something that if everyone has the time then they will all help. If we all work together we're stronger.

R: It's because other people are working?

A: Yes, they're working. Or if not then some people are interested in other things.

R: If it's someone who hasn't really got a problem with travel maybe its not an obstacle for them.

A: Yes, that's a reason.

C: For the support issue, actually it started...one part was from campaigning and we asked just for people's names online, only that! But it turned out when we called our friends who could walk they didn't have a problem because they could access it ok, some people answered and said they were scared it would be a big deal with it going in and out of court. Sometimes I wish there was more collaboration than this. However you look at it it's a collective issue, not an individual one, no?

B: I understand that now, disabled people have interests that are different to one another, but if you ask, like Sawang said their interests are different so they don't participate at all or they want permanent work, but actually with regards to getting work there's CSO staff, the person who helps, one thing, disabled people get an income, another thing is have prestige. But they maybe see that (???) isn't that interesting or is a risk to...maybe isn't a risk to prestige but they don't have time for themselves or can find time.

(56:31) Or they see that (???) isn't important for them. If they are able to go wherever themselves then it's not a problem the same as others so they think 'oh, nevermind, I can still go', like people who are strong. But if you ask, if there's a chance, for example when we see in the news 'disabled people are prosecuting', 'disabled people are getting together for an activity', if every disabled person who maybe doesn't think it's much to do with them looks from another angle 'oh, this is another way of campaigning or helping to push for policies' then they'd be more likely to get involved, not necessarily at the core but just adding your name to a petition or help to publicize information, which is something in the Thai disabled community that we're missing, we're missing participation within the disabled community itself. This isn't even counting efforts to participate with government bodies that are to do with disabled people. So this is something that's really missing. Also relating to the system itself, which are more much more likely to speak to the main seven DPOs plus one which is the disability council, who tend to speak too much.

(58:20) (???) or movement on a National level, if we don't go through the main organisations then we'll only get a few hundred people, as many as we've got. But if, say, the main organisations give importance to every case then there will be more power in the movement, in the publicizing, in the communication with people outside. Which is something that disabled people are somewhat lacking at the moment.

Focus Group 1 Transcript

Date: 5/4/17

Participants: eight participants (four male, four female); four hearing impaired; two visually impaired; one physically impaired; and one learning disabled and autistic. (Four are students, four work at the university).

Other attendees: two university staff members, one learning support assistant, one friend of a participant.

Duration: 90 minutes (including signing consent forms etc)

(7:00) Checking understanding and clarifying meaning of 'public transport'? Excluding airports etc.

(9:00) Explaining the objectives of the research and how the focus group will work.

(11:00) Asides from the uni where do you travel in Bangkok?

Victory monument because it's the centre for travel, and is central for meeting to travel to other provinces – a lot of different types of disabled people arrange to meet here because it's central, the BTS, the buses, the vans, lots of taxis and motorbikes. The skywalk linking the station to the other side is a good meeting place because it's easy to see and convenient for arranging to meet.

Phrom Pong, all places because it's free with the disability card. Uses the BTS a lot because buses aren't convenient.

(15:00) How do you usually travel to work or school?

Many types of transport – motorbike and then bus, or sometimes just motorbike. Depends on the time of travel – because buses are limited and sometimes full so won't stop. So rely on motorbikes instead because some don't live far from the university. Bus to the underground or Victory Monument. Motorbike and then express boat on the Chaopraya.

Used to use buses but it wasted time so bought a motorbike because it's easier and more convenient. Get lifts from family/drivers.

(Hearing impaired pp) Used to use bus and used the disabled person's card but the prices increased, it's not free on the bus anymore.

(20:00) Disabled person's card can't be used on the buses anymore, only the BTS, MRT and airport railway link. They're not sure, sometimes they will halve the price, sometimes they aren't accepted, depends on the bus service. Buses belonging to ขสมก (BMTA) won't allow the use of the disabled person's card because it's a private company but red buses (government?) will allow.

Not clear about buses if they're free or how much they will charge because it changes from line to line and company to company.

**Also depends on the bus conductor, if they charge or not.

(learning support assistant) 'If it's a private bus that passes the university they know that there are disabled students and so they will just let them get on free – *some* people, on *some* routes. But some routes will make you pay.'

(22:30) (Visually-impaired pp 1) According to the law it should be half price plus 3 (baht). There are several buses that will do this 'and won't charge blind people who get on. They can tell from your white cane or and will come and help you, ask 'where are you getting off?' and then near the time they'll say again, but they won't come close and tell you, like [shouts] 'Victory monument' they'll say at each point.'

(23:00) In your opinion is this good? That they don't always charge you on the buses?

(Hearing impaired pp 1) 'Yes. But it's better you pay yourself. *Greng jai*. The vans are the same, they're not free, you have to pay half.'

Is this a policy? No, it depends on the person and company.

(24:30) (Physically disabled pp 1) 'They'll reduce it to half and some people, they're really disabled but it's like they don't know what's wrong with us, right? Which makes it more difficult than it needs to be. Like some people, like this [indicates friend who is visually impaired], you can clearly notice, and so will get the right more than other people, characteristics of a person you can't clearly notice.'

(Visually impaired pp 1) 'For me, if we go as three people, I can see a bit but the other two can't see at all, which means that they won't charge them at all but I've already paid. But the other two don't have to pay, which I don't have a problem with because actually it doesn't matter who I get on with I always have to pay. But maybe there is some, a little bit of me that thinks that.'

(25:45) How often do you use public transport?

Some use it every day, except for day off. But normal days there's no choice, must use it every day. For work, for other things.

Hearing-impaired pp 3 has motorbike so doesn't really use anymore but if didn't have one would have to.

Uses all types every day, no choice. Uses the bus every day, has to use it.

(29:00) Do you have to show anything to be able to get discount or free rides?

(Physically disabled pp) 'For me, One time I showed my card and said 'I'm going to Victory Monument' and [the guard] stared at me like 'what's the matter with you?' - I'd given them the card but they wouldn't read it. Why? It says on the card. And then they blocked me...so I said 'I've got a problem with my leg'. And so I just walked on, not bothered, but then I turned round to see...I'm not sure what he thought of me! You've got to make them see.'

(30:00) (Support assistant) 'Impairments like eyes, you can see, but with people like Sai they look completely normal. Sometimes I go with him and when he gives his card in it's like they want to ask but don't. A lot of kids have cards but mostly the problems they face are on the BTS. On the card you have to provide an explanation. But for the underground train if you have a card you just show it and they'll let you through. The BTS you have to wait in the queue and collect a coupon. But for the MRT you don't have to go to the counter, you just show it, tell them.'

(Autistic/LD pp) 'It's much more convenient'.

(Support assistant) 'I asked a deaf child how he felt before... He told me 'I don't dare queue, I'm embarrassed because sometimes they stare.'

(Physically disabled pp 1) ‘At first I was embarrassed, because on one side I thought that we were getting more rights than other people but then on the other side I think, well...for example when I get on the BTS, and there’s a special seat for disabled people right? And, well my body isn’t so strong but because it’s not obvious what’s wrong with me I think that I should let people who are worse than me take it. We already get the right to travel for free, it’s already free, so like for other disabled people who are worse than me, it’s better to let them use this service than me. I feel that I don’t want to take advantage of other people.’

(Hearing-impaired pp 2) – problem with the card- the picture isn’t clear.

You have to go and get the card yourself and take some evidence, house registration or disabled people’s card. It’s not consistent, they change the requirements every time they change the system, sometimes you have to go back again. Free. On the back of the card it has details of the impairment.

(36:00) What help do you need travelling?

(Visually impaired pp 2) – equipment is a white cane and this also tells other people. Sometimes have to wait for someone to help her cross the road. Sometimes staff, sometimes friends.

Crossings? Don’t dare use them because no-one stops. For visually impaired you don’t know where the cars have stopped. White cane used to tell the way for new places. Braille blocks – also useful for poles and exits.

(Autistic/LD pp) ‘I have a problem when I get on the train, because I can’t really read the station names, so I ask more.’ **R: Who do you ask?** ‘The staff who collect the tickets.’ **R: And do they help?** ‘Sometimes you ask and they look at you like...[pulls a stern face] not friendly.’ **R: What about the sound announcement of the stations?** ‘On the MRT they have writing on the screen and a sound saying what the station is – so I would look for this more...I’m a person who can’t really read.’

What about getting off at the right station? Is there anything to help?

(40:30) (Hearing impaired pp 3) No, but we just follow people off.

And when you buy tickets how do you communicate?

Write. The staff are accustomed to it.

(Visually impaired pp 1) BTS is quieter than the MRT and at bigger stations where there are a lot of tourists or people it can be drowned out by noise. You have to ask other people. It means the BTS staff get into trouble as well because we miss our stops and then end up at a different station and we have to wait for the staff to come and get us and send us back.

‘Sometimes we want to go ourselves but we can’t because we have to wait for the staff to come and get us, which sometimes takes a long time. Because there’s only one person to do this they’re up and down, up and down and sometimes you can be waiting for half an hour.’

Really? And you can’t just go yourself?

‘Really. If you go yourself the staff will get into trouble.’

Is it necessary? To have someone with you?

‘No, not really. Because sometimes we don’t want to get in the first carriage, which is already crowded because that’s where everyone comes up and down in that zone. To put it simply, I’ve never sat down. I’m always in that zone, sometimes I want to travel by myself, which sometimes I’m stubborn about but they won’t let me. If you get through they’ll run after you. Which I understand, so I’ll just wait. (laughs)’

‘Yes, and you’re not sitting waiting, you’re standing waiting there. Which, sometimes I don’t use my cane but I have to wait because on the card it already says my impairment. If it’s another impairment they can go on ahead. This means there is a bit of an obstacle here. Sometimes, I’ve arranged to go and see a film and meet my friends and some of them are non-disabled, some of them are autistic or hearing impaired but they’ve gone on ahead and I’ve had to wait for the guard. So I had to arrange to meet them again in Siam and they had to wait for me, and they’ve not been able to take me it’s only allowed to be the BTS staff member, which wastes a lot of time.’

(47:00) Any more experiences? Positive ones??

It depends on whether you meet good people or bad people.

Issues with passengers rushing on the escalators on the airport rail link.

(49:00) (Visually impaired pp 2) The issues I have aren’t really with the BTS or MRT but with the buses. Especially the 108 non-air-con bus. When I get on with friends sometimes they leave before I’m properly on and this happens often. I went with my friend and they were behind me but I couldn’t see so it’s a good job they grabbed me, and they fell over. When I get off it’s the same. I’m not able to know where the bell is and so when I get off I have to stand up and they’ll ask where I’m getting off, when we get to the stop I still haven’t made it to the steps and they’ve already driven off. This is the 108!’

(51:00) (Physically disabled pp) ‘If you ever go to Sukhumvit, now this is an area with a lot of traffic and if you ever go you might see Bus Route 71, an orange bus, which I’ve had experience with. I once had a problem with the driver. Because he was driving, and there was a blind person and someone with a bad leg and he had to stand and hold on. But the style is like to crowd everyone in because they have to drive fast enough to get the passengers, imagine the 71 is in front and as soon as he can see [a bus?] behind and has to hurry, I don’t know where he’s hurrying to, but this day I could see there was someone hurt and no one would give up their seat. [everyone fell on the floor?] I had to do something so I walked to the front and I argued with him, and took off my shoe and threw it at him. I said, ‘I’m sorry for throwing my shoe at you, but if you don’t want to drive you don’t have to. We’re all putting our lives in your hands and you’re driving like crazy!’ At the back there are people who have to stand and one of them is visually impaired and another physically, why don’t you turn around and look? And he was like ‘it’s nothing to do with you’. So I told him I was going to make a complaint to the company and then got off the bus. All of the passengers followed also.

*The current system means that buses compete for passengers and this also affects the salary of the drivers. More passengers = more money.

(54:30) Is there anything impressive of public transport?

Friendly staff.

(Visually impaired pp 1) Staff at Victory monument who remember him and ask if he's going to the same place. And are friendly. The staff work there regularly, and at Siam as well, but maybe switch between stations.

Buses – not waiting to board.

Sometimes gets on the bus using a white cane and the conductor will yell for someone to give up their seat, like it's being forced on the other passengers, which he sees as a bit much. It should be up to the person who is sitting nearby if they want to get up, otherwise it might be someone right at the back and then it takes half the journey to get to the seat.

(59:00) Anything else to help?

Taxi apps – Uber and Gap? Sometimes regular taxis won't take you so apps are useful.

Google maps – when using taxis to check the route and traffic so the taxis can't cheat.

Voice-over on android and iPhone so that people with visual impairment can use mobiles.

(1:05:00) Anything to improve?

Still very few lifts, even when there are lifts you have to wait a long time. GPS for the buses so they know when the buses will arrive, like the BTS.

Hearing impaired participants – no, they can use PT quite conveniently. Would like to increase the train system so they don't have to rely on motorbikes.

Low-floor buses or just consistency (for visually impaired) so they don't have to guess each time they get on a bus.

Focus Group 2 - Autistic Adults Parent's Group

Date: 12/5/17

Participants: five female, all mothers of autistic adults in their twenties (four male, one female) - all live in BMA.

Duration: 55 minutes (including signing consent forms)

Travel - mostly come from home to the Autistic centre.

(2:00) Problems – not a lot but some, some buses are too high to get on and the skills of their children aren't enough to get on and off easily.

A: 'My son has fallen off twice already. It's just sometimes, when the steps are lower its ok. I guess it's our problem, I don't think much about it, but once you're on the bus you try to adjust and then for the disabled people's seats usually there's someone else sitting in them and they won't give up the seat. They won't move...'

B: 'They won't move. They're not going to move because they look at our kids and they think they're normal because autism just looks normal. And my child's ok but then when you speak to other people, it's more about having to teach your child 'hold on a bit longer, son. Someone will get off soon' and so on.'

R: Have you ever asked for someone to let you child sit down?

B: 'I've never asked even once, never!'

All: We don't dare!

C: 'They would just stare at you like 'but your kid's normal'

B: 'But people who are generous will get up for you, people who aren't disabled but they'll get up. Quite often as well, they'll get up for you.'

D: 'But mostly they won't know, right?'

B: 'Right, because my son is big, big and strong. So my problem is like this. In the vans they're quite narrow and not really comfortable.'

C: 'Right, and there's loads of seats for the passengers but because our kids are big they take up nearly two seats, and so it's not convenient.'

Changed the law so only 3 in the back of the vans instead of 4. Came in alongside the law about the trucks and seatbelts.

E: 'If my son's in a good mood then there's no problem!'

Less behaviour as they've gotten older. All in their 20s.

'We haven't even talked about their own problems, they like to touch people's heads right? When there's a traffic jam and you're on the bus they don't like it and the traffic is stuck

'go driver! Go driver!'

Once – one of them got up and smacked the head of the driver. So one of them doesn't take them on the bus at all. Because Bangkok has bad traffic, taxis are more convenient.

Taxi drivers want them to sit in the front because of the weight, but they have to explain.

R: And do people understand about their behaviour and stuff?

They don't understand. Some people don't know what sort of behaviours autism has. They think they're just mad.

'One day they made us get off you know. He stopped at the side of a road, not at the stop and said 'get off'. He (my son) wouldn't stop going on and was getting worked up and I tried to calm him down and told him to calm down but the driver didn't understand and told me to get my son off because we were bothering the other passengers, I said 'I'm sorry but my child has special needs' and I waiid and apologised and said we were almost there anyway but he said no you'll have to get on another bus. I cried you know, taking him off the bus and then got in a taxi. Sometimes they just don't understand us.'

(9:00) Aircon buses are better. Noisy, smelly, hot, can't be tolerated.

People don't get up and let their kids sit, even when they're going crazy, they just stare.

The reason they don't use them is because of the behaviour of their kids and that they come late and have to wait a long time. Even when it's clearly labelled as a disabled person's seat others sit in it and won't move.

(11:30) Disabled person's card – does anyone use it?

Some yes, some no. It's not quite half.

'Sometimes they aren't satisfied, you give the card and they stare at you. They won't let you use it.'

Some routes won't give discount at all, even with the card. But they don't want to argue with the conductor. Old people getting on the bus, obviously really old but still had to show their card. Hurried them up.

(13:00) 1 reason is the service and 2 is that the buses are still awful. Come late etc.

One time she got on and they discounted straight away without asking for the card because they could tell her son was autistic. This was the first time this happened. But mostly they have to pay full in vans etc.

But for trains it's free for PWD, even standing is ok because it's not hot. They like it and want to go again, but for buses they don't like it and would rather get in a taxi. But isn't near to some of their houses/doesn't go where they need to go etc. Even when you use it you have to rely on taxis for feeder transport because it's easier and you get a seat.

MRT- some stations you have to go a long way from the entrance to the ticket counter etc. Don't use often.

(17:00) R: Any other transport?

Trains. Use them to go out of Bangkok for daytrips.

They like it when the train is going but most trains have to stop at stations and it's hot. The free buses and trains project are non-aircon.

**** is an area with lots of disabled people but there are no free buses. They won't even discount for disabled people.

Free buses don't stop for long, you have to rush to get on and off. Normal buses will wait because they're trying to get money from passengers. No way to get on with your child because it would be dangerous.

(20:00) Free trains are really slow.

R: How would you improve the system, especially for your kids?

Let disabled people sit down. Let our children sit down when they get on, not non-disabled people. The driver or fare collector should be able to arrange it. It shouldn't be up to the parents to ask for a seat, it should be part of the service.

A bus or van route for disabled people that's a long route.

(22:50) Are there any companies who provide transport for disabled employees?

No, because no one employs them. The government don't even.

(23:15) It needs to be clear that when disabled people get on they get a seat. If you show your card you should get a seat. But our kids look normal and so they don't get seats.

'Our kids have normal faces, you can't tell. So when you get on, they think they're normal. But it's not long before their behaviour comes out but the people sitting down don't know.'

(25:00) How do you feel about the general society and their acceptance of your child? What are their attitudes like?

'Once I went to service my Toyota and in the waiting room there was a soldier there too, sitting behind us and my son walked...his behaviour is to lift himself up all the time, but the soldier moved (???)...like he was scared, terrified. He'd been staring all the time (???) he was scared! People are scared that they're going to get hurt.'

'Especially people with small children, they'll pick them up and avoid you, move out of your way because they're scared that they'll get hurt.'

'Because in our country the only people who share information and news are parents of disabled people. People outside don't know, they don't really get to know. Even within the family.'

'I took my kids to the South (to see family) and asked 'can I leave him with you?' I'm just going to the market to get some things and no one would take him! They were scared. And that's my own family! They're scared of something – 'we don't want him he'll have a tantrum'. They're scared that he'll have a tantrum or go off and they won't be able to call him back or that he won't listen. And so I have to stay.'

'We can't leave them with anyone.'

'Sometimes if I'm really sick and it's really necessary I can't leave him.'

The centre helps – half a day or a day or so.

In a restaurant with friends and when finished eating son started hitting his head (indicating he wanted to leave) and her friends said they were scared and asked her to take him out of the restaurant. But he wasn't hurting anyone else, just hitting his own head.

There needs to be more education and awareness-raising for Thais.

Now doesn't take son out very often, stays at home. Scared of having issues.

(28:30) Heard of friends being asked to leave aeroplanes because of their child's behaviour.

If you say before you buy the ticket?

They wouldn't sell it! They're scared.

Sometimes the airline give sleeping medicine to passengers.

(31:30) Autism is a type of cognitive disability that is more severe than most and makes it difficult to look after them. CP kids are easier to look after.

(33:00) Is there anything in the current PT system that helps?

Tickets already bought and refused entry to van because her son was too large for the seat. Wouldn't return the money for both the tickets.

The vans are impressive, many times they will take her past the end of the line straight to the autistic centre. 'When this happens it's ok,'

'It's not a government system but it's the generosity [nam jai] of people.

It's nothing to do with the government.'

The government provides help for wheelchairs more. Wherever you go there's got to be a lift, the buses wheelchairs have to be able to get on.'

'For autistic kids there's not really anything to help. There was a hotline for work for disabled people and someone was like 'call them!' so I called and they asked what type of disability. I said 'autistic'. 'No, nothing, sorry.' They won't take them. They don't want them, schools too, you say they're autistic and they don't want them.'

Schools have to accept kids for inclusive education but they don't want kids with behaviour, they want other types of LD kids, downs, etc. Ask parents to come and look after kids. Some kids can go and study but get bullied.

(38:00) Any hopes for the future for independence for kids?

No.

A place in each province that's a centre or school for vocational training. The government has already but they don't look after them well. Something like OTOP.

(41:30) No one to look after their kids once they're gone. Or if they're injured or ill. No one else will take them.

'I was a government employee, you know, a teacher. But I left to look after my daughter. Because if you hire someone else to do it...(it's dangerous etc).

Even real parents can do harm to kids so what about other people?

Appendix B

Sample Elite Interview Questions

1. Can you introduce yourself and your work at...?

ขอช่วยแนะนำตัวเองนิดหน่อยและงานที่...?

2. In your opinion, why is it important for the public transport system to be accessible for disabled people?

ในความคิดเห็นของท่าน ท่านคิดว่าการให้สิ่งอำนวยความสะดวกสำหรับคนพิการเข้าถึงและใช้ระบบขนส่งสาธารณะมีความสำคัญอย่างไร?

สำหรับคนพิการเฉพาะ สำหรับสังคมทั้งหมด สำหรับบริษัท

3. What role and objectives does your organisation have in developing the transport system for disabled people to use in the future?

รัฐบาล หรือ กระทรวง มีบทบาทและเป้าหมาย อย่างไรเพื่อที่จะพัฒนาระบบขนส่งสาธารณะเพื่อคนพิการในอนาคต

4. How successful has the project been to improve the public transport system for disabled people?

โครงการเพื่อปรับปรุงสิ่งอำนวยความสะดวกในระบบขนส่งสาธารณะสำหรับคนพิการได้พบกับความสำเร็จมากน้อยแค่ไหน?

5. What mechanisms or platforms do you have currently to engage with disabled people's groups in order to fully understand the problems of accessibility to public transport services for people with disabilities and implement their suggestions?

ตอนนี้ องค์กรมีกลไกหรือมีการร่วมมืออย่างไรบ้างกับกลุ่มหรือสมาคมคนพิการ

ในการแก้ไขปัญหาในระบบขนส่งสาธารณะสำหรับคนพิการ และตามคำแนะนำของคนพิการ?

6. What is the biggest barrier is to progress in achieving a fully accessible transport system for people with disabilities?

อะไรคืออุปสรรคหลักในการพัฒนาและบรรลาระบบขนส่งสาธารณะที่คนพิการใช้ได้อย่างสะดวก?

7. What do you think has been the main driver in achieving progress in achieving a fully accessible transport for people with disabilities?

อะไรคือที่ช่วยเป็นหลักในการเจริญก้าวหน้าและบรรลาระบบขนส่งสาธารณะที่คนพิการใช้ได้อย่างสะดวก?

Advert for participants

UNIVERSITY OF LEEDS

**Can you help with research about:
Using Public Transport?**

The research is about how people with disabilities travel outside their homes and how easy it is for them to use public transport in Bangkok metropolitan area.

The research will be used to find out how transport and other services could be made easier for people with different disabilities to use.

You can take part if:

- if you consider yourself to have a disability or have difficulty using public transport in Bangkok.
- you are over 18 years old.

You are invited to take part in the research voluntarily. You will be asked to share your ideas in a group with other people, or if you would prefer you can arrange to meet the researcher for an interview on your own or with a friend or family member.

Dates:
18/04/2017 - Tuesday 16:00 - 17:00
19/04/2017 - Wednesday 11:00 - 12:00
21/04/2017 - Friday 19:00 - 20:00

If you would like to take part in the research please get in touch:

Lauren Avery
email: ml15lja@leeds.ac.uk
phone: 07846458371

Lauren Avery
email: ml15lja@leeds.ac.uk
phone: 07846458371

Lauren Avery
email: ml15lja@leeds.ac.uk
phone: 07846458371

Lauren Avery
email: ml15lja@leeds.ac.uk
phone: 07846458371

Lauren Avery
email: ml15lja@leeds.ac.uk
phone: 07846458371

Lauren Avery
email: ml15lja@leeds.ac.uk
phone: 07846458371

Lauren Avery
email: ml15lja@leeds.ac.uk
phone: 07846458371

Lauren Avery
email: ml15lja@leeds.ac.uk
phone: 07846458371

Participant Information Sheet

Using Public Transport

The research is about how people with disabilities travel outside their homes and how easy it is for them to use public transport in Bangkok metropolitan area.

The research will be used to find out how transport and other services could be made easier for people with different disabilities to use.

You are invited to take part in the research voluntarily. You don't have to take part and can tell Fah that you would like to stop taking part at any time. If you decide you don't want your answers to be used after the meeting please contact Fah and let her know by the 18th May 2017.

Fah will ask you some questions about how you travel outside of your home and how easy it is for you to use public transport on your own and with the help of someone else.

You can say as much or as little as you like about your own disability and problems you have moving around. You can say things that you like or don't like about public transport and what you would like to change. You can choose if you'd like a friend or family member with you.

No-one will know who you are except for other people in the focus group who you might know already and the researcher, who won't tell anyone your real name.

About the researcher



My name is Lauren Avery.
My Thai nickname is Fah.
I am a student at the University of Leeds in England.

If you have any questions or don't want to take part in the research anymore you can contact me by email:
ml15lja@leeds.ac.uk
or by phone: 07846458371

UNIVERSITY OF LEEDS

Voluntary Consent form
for the participation in a social science research project that will be audio-recorded

(English version, translated from the Thai original)

I, (Mr, Mrs, Miss).....

Surname..... Age years

Email..... Telephone no.

have received an explanation from the researcher, Lauren Avery, about being a volunteer participant in the research ‘Public transport and travel of disabled people in Bangkok’, including asking for permission to voice record the focus group and/or take photos. The focus group will take approximately one hour in order to collect information on the subject of public transport and disabled people in Bangkok.

Photos or voice recordings will be destroyed at the end of the research and will not be distributed publicly. If the researcher needs to show pictures of me, the researcher will take care to ensure that my face is not visible and will use them for academic purposes only. In joining this study I understand that I do so voluntarily and I am able to withdraw from the research at any time if I do so wish or if anything happens that makes me feel uncomfortable.

I have read and understood this explanation and sign my name below to consent to join the project.

Signature.....

Date.....

Sample approach email

(Translated into English from original Thai version)

Dear (name),

I am an MA research student writing from the University of Leeds in the UK to ask for your assistance with my research.

I am doing a study about accessibility to public transport for people with disabilities living in Bangkok. I would like to speak to people who consider themselves disabled or have difficulty using public transport and ask about their opinions and experiences of using the public transport systems in Bangkok. The aim is to understand the problems with the transport system in Bangkok so that this can be improved upon.

I would like to ask if any members of your organisation are interested in taking part in the research voluntarily? I will arrange to conduct focus groups or interviews with willing participants at a time, place and manner suitable to them.

Please let me know if I need to make arrangements for a sign language interpreter or if there is anything else I should consider so that your members can participate. I have attached the research information sheet and research advertisement to this email for your information.

If you have any questions my contact details are below:

Lauren Avery
MAR student in Thai Studies, University of Leeds
07577554646
ml15lja@leeds.ac.uk

Supervisor's names and contact:

Dr Martin Seeger - m.seeger@leeds.ac.uk

Simon Prideaux – s.prideaux@leeds.ac.uk

Thank you for your consideration.

Kind regards,

Lauren Avery

Ethical Approval Form

Research & Innovation Service
 Level 11, Worsley Building
 University of Leeds
 Leeds, LS2 9NL
 Tel: 0113 343 4873
 Email: ResearchEthics@leeds.ac.uk



UNIVERSITY OF LEEDS

Lauren Avery
 Department of East Asian Studies
 School of Languages, Cultures and Societies
 University of Leeds
 Leeds, LS2 9JT

Faculty of Arts, Humanities and Cultures Research Ethics Committee

University of Leeds

14 February 2017

Dear Lauren

Title of study **Access to public Transport for People with
 Disabilities in Thailand**

Ethics reference **PVAR 16-030**

I am pleased to inform you that the above research application has been reviewed by the Faculty of Arts, Humanities and Cultures Research Ethics Committee and following receipt of your response to the Committee's initial comments, I can confirm a favourable ethical opinion as of the date of this letter. The following documentation was considered:

Document	Version	Date
PVAR 16-030 L Avery Ethical_Review_Form_V3.doc	1	07/12/2016
PVAR 16-030 L Avery ethics form sig page.pdf	1	07/12/2016
PVAR 16-030 Info_sheet_english.jpg	1	07/12/2016
PVAR 16-030 L Avery risk assess p1-4.pdf	1	07/12/2016
PVAR 16-030 (Response 1) advert.jpg	2	02/02/2017
PVAR 16-030 (Response 1) Info_sheet_english.jpg	2	02/02/2017
PVAR 16-030 (Response 1) L Avery Ethical_Review_Form_V4.doc	2	02/02/2017
PVAR 16-030 (Response 1) PVAR 16-030 Committee Provisional_LA reply.doc	2	02/02/2017
PVAR 16-030 (Response 1) Sample approach email.docx	2	02/02/2017

Committee members made the following comments about your application:

- You have addressed all the issues raised in the initial feedback. The only small additional point you might want to consider is whether you need to mention the collaboration with Ratchasuda College and Mahidol University in the introductory email for the sake of transparency.

Please notify the committee if you intend to make any amendments to the information in your ethics application as submitted at date of this approval as all changes must receive ethical approval prior to implementation. The amendment form is available at <http://ris.leeds.ac.uk/EthicsAmendment>.

Please note: You are expected to keep a record of all your approved documentation, as well as documents such as sample consent forms, and other documents relating to the study. This should be kept in your study file, which should be readily available for audit purposes. You will be given a two week notice period if your project is to be audited. There is a checklist listing examples of documents to be kept which is available at <http://ris.leeds.ac.uk/EthicsAudits>.

We welcome feedback on your experience of the ethical review process and suggestions for improvement. Please email any comments to ResearchEthics@leeds.ac.uk.

Yours sincerely

Victoria Butterworth

Research Ethics Administrator, Research & Innovation Service

On behalf of Dr Kevin Macnish, Chair, [PVAR FREC](#)

CC: Student's supervisor

Risk Assessment

UNIVERSITY OF LEEDS

Fieldwork Assessment Form (Medium Risk Activities)

Fieldwork Project Details	
Faculty School/Service	School of Languages, Cultures and Societies
Location of Fieldwork	Bangkok metropolitan area, Thailand
Brief description of Fieldwork activity and purpose (Include address, area, and grid reference and map where applicable).	Focus groups and interviews taking place in government offices and organisation offices around the Bangkok area. Also assessment of accessibility of public transport in Bangkok (sky train and bus systems) via observation.
Fieldwork itinerary <i>E.g. flight details, hotel address, down time and personal time.</i>	Depart: from Manchester airport – 29/12/2016 21:00 via Doha with Qatar airlines. Arrive Bangkok Survanabhumi airport 30/12/2016 18:50 Flight number: QR0024/QR0832 Taxi/met by friends and taken to address in Bangkok (TBC). Return: from Bangkok Survanabhumi airport 18/05/2017 02:05 Arrive Manchester airport 18/05/2017 12:45 Flight number: QR0837/QR0027
University Travel Insurance Policy Number	100003814GPA
Organiser Details	Contact details <i>Name, email, telephone</i>
Fieldwork Activity Organiser / Course Leader	Lauren Avery MI15Jia@leeds.ac.uk Lauren-avery@hotmail.co.uk +66 864147015 (Thailand) 07577554646 (UK)
Departmental Co-ordinator	
Nature of visit <i>Size of Group, lone working, staff, postgraduate, undergraduate.</i>	PGR research trip. Lone working.
Participant Details <i>Attach information as separate list if required.</i>	Contact details <i>Name, Address, email, telephone, gender and next of kin contact details</i>
	Alison Avery (Mother)
	0151 677 1547 (home) 07907351311 (mobile)
	Avery.alison@googlemail.com



HAZARD IDENTIFICATION	
<i>Identify all hazards specific to fieldwork trip and activities, describe existing control measures and identify any further measures required.</i>	
HAZARD(S) IDENTIFIED	CONTROL MEASURES <i>(e.g. alternative work methods, training, supervision, protective equipment)</i>
Nature of the site <i>School, college, university, remote area, laboratory, office, workshop, construction site, farm, etc.</i> University/organisation offices, train stations, public transport, bus stops, public buses, public trains.	Care will be taken when using transport for travel or during the assessment. Times of services will be checked prior to travel to ensure that the researcher is not stranded. Alternatives such as taxis and Uber are also available if public transport travel is not possible.
Process <i>Operating machinery, electrical equipment, driving vehicles, handling or working with animals etc.</i> N/A	-
Transport <i>Mode of transport while on site, to and from site, carriage of dangerous goods etc.</i> Public transport/taxis	Care to be taken when using public transport, routes will be carefully planned and alternative routes sought in case of extreme traffic or other unforeseen events. Arrangements will be made to check in with staff at the university I am working with in Thailand and regularly check in with supervisors in the UK.
Equipment <i>Manual handling risks, operation of machinery, tools, use of specialist equipment etc.</i> N/A	-
Violence <i>Potential for violence in location, political and social unrest; against participants (previous incidents etc.).</i>	There have been some incidents of political unrest in Thailand over the last few years, particularly in Bangkok. However, incidents of violence have usually been isolated to certain areas which are easily avoidable. I will regularly check the news for updates on the political situation as to remain aware of any changes to the status quo. Following the death of the previous King, Thailand is in a state of mourning and will continue to be so for the next year, making political unrest during this time highly unlikely.
Cultural Considerations <i>Specific to the activity or participants.</i>	Ethical approval of the research project has been sought by the university's ethics committee. The ethical approval application deals with issues surrounding cultural issues in detail (please refer to the form).
Individual(s) <i>Medical condition(s), young, inexperienced, disabilities etc.</i>	I (the researcher) is fit and healthy and fit to travel as confirmed by a medical examination in November 2016. I lived for 2 years



UNIVERSITY OF LEEDS

	in Thailand, during the time of the previous political unrest in 2014, and so have sufficient experience in assessing the safety of the political situation and travelling within the country. I also speak, read and write Thai to an advanced level.
Work Pattern <i>Time and location e.g. shift work, work at night.</i>	Work at night is very unlikely to take place. However, in the event that work at night is unavoidable it will take place in public places where other people are around and I will let friends/university staff know where I am and check in.
FCO advice <i>Include current FCO advice for travel to the area where applicable.</i>	The FCO advise all but essential travel to the three most Southern provinces (which will not be travelled to or near during the research period). The rest of the country is 'green' with some travel advice including that there is high terror threat and care should be taken to avoid any political gatherings and respect Thai people during the mourning period of the king.
Other <i>E.g. temperature, humidity, confined spaces.</i>	The time of working will span from cold season (still pretty hot) to hot season (temperatures up to 40 degrees C). Care will be taken to avoid the sun, stay hydrated and take regular breaks, especially when working or travelling outdoors.

Additional Control Measures

Pre-departure Briefing <i>Carried out and attended</i>	A final supervisor meeting will take place 2-3 weeks before departure and supervisors and admin staff in the school will be sent contact details and an itinerary.
Training <i>Identify level and extent of information; instruction and training required consider experience of workers.</i>	I have studied Thai language and culture to advanced level and I am qualified to intermediate level. I have also attended research training sessions including ethics training.
Supervision <i>Identify level of supervision required e.g. full time, Periodic telephone/radio contact.</i>	Bi-monthly to monthly Skype calls with supervisors will take place, additionally telephone and face-to-face contact with supervisors at the university in Thailand.
Other Controls <i>E.g. background checks for site visits.</i>	The majority of sites will have been visited previously by myself or be of very low risk (e.g. offices).
Identify Persons at Risk <i>This may include more individuals than the fieldwork participants e.g. other employees of partner organisations.</i> <i>Copy of other Organisation's risk assessment attached?</i> N/A	-



UNIVERSITY OF LEEDS

Additional information <i>relevant to the one working activity including existing control measures; information instruction and training received, supervision, security, increased lighting, emergency procedures, first aid provision etc.</i>	I spent two years living alone in Thailand and have many friends and colleagues there, both Thai and non-Thai who could be relied upon in an emergency and with whom I will be in contact with throughout the trip. I have the Thai emergency services numbers saved in my phone and have experience of dealing with emergencies in Thailand using Thai language.
--	---

Residual Risk <i>Is the residual risk acceptable with the identified controls?</i>	Yes	
	No	

Assessment carried out by	Name:	RUTH SMITH
	Signature:	R.C. SMITH
	Date:	07/10/2016
Names of person(s) involved in Fieldwork <i>N.B: This can take the form of a signed class register when large group work</i>	Name:	Lauren Avery
	Signature:	<i>Lauren Avery</i>
	Date:	11/12/2016
Fieldwork Activity Organiser / Course Leader e.g. PI, etc	Name:	Supervisor Lauren Avery MARTIN SEEGER
	Signature:	<i>Martin Seeger</i>
	Date:	07/12/2016