

In//Visible, Un//Able:
Japanese and American College Students' Perceptions of Individuals with
Disabilities
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Abstract

Disabilities can either be described as visible in which a disability is noticeably evident, with disorders such as Down Syndrome and Cerebral Palsy, or invisible in which an individual has been diagnosed with an internal disability, such as Dyslexia and Diabetes. Although on the outside someone could appear completely able bodied, one can never know for certain that this is the case. Upon researching the prevalence of these four disorders in both America and Japan we noticed a trend of more Americans being diagnosed in comparison to Japanese. Through this research, we aimed to find out what the perceptions are of Japanese and American college students regarding people with disabilities, as well as to what extent their personal knowledge is concerning resources available to those with disabilities. We found that it is not encouraged in Japan for people with disabilities to discuss their disabilities, although Japanese did not consider mental illness to be a disability. Upon receiving education about disabilities American students continued to be educated as they progressed through their schooling, while Japanese received it earlier on in elementary school and did not progress past that point. Our data also showed a difference between Japanese believing that inclusivity of students with disabilities in classrooms to be important while Americans were more open to the idea of students with disabilities being separated from students without disabilities.

Introduction

This paper plans to discuss what perceptions exist for American and Japanese college students and how deeply their personal knowledge goes when it came to resources for people with disabilities. In our survey we used two examples of visible disabilities and two examples of invisible disabilities and asked our respondents how familiar they were with each example, as well as how they interact with people with disabilities on a day to day basis. In regard to knowledge of resources, we asked not only how often our respondents received education about disabilities but also their awareness of disability legislation of their home country, contact information and sufficiency of accommodations at their home universities.

1. Significance of the Study

During my time studying abroad counselling services for international students were offered only once or twice a semester. As a person with my own invisible disabilities, I believe It

is important that people with disabilities can speak freely about their disabilities as I have found people with disabilities are discouraged from talking about their experiences with their disability.

2. Research Questions

1. What are the perceptions of those with disabilities, by Japanese and American college students?
2. To what extent do people understand current available accommodations for people with disabilities?

3. Research Background

3.1 What is Considered a Disability?

According to the ADA Amendments Act of 2008, disabilities in America are defined as “physical or mental impairment that substantially limits one or more major life activities of such individual” (ADA AMENDMENTS ACT OF 2008, 2008). Whereas in Japan disabilities are classified as physical, intellectual, or psychological (障害者基本法:障害者施策—内閣府, 2004), and are defined respectively as physical: “a condition in which some physical function is impaired, such as incapacity with hands/feet or limitations of seeing/hearing” (身体障害とは?, 2019), intellectual: “a clear delay in intellectual ability. There is a delay in the ability to understand, memorize, and make decisions about things that are necessary when learning and living in society” (おしえて! 障害のこと, 2020), and psychological: “persons with schizophrenia, acute poisoning due to psychoactive substances or its addiction, intellectual disability, psychopathology and other mental disorders” (精神障害とは, 2020). Both countries have an inclusion of physical and mental in their definitions, Japan is the only country that makes a distinction between intellectual and psychological.

3.2 Visible vs. Invisible Disability

Although it may be somewhat self-explanatory, a visible disability “can be noticed to an individual with their naked eye and by just looking at the person” (Invisible Vs. Visible Disabilities, 2018). Whereas an invisible disability is “physical, mental or neurological condition

that is not visible from the outside, yet can limit or challenge a person's movements, senses, or activities" (How do you define invisible disability?, 2017).

3.3 Definitions of Disabilities Mentioned in Survey

Although they may also be classified as illnesses, the four conditions that we chose to be examples of visible and invisible disabilities were Dyslexia, Diabetes, Cerebral Palsy, and Down Syndrome. Dyslexia is "a learning disorder that causes difficulty reading due to problems identifying speech sounds and how they relate to letters and words" (Dyslexia, 2017) and Diabetes is a disease with two different types, type one diabetes in which the body does not produce insulin and insulin must be administered from other sources and type two diabetes in which the body does produce insulin but has a difficult time processing what is made (What is Diabetes?, 2016). Both were used as our examples for invisible disabilities.

The examples we used for visible disabilities were Cerebral Palsy and Down Syndrome. Cerebral Palsy is a disorder in which "the ability to move and maintain balance and posture" is affected and is usually diagnosed during childhood (What is Cerebral Palsy?, 2019). Down Syndrome occurs when an individual is born with an extra chromosome thus causing them to develop intellectually and physically different than what society considers normal (What is Down Syndrome?, 2020).

3.4 Statistical Rates in Japan and America

In Japan, 5% of the total population has been diagnosed with Dyslexia (FAQ, 2020), and 7.9% with Diabetes (IDF Western Pacific members, 2020). Pertaining to Cerebral Palsy and Down Syndrome, 2.27 per 1000 children have been diagnosed with Cerebral Palsy (Toyokawa, S., Maeda, E. and Kobayashi, Y, 2017) and 1 in 455 births ultimately lead to a Down Syndrome diagnosis in the child (ダウン症児出生数は横ばい傾向, 2019).

In America, approximately between 5-15% of the total population has been diagnosed with Dyslexia (Dyslexia: What Brain Research Reveals About Reading, 2004), and 10.5% with Diabetes (Statistics About Diabetes, 2018). For our visible disability examples in America, 3.1 per 1000 children have been diagnosed with Cerebral Palsy (Christensen, D., Braun, K. V. N., Doernberg, N. S., Maenner, M. J., Arneson, C. L., Durkin, M. S., Yeargin-Allsopp, M, 2008) and 1 per 700 births have a Down Syndrome diagnosis (Down

Syndrome Facts, 2020). As the data suggests, America has many more diagnoses of each illness we used as disability examples in comparison to Japan.

3.5 University Offered Support in America and Japan: Case Studies

As an example of university offered support in America, California State University Monterey Bay offers a variety of different accommodations including but not limited to disability management advising, assistive technology, an orientation to campus for students with disabilities, in class peer notetakers, alternate formats including e-text, mp3, tape recordings of books, and braille, as well as alternative testing accommodations (Academic Accommodations, 2020).

For support offered by universities in Japan, Doshisha University and Tsukuba University were used case studies. A few options of support at Tsukuba University include peer tutors, requesting testing accommodations, braille options for visually impaired students (学修援, 2020), their library as well has private study rooms students may use and offers a “face to face reading” option in which a volunteer will read aloud to the person requesting their service (障害のある方へ, 2020). The main option of support offered at Doshisha University is a consultation with a psychiatrist (健康相談・精神保健相談・禁煙支援, 2020).

4. Research Method

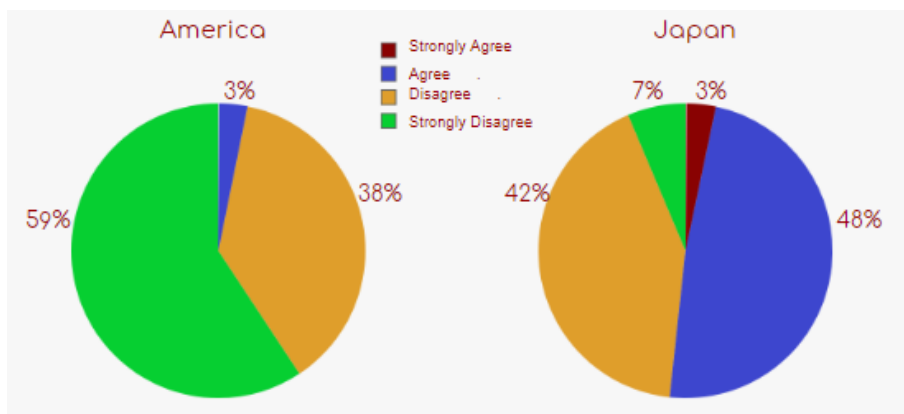
In this study we surveyed a total of 63 college students with 32 being from America (11 men, 17 women, 4 nonbinary) and 31 from Japan (12 men, 19 women) and online surveys were distributed both in English and Japanese.

5. Research Findings

5.1 Research Question 1: What are the perceptions of those with disabilities, by Japanese and American college students?

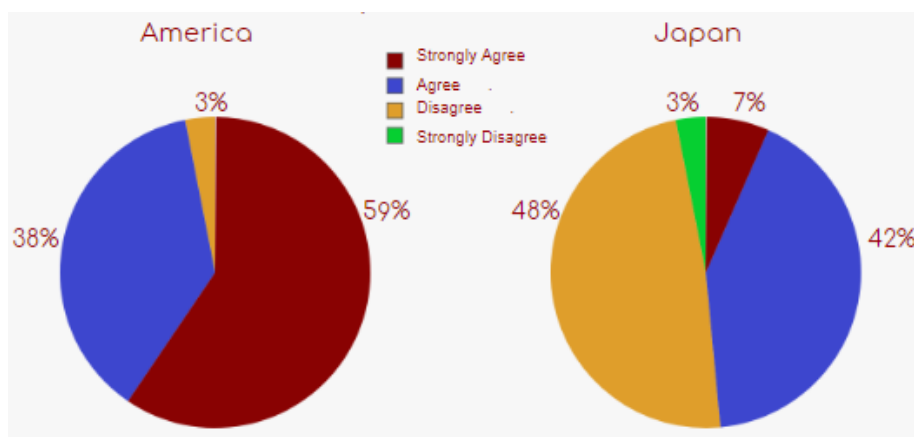
Of our survey questions, two did the best with answering our first research question. Our survey question of “Do you feel that people with invisible disabilities should not talk about their disabilities?” showed us opposing answers between America and Japan (Figure 1). While

Americans felt people with invisible disabilities should be able to talk about their disabilities, majority of Japanese (a total of 51%) agreed that disabilities should not be discussed.



(Figure 1: “Do you feel that people with invisible disabilities should not talk about their disabilities?”)

The next survey question was formatted in a “do you agree with the following statement” way. When presented with the statement “mental illnesses such as depression, anxiety, and bipolar disorder, count as disabilities” we again in Figure 2 see opposing results with only a 3% disagreeing rate from the American side, but a total 51% disagreeing rate from Japanese respondents.



(Figure 2: “Mental illnesses such as depression, anxiety, and bipolar disorder, count as disabilities.”)

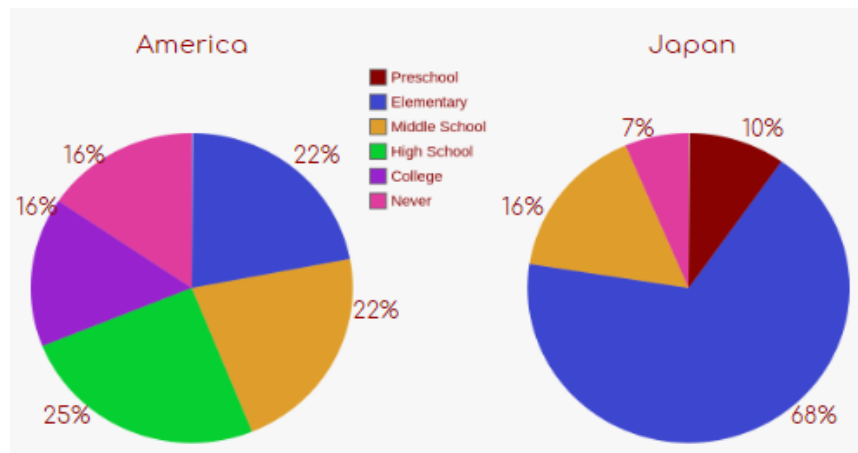
5.1.1 Summary of Findings for Research Question 1

Both of these survey questions make major contributions to answering our first research question. Ultimately, American respondents perceive that people with disabilities discussing their disability is a nonissue and believe mental illnesses can be classified as a disability.

Japanese respondents however perceive that people with disabilities should not discuss their disability and mental illnesses do not count as disabilities.

5.2 Research Question 2: To what extent do people understand current available accommodations for people with disabilities?

Of our survey questions pertaining to this research questions, again two did the best at answering our second research question. The first survey question of “When did you formally learn about disabilities/people with disabilities the most?” in which the answers respondents could choose from included: preschool, elementary school, middle school, high school, college or never, show a great deal of difference between the answers given by Americans and by Japanese.

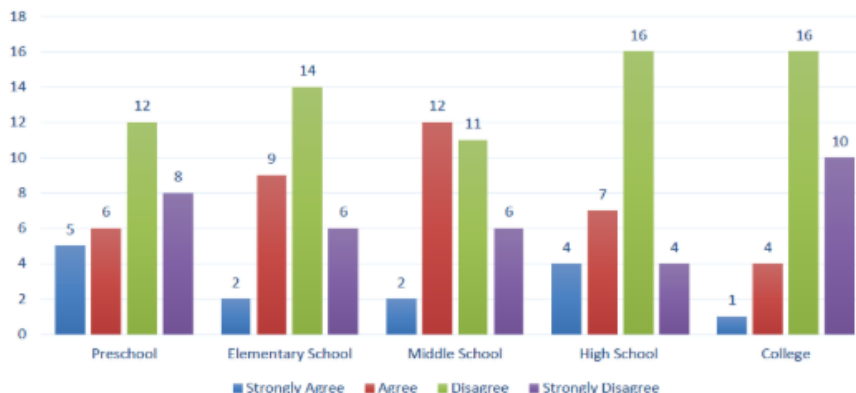


(Figure 3: “When did you formally learn about disabilities/people with disabilities the most?”)

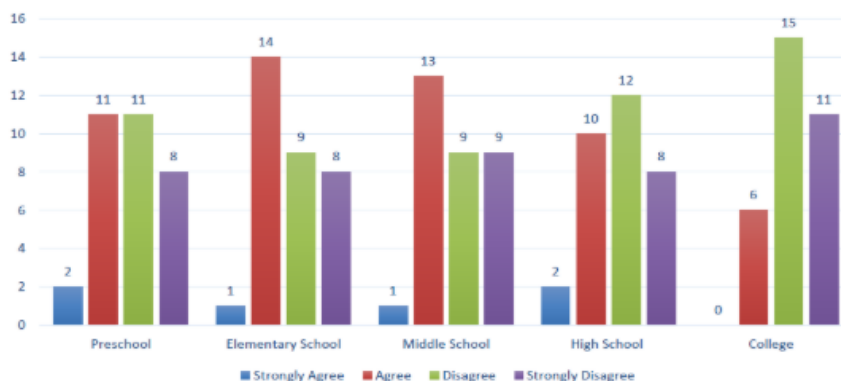
As seen in Figure 3, Americans were almost evenly divided between all choices whereas for Japanese they were most formally educated during elementary school. This led us to infer that while American students were consistently educated about disabilities throughout their schooling, while Japanese students were educated only during elementary school.

The second survey question that contributed to answering the research question was again in a “do you agree with the following statement” format. The statement respondents were giving was “students with disabilities should be separated from students without disabilities in the classroom to better provide support”, and respondents were given the same five levels of schooling, preschool through college, and rated how strongly they agree with the statement in

regards to each level of schooling.



(Figure 4A: “Students with disabilities should be separated from students without disabilities in the classroom to better provide support” – Japan)



(Figure 4B: “Students with disabilities should be separated from students without disabilities in the classroom to better provide support” – America)

Although again we see opposing views as was commonly seen in research question one, Figures 4A and 4B show us that Americans agreed more often that students should be kept separate while Japanese were open to the idea of students being kept together.

5.2.1 Summary of Findings for Research Question 1

Ultimately, Americans have been learning about disabilities continually throughout their education, while Japanese started early in learning but ended earlier as well. Americans also said students should be separated but Japanese in general said it should be inclusive.

6. Conclusion

In conclusion, there appears to be a connection with Japanese not viewing mental illnesses as a disability and feeling that disabilities should not be discussed. Japanese respondents were more formally educated about disabilities at younger ages in elementary school, but their degree of awareness concerning disabilities faltered once they stopped receiving education continuously. Americans are more inclined to have students with disabilities separated from students without, possibly due to more thorough special education implemented throughout the United States.

7. Limitation of the Study and Future Study

A few limitations we faced in this study included our small sample size as well as the fact we cannot generalize that everything is representative of all college students in Japan and America. For a future study, we would like to expand the number of examples used as disabilities, and we would like to further explore the reasoning for separation of students with and without disabilities in America.

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