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## Disabled by stereotype? Experimental evidence from Uganda<sup>☆</sup>

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### ABSTRACT

More than one billion people in the world have some kind of disability. Apart from the obvious physical challenges facing disabled people, there may also be psychological barriers that make it difficult for them to integrate in society and prosper. These challenges may be particularly difficult in developing countries, where disabled individuals are often marginalized. The present paper presents experimental evidence on the effect of social identity on disabled secondary school students in urban and rural Uganda. In the rural setting, we find a negative effect of social identity on confidence, but, somewhat surprisingly, in the urban setting we find a positive effect on confidence. This evidence suggests that social identities are shaped by the local environment and are not necessarily in line with commonly held stereotypes, a finding that could have important implications for the design of policies aimed at improving the lives of the disabled. We find only limited evidence of social identity affecting performance or preferences.

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“It is hard to compete... I usually bring photos to show potential customers what I can do, but many people do not believe that I am the one making the furniture.” Deaf carpenter in Kampala

### 1. Introduction

More than one billion people in the world have some kind of disability. They generally have poorer health, lower educational achievements, fewer economic opportunities and higher rates of poverty than people without disabilities, and particularly so in developing countries. [The World Report on Disability \(2011, p. xi\)](#) argues that: “To achieve the long-lasting, vastly better development prospects that lie at the heart of the 2015 Millennium Development Goals and beyond, we must empower people living with disabilities and remove the barriers which prevent them participating in their communities; getting a quality education, finding decent work, and having their voices heard.”

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Apart from the obvious physical challenges facing disabled people, there are also psychological barriers that make it difficult for the disabled to integrate in society and prosper. Around the world disability is generally equated with incapacity. In some cultures it is even seen as a form of divine punishment or carrier of bad fortune. As emphasized by the [World Report on Disability \(2011, p. 6\)](#). “Negative attitudes and behaviors have an adverse effect on children and adults with disabilities, leading to negative consequences such as low self-esteem and reduced participation.”

In a report on childhood development and disability by the World Health Organization ([WHO, 2012](#)), it is emphasized that limited knowledge about disability and related negative attitudes can result in the marginalization of children with disabilities within their families, schools and communities. “In cultures where guilt, shame and fear are associated with the birth of a child with a disability they are frequently hidden from view, ill-treated and excluded from activities that are crucial for their development.” [WHO \(2012, p. 14\)](#). For instance, children with disabilities are less likely to start and remain in school. Moreover, those who are in school are often excluded within the school setting, for instance being kept separate from other students in their own age group. The WHO report stresses that girls and disabled children living in rural and remote areas are particularly vulnerable to discrimination and social exclusion.

At the same time, there has been a disability movement seeking to establish the disability as part of a positive personal and social identity, and thereby moving away from the medical model where disability is commonly equalized with impairment ([Wehmeyer, 2013](#)). This movement and the growing field of disability studies have shown that the disability identity may in fact be used to empower disabled individuals, by focusing on their uniqueness and abilities. Such empowerment programs are increasingly also implemented in developing countries, by both establishing self-advocacy groups for disabled individuals in the local communities and by launching development forums on the Internet.

This paper reports from, to our knowledge, the first lab experiment on disability. For practical reasons, students with mental or severe visual impairments were not part of the lab. According to Uganda National Household Survey 2005/2006, 9.4% of the population aged 10 years or above have a disability, with the distribution of disabilities being: 17.3% seeing, 20.9% hearing, 25.9% mobility, 7.9% communication, 27.9% others (Tables 11.11 and 11.12).

We study psychological barriers to economic participation among disabled (with mobility or hearing impairments) and non-disabled adolescents in Uganda. We focus on adolescents who are about to leave school, since they are at a crucial stage in life. Many of them will have to seek self-employment, since there are few opportunities for higher education and formal work, a typical situation in many developing countries ([de Mel et al., 2008](#)). The challenges are particularly severe for disabled individuals, who are likely to face both physical barriers and external and internal psychological barriers.

We use a priming approach to study how the disability identity affects beliefs, choices and behavior, where participants in the lab experiment are randomly assigned to be primed (treatment group) or not (control group) before they play various economic games ([Benjamin et al., 2010](#)). The priming provides subtle cues that aim at reminding the disabled individuals of their disability, and we then study whether the priming tilts the beliefs, performance or preferences in a particular direction.

The nature of a social identity may clearly depend on the larger social context. Disabled people in remote areas are considered particularly vulnerable and typically have less access to information and education than disabled individuals in urban areas. In the context of the present lab experiment, for example, the disabled adolescents in the rural areas of Uganda have less access than those in urban areas to the empowerment programs of the National Union of Disabled Persons of Uganda (NUDIPU). This organization is not only less visible in the rural areas, but it is also harder for disabled individuals in rural areas to access such programs and initiatives via the Internet. In our sample, for example, we find that 3% of the disabled participants have access to a computer at home in the rural area while the corresponding number in the urban area is 13%. To study whether the larger social context shapes the disability identity, we therefore conducted identical lab experiments in Kampala, the capital of Uganda, and Tororo, a district in Eastern Uganda where 91% of the population lives in rural areas.

Our study also relates to the growing literature investigating how social identity affects preferences and performance. [Benjamin et al. \(2010\)](#) hypothesize that Asian American identity includes a norm of patience, and demonstrate that Asian Americans indeed make more patient choices when reminded about their ethnicity. [Hoff and Pandey \(2006\)](#) demonstrate that lower caste people in India perform significantly worse in a game of mazes when reminded about their social status. Similarly, [Cadinu et al. \(2005\)](#) establish that women perform worse in math tests when reminded about their gender. We enrich this literature in two ways; by being the first study to focus on the impact of social identity on confidence, and by focusing on the role of the disability identity in shaping confidence, preferences and performance.

The main finding of the paper is that the disability identity shapes confidence very differently in the rural and the urban region. In the urban region, we find that the disability priming has a strong positive effect on the confidence of the disabled individuals (in line with the recent disability movement focusing on disability as part of a positive identity), whereas we find suggestive evidence of a negative effect in the rural region. At the same time, we do not find any effect of the priming on the non-disabled participants, which strongly suggests that the priming effect on the disabled participants is due to the increased salience of the disability identity, rather than, say, any general positive or negative connotation of the primes, which reasonably should affect both disabled and non-disabled. Overall, our main finding shows that the disability identity is affected by the local environment and that this identity is not necessarily in line with commonly held stereotypes, a finding that could have important implications for the design of policies aimed at improving the lives of the disabled. We do not find any significant effects of the disability identity on the preferences and performance of the disabled individuals.

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