

Attitudes to Disability in the UK and Sri Lanka: A cultural comparison

As a Psychology graduate and trainee Speech and Language Therapist, I decided to spend my summer putting to good use the skills that I had acquired in my academic career. To do so, I volunteered with the organisation SLV in Sri Lanka, working on a special needs placement for adults and children, as well as teaching English lessons several times per week, and living with a local family. Completing this particular placement allowed me to see the full spectrum of Sri Lankan life, from childhood to old-age, through all the highs and lows. In particular, I was able to develop an interesting perspective from which to compare the attitudes to disability in Sri Lanka and the UK.

Family: The heart of Sri Lankan life

After being picked up at the airport, we drove through the night in the bustling suburbs of Colombo to my home-stay. A stones throw from the clang of pans in the many street food establishments of Maharagama, we drove down a quiet street, shielded from moonlight by towering palm trees. The small town of Homagama was Sri Lanka in its purest form. The setting of my adventure allowed me to gain an insight into the true Sri Lankan way of life. I lived with the aunty of the organisation's founder, in a bungalow with her husband, son and daughter. Next door, the founder herself lived with her mother, father and six dogs. Despite being 28 years old, and a social entrepreneur leading an international organisation, her parents still cared for her in a very protective way. While individuals in the UK may find this sort of family-centric lifestyle overwhelming, the Sri Lankan view of family is far from an imposing force. They view family and friendship as two inseparable elements. Several weeks into my placement, I asked why the two sisters decided to set up home next door to one another, and my question was met with puzzled looks. Why would they decide to live anywhere else? The two are both home-makers, and so in deciding to live in such close proximity, they are committing a lot of time to one another.



It was a similar story for the seventeen year old girl and eleven year old boy that I lived with. The young boy was slightly cheeky, climbing on the roof, and using his mum's phone battery to power LED lights on the kites he made. A source of entertainment for myself and the other four volunteers, but bewildering to his sister, busy studying for her A-levels. Yet, when I asked her if she would like to follow in her mum's footsteps by living next to her brother, again I was met with a expression that suggested 'well, of course I would'. This desire for proximity highlights a sense that keeping family close and safe is fundamental to the Sri Lankan way of life. Of course, in the UK, we like to think of ourselves as a family centred nation, yet we pale in comparison to the people of Sri Lanka. Young people in the UK have an increasingly powerful desire for independence, and is often expected that they will move out at the age of eighteen to experience university or college life. This independence continues for us, and we enjoy proving to ourselves and our families that we can do it alone, and do it successfully.

Yet, unfortunately these views of family do not always apply to all contexts in Sri Lanka. A firm belief in Karma is embedded in the Sri Lankan mentality, and this means that any suffering you experience in life can be attributed to the wrong-doings of you or your family members, in this life or the next. As such, we can imagine how people can be viewed when a family member is born with or acquires a disability. Societal judgements are one of the reasons that the individuals I worked with ended up living in residential care. It also affects government funding, with some of the services I worked in being extremely poorly funded due to the unfavourable nature in which they are viewed. It is important to highlight here that everyone involved with these families and institutions are 'trying their best'. There is no deliberate wrong-doing, and families still have tremendous love for one another in instances of disability. However, just as it does in the UK, convention precedes all other factors in decision making. As such, there has been little progress in this area in past generations. Residential homes often have one member of staff for every sixteen residents. In children's homes for example, funding may amount to 500 rupees – or around £2.50 - per child per month.

Despite all these best efforts, it is the harsh reality that outdated stigmas surrounding disability have stifled progress in provision for these individuals.

Communication and Independence in Disability

It is also interesting to see how the differing attitudes to disability in these two nations alter the focus of therapy. Coming from backgrounds in healthcare and education, the other volunteers and I sought opportunities to engage in reflective practice, and in the evening we would often discuss how we felt our therapeutic sessions had gone. Often, similar themes would recur, and this was particularly the case in the sessions we ran for children with special needs. In such client groups, we often liaised with the hard-working permanent staff members, to ensure that we were delivering therapy that was optimally beneficial for the children. What we all noticed was that, when we compared our work to work with similar groups in the UK, we felt there was less focus on improving communication. The staff often wanted us to run sessions that would help the children with life skills. For example, we were suggested to help the children learn about food and how to feed themselves, as well as clothes and how to dress themselves. It was evident that the staff wanted to encourage independence among the children, so that they could take care of themselves more efficiently. When we compare this with similar populations in the UK, we would expect to spend more time facilitating communication, with the hope that this would help them to engage socially, communicate their wants and needs, and ultimately improve their quality of life. In both instances, the focus is on whatever will be most important in the day-to-day lives of the client groups in the future. While in the UK, we may never expect those with complex additional needs to achieve a high level of independence, this is very much the reality of such children in Sri Lanka. Again, this highlights the point that everyone working in the area of disability in Sri Lanka is trying their best, and that regardless of where we live in the world, we all want to make the lives of those less fortunate better in whatever way we can.



Patience: The Buddhist Ethos

When we consider the cultural differences in attitudes to disability, it is crucial to highlight the general attitudinal differences that influence this. In the case of Sri Lanka, the largely Buddhist population allow several notable features of their religious beliefs to colour their day-to-day lifestyles and personalities. While I do not have the expertise to discuss Sri Lankan Buddhism here, it is noted that the religion relies on practices of meditation, peacefulness and humility. These features amount to a largely

patient and calm population. From my first day in Sri Lanka, it was starkly obvious to me that the culture of the country did not rely on interactions based on moaning and complaining. I had never before realised how often people in the UK speak in this manner, but I quickly noticed that my casual remarks about the weather being too hot or my day being too long were not handled so frivolously in Sri Lanka. Conversation there is rooted in more positives, reflecting a generally more passive attitude, and a people who are more accepting of their lot. Complaint is reserved for serious problems, and in return, the people are somewhat easier to work with. I remember on one occasion, I was due to meet a Sri Lankan woman at 8am to travel to work with. At this early stage of my placement in Sri Lanka, I had not yet figured out how long it took me to walk to the local bus station (twenty minutes), and so I was running slightly late. As I rushed to the station, a sense of panic built up in my chest, so that when I finally caught up with her, a bundle of apology exploded from me. She, however, simply smiled and shook her head from side to side indicating the Sinhala phrase 'Hari Hari', meaning it is ok, it is not a problem. We then joked that I was starting to run on 'Sri Lankan timing'. This is not to be confused with carelessness, or a lack of concern for others. It is simply the case that the people of Sri Lanka do not seem to make a mountain out of a molehill in the way that we do in Britain.

When it came to working on the projects with individuals with additional needs, this attitude of patience was of key importance. It is truly humbling to see individuals in difficult situations smiling through it. Not because they know no better, but because it is a skill that they have practised since their earliest days. Some

of the projects in which I worked involved bed bound adults who were quite happy to fill their days with the hobbies they had learned, such as embroidery. In another project, there were insufficient resources to provide wheelchairs for all those who needed them. Personally, I still find such insufficiencies difficult, as it is hard to look past inequalities and to help in whatever way you can. However, if the individuals themselves are able to smile through the difficult aspects of life without any sign of struggle, then it is not my duty to cast judgement, but to learn from them. Patience in this capacity can demonstrate to us the importance of faith. Not necessarily religious faith, but it is certainly useful to have humility and a belief that someone cares for us, whether that be a deity or a care worker.

Conclusion

My time in Sri Lanka is something I will never forget. I believe that students in the caring professions should endeavour in any way possible to put their acquired skills into practice. I learnt so much about people, and in particular about children, which I had learnt theoretically in my previous studies in psychology. Working with my special needs client groups in a different culture and language gave me a true appreciation for facilitating communication, and has gave me an interesting perspective from which to approach my career as a speech and language therapist. Spending time away from my comfort zone has also allowed me to reflect on my own performance, and think very consciously about how I interact with those I aim to help. The challenging circumstances in which I worked also allowed me to realise that it is alright not to always perform perfectly as long as you try your best, and I have tried to take the patient Sri Lankan attitude home.

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