# Hmong Parents' Attitudes, Perceptions of Disability, and Expectations of Children with Disabilities: A Qualitative Study of Its Impact on Academic Performance

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#### **ABSTRACT**

Hmong, an ethnic group from Southeast Asia, are immigrants in the United States since 1975. As they adjust to western culture, parents have to set different expectations for their children. One major difference for Hmong in the U.S. is the opportunity to receive a free public education. Hmong parents strongly encourage higher education and expect children to do well, but for their children with disabilities, pursuing education after high school may not be a choice.

The purpose of this qualitative study is to investigate what is expected of children with disabilities living in the United States and what he or she can achieve academically, based on the child and parent's goals and perspective and attitude of disabilities. Three Hmong children with disabilities and their parents from Eau Claire, WI were interviewed. The ages of the children were 18 and 19.

Results found that Hmong parents tend to have a positive attitude toward individuals with disabilities and have hopes for their children with disabilities but have lower expectations for their children with disabilities than their children with no disabilities. All the Hmong parents want their children with disabilities to perform well in school and half of them want their children to continue their education after high school. The other half believed it would be better for their children with disabilities to work after high school. Suggestions from children with disabilities and their parents to improve their education were also made.

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#### Chapter I: Introduction

In today's society, an individual's ability, competence, and education level are what most people use to determine success. It is often assumed that one must have something to call his or her own to succeed and to gain respect, whether it is an opinion, a piece of land, an education degree, or children. This is especially true for the Hmong culture in regards to having children and an education. Bearing respectful, healthy, and "normal" children is expected of most parents. Many times when children are unable to perform a task after many attempts, children and parents get frustrated and standards for children subsequently become lower. Children with disabilities, however, are automatically given lower standards than those without disabilities (Wathum-Ocama & Rose, 2002).

Not only parents are involved with their children who have disabilities, but schools also play a major role in these children's lives. With the increased culturally and linguistically diverse groups in the Untied States, special education programs are dealing with more challenges due to the high number of diverse children with disabilities in the public school systems (Harry, 1992; Ysseldyke, Algozzine, & Thurlow, 2000).

Immigrant children are one of the fastest growing segments of the U.S. population and make up almost 20 percent of the children in the U.S. (Rumbaut, 1999; Xiong, Detzner, Keuster, Eliason, & Allen, 2006). Included in these children are Hmong, an ethnic minority group from Southeast Asia. New to the U.S. since 1975, Hmong faced a drastic lifestyle change. A major difference is Hmong parents have had to set new standards and expectations for their children. Preparing a child to be a good wife or husband to work

hard on the farm was more important for children living in their homeland in Laos, but being educated and having a career is now emphasized in the U.S.

Hmong parents are already struggling to adjust to American society, but for Hmong parents who have children with disabilities, they also have to learn to work with additional services to assist their children. Since the 1970s, there are laws in place for children with disabilities. The *Individuals with Disabilities Education Act* (IDEA) mandate that all children with disabilities are entitled to a free and appropriate education in the "least restrictive environment" (LRE), regardless of the student's needs. Parent involvement is also required, which includes being a team member of the individualized education program (IEP) for the child and meeting with school officials annually to review the child's goals and objectives (Nielsen, 2002).

Many Hmong parents have had to learn about their role in order to provide the most support for their child. Oftentimes, Hmong parents are confused with their roles in helping their child achieve personally, socially, and academically. Other times, parents do not know how to help their child in these areas. Although there has been a considerable amount of information written about the Hmong, little research has been conducted on Hmong children with disabilities. The history and culture of the Hmong will be introduced in this section in order to provide context for this thesis.

#### Hmong History

Hmong, who were often referred as nomads or barbarians, first settled in the United States as refugees 30 years ago with very little or no education, not even in their native language (Quincy, 1988; Faderman & Xiong, 1998; Ranard, 1988; Lee, 1993; Fadiman, 1997; Um, 2003; Yang, Thao, Yang, & Yang, 1994). Years before that,

Hmong fought their way in seeking a piece of land to call home. As they traveled through jungles, rivers, and oceans many families, including young children, risked their lives to escape to a land of opportunity. Many Hmong found peace again after having walked, sailed, and flown for many miles and many days. Thousands of Hmong ended up in the United States while others dispersed themselves around the world (Mote, 2004; Quincy, 1988, 1995).

The origin of the Hmong (pronounced MONG), a unique ethnic group, is a mystery (Faderman & Xiong, 1998; Fadiman, 1997; Quincy, 1988, 1995; Trueba, Jacobs & Kirton, 1990). Scholars have different beliefs of where the first Hmong came from (Faderman & Xiong, 1998). Some say that according to Hmong legends, roots of the Hmong were found somewhere in Mesopotamia. Others believe Hmong originated from Siberia (Faderman & Xiong, 1998; Fadiman, 1997), while some argue that there are similarities in the Chinese characters for the words "Hmong" and "Mongols," therefore; Hmong were really Mongolians (Faderman & Xiong, 1998; Quincy, 1988; Trueba et al, 1990). Quincy (1988) claims that the Hmong's original homeland could have been southern Russia or the Iranian plateau. There are also legends showing that Hmong had always lived in China. Although there are many beliefs, there is evidence showing that Hmong once settled along the Yellow River over five thousand years ago (Yang et al., 1994; Quincy, 1988, Chan, 1994; Faderman & Xiong, 1998). At one point they were also found to be living in the mountains of China (Pfaff, 1995; Quincy, 1988).

In the early 1990s, Hmong families were forced out of China after having political and economic disputes with the Chinese (McInnis, Petracchi, & Morgenbeser, 1990; Fadiman, 1997). After walking for many days carrying everything they owned, about

half a million Hmong migrated to Indochina where they settled in the highlands. An estimated 8 million Hmong remained in China (Hmong Resource Center, 2006). The mountains of Laos became the new homeland for many Hmong, where they lived in an agricultural farming lifestyle and practiced slash-and-burn farming techniques (Faderman & Xiong, 1998; Quincy, 1995; McInnis et al., 1990; Koltyk, 1998; Yang et al.). By the 1960s there were about 300,000 Hmong in Laos and another 200,000 in Thailand, Vietnam, and Burma (Yang et al.; Fadiman, 1997).

Life was peaceful for the Hmong until they had to divide up during World War II. One group sided with the French, while the other sided with the Japanese. During the Vietnam War, the groups remain divided, with one allying with the United States and the other supporting the communists of North Vietnam (Koltyk, 1998). In 1961, the Hmong were recruited by the United States Central Intelligence Agency (CIA) as guerilla fighters. A verbal agreement was also made that if things did not work out, U.S. would provide a safe place for Hmong and their families. During this "secret war" against the communists, the Hmong controlled the mountainous border between Laos and North Vietnam and blocked supplies going to South Vietnam (Koltyk, 1998; Pfaff, 1995). In return for the help Hmong provided, U.S. dropped supplies, such as food and blankets for Hmong (Omoto, 2002; Faderman & Xiong, 1998).

The U.S. withdrew from the war in the early 1970s, and the communists took over Vietnamese and Laotian governments after the war ended. Fighting against the communists for many years, Hmong became the target for genocide attacks and chemical warfare, which forced the Hmong to flee to Thailand (Chan, 1994). Thousands, particularly elders and young children, starved to death or drowned in the Mekong River

during the exodus from Laos while many others were killed by the communists (Koltyk, 1998; Quincy, 1988, 1995; Yang, 1993, Yang et al., 1994). By December 1977, more than 2,500 Hmong arrived to the refugee camps in Thailand. Four months later, about 8,000 were refugees in Thailand (Quincy, 1988). At first, the Thai government accepted Hmong refugees into the highlands of Thailand, but as the Hmong population increased, the government became strict. The Hmong were then allowed to settle in refugee camps near the border of Thailand and Laos with little help from the government (Quincy, 1995).

When the United States learned about the persecution of the Hmong, they felt they were responsible to help since it was the CIA who got the Hmong involved with the communists. In 1975, U.S. airlifted thousands of Hmong from the Thai refugee camps to the United States. Other countries, such as France, Australia, and Canada, started accepting Hmong as well. It is estimated that there are over 12 million Hmong worldwide (Hmong Resource Center, 2006). According to the 2000 U.S. Census there are 186,310 Hmong living the United States with the majority of them living in California, Minnesota, and Wisconsin. However, using community estimates, *Hmong National Development* (HND) indicated there are actually 283, 239 Hmong in the United States in 2000. Because of the language barrier, census forms were not completed by many Hmong families (Hmong National Development, 2006).

While the majority Hmong arrived to the U.S. after the Vietnam War ended (Hamilton-Merritt, 1993; Koltyk, 1998; Quincy, 1988, 1995), the U.S. State Department decided in December 2003 to admit another 15,000 Hmong refugees from Wat Tham Krabok, Thailand after the refugee camp shut down (Xiong, 2004; Grigoleit, 2006).

#### Hmong Culture

Many Hmong individuals in the United States continue to keep their cultural values alive while adjusting to American culture, however, others assimilated completely to the new society. The process and assimilation process to mainstream American culture was a challenge for many Hmong, creating different values for both parents and their children. While some Hmong parents continue to hold traditional beliefs, their children adjust quickly to the western culture and are either forced to live in two cultures or adapt to one. In the U.S. today, Hmong parents continue to emphasize ideal Hmong values such as keeping close family relationships, working hard, respecting the elders, making money, building social relationships, and finding a "qualified" soul-mate. In addition to these traditional values, parents also encourage their children to be independent and most importantly, to get an education, now that they have the opportunity.

Having a family and maintaining close relationships with them is one of the most important values in the Hmong culture. Clans are determined according to the same last name. There are 18 common clan names: Chang, Cheng, Chue, Fang, Hang, Her, Khang, Kong, Kue, Lee, Lor, Moua, Pha, Thao, Vang, Vue, Xiong, and Yang. Clan names are used to trace one's ancestor or family rivalries from the past. It gives Hmong individuals their identity and a sense of who they are (McClain-Ruelle & Xiong, 2005). Economic, political, and social bonds are also created though clans (Koltyk, 1998). In the Hmong culture, marriage links individuals and families together. Marriage also means having a family and maintaining good relationships with the other clans. In some families, first cousins or second cousins are encouraged to get married to each other, so the families can stay connected. Marriage is acceptable as long as the two individuals have a different

clan name, but no matter how distant two individuals with the same last name are, marriage is forbidden. Hmong individuals with the same clan name consider themselves to be brothers and sisters.

Immediate family members such as parents and siblings tend to have close relationships, although families tend to be large. A Hmong household may consist of three or even four generations living together. In households where grandparents are present, many of them are the main caregivers of their grandchildren. Children are valued in the Hmong culture. The more children a family has, the more help there is, especially when living in an agricultural society. In a non-agrarian culture like the United States, help is not needed for farming but for family gatherings. The more family members there are the more physical help there will be when having big feasts or other occasions, such as funerals, weddings, or other gatherings. Large families also mean a more extended social network. The more people there are at any traditional feast or occasion, the more respected and acknowledged a clan is by other clans.

In addition, when in need financially or when making major decisions, individuals turn to clan members for assistance. Another reason for large Hmong families to continue to be developed is because many children are the future caretakers for parents.

Not only is their presence valued, but children are considered gifts and blessings. Each child is born with his or her own fortune and luck, especially children with special needs (Xiong, 1993).

Other than valuing children and families, Hmong also believe that hard work will lead to success (Vang, 2004). Hmong individuals worked long, hard hours in the farm back in Laos. They carry this work ethic to this country and often work from dusk until

dawn with short or no breaks in between. As parents use this standard of work, they enforce it on their children and expect the same from them.

Although Hmong are trying to preserve their traditional culture, certain values have changed to be a part of the American culture. Education is being emphasized more now than it has ever been. Since many Hmong adults did not have the chance to be educated as children, they are now holding low-paying labor jobs. As a result, parents want their children to live a better life than their parents did by encouraging children to get an education. With little knowledge of what doctors, lawyers, or engineers must go through or what skills are required of these professions, many parents set high expectations for their children to enter these fields because the prospect of money is evident. Having little or no academic and financial support from parents, reaching these goals is not easy for their children. In some cases, children turn their backs completely on their parents and become involved in gangs, while many other Hmong children make it through college successfully.

Many uneducated Hmong parents depend on schools to educate their children and provide little or no support because parents do not know how to help their children to do well in school. With the assumption that schools provide children with employment, academic, and cultural skills to survive in American society, Hmong parents find it difficult to accept when their children get in trouble with law officials or are not able to enter college or find employment after high school (Hmong Issues 2000 Conference, Fresno, CA).

Also different in this country for Hmong is the availability of better health care and technology that lead to increased life expediency for Hmong children. This is a

major change from the short life expediency for children with defects and disabilities in Laos. As a result, Hmong parents have to care much longer for their children with disabilities. With this culture change and growing population of Hmong in the U.S., it is necessary that researches continue to explain the effects Hmong parents have on their children with disabilities.

Since children are the core of Hmong culture, there is great expectation from parents for children to be successful and independent. It is expected that Hmong children will eventually grow up to have a family of their own. This puts lots of pressure on children with disabilities because of the possibility of not being able to fully satisfy their parents' expectations. Although some Hmong parents know their children with disabilities are not able to fulfill cultural male and female roles, some individuals, especially males, feel they must carry on their father's name or care for their parents in the future. These expectations for Hmong children differ from children in western cultures.

Hard as it is already for Hmong children with disabilities to live up to the cultural expectations, they face even greater challenges when they are expected to comply with the new standards Hmong parents set for their children in this society of being educated. As Hmong parents recognize the need for education, many encourage their children to pursue higher education. While a small number of Hmong students are academically ready and continue onto post-secondary school (Vang, 2004), very few Hmong students with disabilities extend their education beyond high school. Most students start preparing for their future career during their high school years, but it is important to examine whether children with disabilities go through the same process. It is crucial to investigate

what is expected of children with disabilities living in the United States and what he or she can actually achieve academically, based on the child and parent's goals and perspective and attitude of disabilities.

Statement of the Problem

The purpose of this qualitative study is to:

- 1.) Survey Hmong students with disabilities on their attitudes and perceptions of disability and its impact on their academic performance as measured by their grades, goals, and education level,
- 2.) Survey their parents to determine their attitudes and perceptions of disability and its impact on the student's academic performance as measured by the student's grades, goals, and education level, and
- 3.) Determine if parents perceive their child with a disability differently or have different academic expectations for them and determine how these standards affect the child's success.

Definition of Terms

Disability – For this study, 'disability' will be used as a general term to determine any type of disability, including physical, cognitive, learning, etc.

Assumptions

It is assumed that all participants, especially the children, understand the statement or question if they do not ask for explanations. Although there are few participants, it is assumed they represent the general Hmong population.

#### Limitations

A limitation to this study was the small sample size. It was also a limitation that there was an imbalanced gender representation because there were more participants of one gender than the other. Boys and girls are treated differently in the Hmong culture, and it could also mean Hmong boys and girls with disabilities are perceived differently and are given different expectations in regards to academic achievement.

Another limitation was the families' willingness to participate. Since they volunteered to be in the study, it could indicate that they have positive perceptions and attitudes of disabilities or that their children have higher academic achievements, therefore; they were willing to talk about this sensitive topic.

It was also a limitation that all families were from one small community and school district. Another limitation was that many of the interviews were done in Hmong, and certain words or ideas could not be translated into the exact meaning in English. The questionnaire used for the study was originally in English. Translating it into Hmong could have slightly distorted some meanings of the questions and answers.

#### Chapter II: Literature Review

#### Introduction

This chapter will discuss the Hmong and education, Hmong individuals with a disability, and research done on this group of children. The Hmong writing system, Romanized Popular Alphabet (RPA), was established in the 1950s by two linguistic anthropologists from the U.S. and a French missionary (Pfaff, 1995 & Koltyk, 1998; Buley-Meissner & Her, 2006). Since Hmong did not know how to keep written documents, French colonial government and missionaries and Chinese kept records of the Hmong. For Hmong, history and information tend to be shared orally from generation to generation (Koltyk, 1998; Fadiman, 1997). For parts of the next two sections, data is gained through interviewing Hmong individuals about their views on disabilities.

Another reason for the numerous interviews is because there have been little research done on Hmong children with disabilities.

#### Hmong and Education

Recognizing that without an education, Hmong parents realize that they have to hold jobs that demand physical labor and pay little. Parents encourage their children to do well academically, so their children will not have to work long, hard hours in the future. Many Hmong children are aware of the importance of an education and do well at school, but there are others who struggled for various reasons and drop out of high school. A research (Ima & Rambaut, 1988) concluded that Hmong students are unlikely to succeed beyond secondary school because their academic skills are very poor throughout grades K-12. The researches indicated an issue for Hmong students is their inability to read, write, and understand English proficiently. In a more recent study,

Vang (2001) found that although 95% of Hming high school students graduate on time, the majority lack the academic skills needed for success, and only 10 to 15% Hmong high school graduates get accepted to public universities. O'Reilly (1998) found several academic problems among Hmong high school students: poor attendance or truancy, failing grades, poor behaviors, credit deficiencies, violation of school rules, extensive disciplinary records, suspensions, and adjudication. Thao (2003) indicated that the school and home environment are important factors in children's education. In addition, Um (2003) stated that academically well-achieveing students are successful due to the availability of support and positive reinforcement from school personnel and family members.

School factors.

When the Hmong arrived in the United States without academic background and English skills, Hmong students were perceived poorly in academic achievement.

Language deficiency was students' biggest handicap in school, and they were believed to not be "college material." They were not expected to attend college and were placed in classes to fulfill minimal graduation requirements. Administrators believed it was important for Hmong students to obtain a high school diploma to allow them to find a job after high school since college would not be a choice for them (Goldstein, 1985).

A similar study on Southeast Asian high school students found that they often felt their teachers consider them incapable of first-rate academic achievement. Teachers also failed to encourage their Southeast Asian students to enter advanced courses or pursue scholarship opportunities and many times these opportunities were rarely accessible for Southeast Asian students (Yang, 2003; Um, 2003). In many public high schools,

Southeast Asian students continue to be "tracked" into remedial or vocational preparation programs (Um, 2003). These students are not given access to the educational resources and institutional support they need (Yang, 2003; Um, 2003). In fact, Um (2003) found that 18 percent of Southeast Asian students receive no support from their high school teachers or counselors, which often lead to missed opportunities. Teachers, peers, and others treat them as if they are incapable of succeeding (Yang, 2003). In another study, 11.5 percent of Vietnamese students felt discriminated by their teachers (Hobbs, 2000). Trueba, et al. (1990) reported that many Southeast Asians stopped trying to learn and accepted their abilities viewed by others.

Although there are bilingual assistants available in public schools (Vang, 2004), Hmong children continue to struggle academically due to a lack of academic language and study skills (Lee, 2001; Vang, 2004; Reder, 1985). Student's low language skills correlate with low scholastic achievement, low-test scores, and insufficient credits (Lee, 2001; Vang, 2004). Consequently, Hmong and other Southeast Asian students are often referred to special education programs due to the lack of English language proficiency (Um, 2003; Trueba, et al., 1990). In addition, Hmong students find it difficult to make connections with school staff (Thao, 2003). In Thao's (2003) study, Hmong students indicated that school personnel are not familiar with the Hmong culture and values, which makes it difficult for students to have a comfortable learning environment. Yang (2003) found similar results with Southeast Asian students overall. Oftentimes these students feel alienated from their schools because they feel they do not belong there. A factor to feeling lack of belonging is due to having none or few teachers and educators of the same racial and ethnic background (Yang, 2003). Um (2003) reported that the

absence of language/history courses, active role models, and Southeast Asian teachers have led Southeast Asian students continue to feel alienated and marginalized in educational settings.

Home factors.

The home environment also contributes to students' learning. Abramson and Lindberg (1985) indicated that hard work, discipline, and parental pressure to maintain family pride and honor and family expectations are some factors that lead refugee children to be academically successful. The value of hard work is often emphasized in immigrant families (Lopez, 2001), including Hmong families (Vang, 2004; Um, 2003; Yang, 2003). With strong cultural values of hard work and education, Hmong children are expected to succeed without help from home (Vang, 2004). Many parents value their children's education and indicate that a good education is the way for their children to attain personal success and a good life, but they do not provide the support and guidance necessary at home because of their low educational background (Vang, 2004; Yang, 2003; Mason-Chagil, 1999, Timm, 1994).

Studies (Becher, 1986; Coleman, 1991; Comer, 1988; Eccles & Harold, 1996) have shown that high parent involvement increases student performance. However, immigrant families may not view involvement in a child's education the same as white middle-class families (Lopez, 2001). Mason-Chagil (1999) reports that although Hmong parents are aware of the lack of skills to assist their children with homework, parents are involved with their children's education indirectly by making sure their children are at school all the time or sitting with their children as they do school work.

While many Hmong parents are satisfied with their children's teachers, some are unaware of the roles teachers play in this society (Yang, 2003; Mason-Chagil, 1999; Wathum-Ocama & Rose, 2002). Hmong parents continue to hold the traditional belief that school personnel have the authority over their children's public education (Yang, 1982) and the school has full responsibility of educating students (Mason-Chagil, 1999). Many Hmong children continue to perform poorly in school due to cultural differences, family economic situation, family size, home language, and lack of support (O'Reilly, 1998; Lee, 2001; Mason-Chagil, 1999). Similarly in another study, Thao (2003) found that Hmong students indicated experiencing a culture clash at home and school and need more support from both parents and teachers.

Disagreements on traditional and western culture expectations for Southeast Asian parents and their children raised in the United States is one of the biggest concerns at home (Thao, 2003; Um, 2003; Lee, 2001). Philosophies about child-rearing, parent-child relations and gender roles have been found to be different between Southeast Asian parents and their children who are raised in a western society (Um, 2003). Yang (2003) indicated that Southeast Asian youth tend to have more American ideas that emphasize the rights of children to make decisions for them whereas parents believe they are the authority figures.

Hmong children born in the United States often complain that their parents are too strict and do not understand life in the United States (Lee, 2001). Hmong parents and their teenage children have a hard time understanding each other because many Hmong parents did not have the opportunity to experience adolescence. The majority Hmong individuals married and have kids as teenagers in Laos. This traditional practice is not

seen much in the U.S., which makes it difficult for many parents with teenage children (Faderman, 1998).

Roles begin to change when children are more knowledgeable about the American system than their parents and are often the educators for parents. In households where English is limited for adults, Southeast Asian youth take adult roles in making minor decisions and communicating between parents and outside authorities (Um, 2003). Hmong children have responsibilities such as interpreting for parents; driving their parents to appointments; performing various household chores; and caring for younger siblings, which include getting them ready for school and making sure their homework is completed every night (Lee, 2001). Many parents feel they have lost control due to the many activities their children choose to be involved in or when parents have to rely on their children (Faderman & Xiong, 1998).

Even though Hmong parents tack the support to help their children achieve academically, parents encourage post-secondary education (Lee, 2001). Weinberg (1997) also indicated that most Hmong parents do not have a formal education, but they do have high expectations for their children to attend college. While many Hmong children are expected by their parents to attend college, others are self-motivated to pursue higher education. Some students do well academically and want to continue education after high school, but financial factors hold many back from entering or finishing college (Lee, 2001). In a study, 36 percent Southeast Asian students reported finance to be the biggest obstacle to their educational pursuit (Um, 2003). Although in many states there are available grants for first-generation and low-income students, a lot of Hmong parents and children are unaware of opportunities for college financial aid (Yang, 2003). Southeast

Asian males indicated being employed early, postponing higher education, or holding multiple jobs while in college because of obligation to support their families financially (Um, 2003). Lee (2001) indicated that many Hmong students reported holding a job in high school to support the family financially. Lopez (2001) also found from his study on an immigrant family that children in high school are encouraged to seek employment to financially assist the family.

Although there are many Hmong individuals with low academic skills, there are also many others who have accomplished a lot in regards to education. Many Hmong high-school students graduate valedictorians and receive honor awards. According to the 2000 U.S. Census, over 10,000 Hmong earned their undergraduate degrees. Another several thousand are currently enrolled in public higher education institutions throughout the U.S. (Hmong Issues 2000 Conference, Fresno, CA). Thousands of Hmong have received master's degrees, and more than 170 Hmong have earned doctoral degrees in different fields. Today Hmong professionals include medical doctors, engineers, lawyers, business owners, pharmacists, educators, politicians, and more (Hmong Resource Center, 2006).

Hmong Individuals with Disabilities

Cause of disability.

Arokiasamy, Rubin, and Roessler (1995) indicated, "What society perceives to be the cause of disability has had a greater influence on society's responses toward persons with disabilities than the actual cause of the disability" (p. 124). In traditional Hmong culture, spiritual, physical, biological, and social explanations can be made for a child's disability (Xiong, 2003, Tatman, 2001). Xiong (2005) wrote that parents often seek a

reason for their child's disability. They explore family history, environmental factors, the pregnancy, and injury to the child, or any other factors that may have contributed to the disability (Xiong, 2005).

Some cultures believe Gods are responsible for people to have a disability (Tatman, 2001). Some Hmong believe a person with disabilities may have been given by God to the family as a gifted child (Lee & Yuen, 2003). Other Hmong view disabilities as a spiritual punishment for an act performed by the individual, the parents, or grandparents of the individual (Tatman, 2001; Allison & Vining, 1999; Lam, 1993; Weinberg & Sebian, 1980; Wright, 1985, Lee & Yuen, 2003). The act could be something from being mean and rude or making fun of someone with a disability. It could also happen if a crime such as killing or stealing has been committed by a family member (Tatman, 2001).

Illnesses and disabilities could also be caused by ancestors if their worship is neglected or improperly carried out, or if they are simply in need in the afterworld. Others with traditional beliefs would say that individuals with disabilities have been possessed by evil spirits. These explanations are most likely used for children who are born with their disability. On the other hand, Xiong (2005) indicated that many Southeast Asian cultures no longer consider disability to be the result of a curse, sin, or evil deeds. The choices families make about health and educational services are influenced by their beliefs. Unresolved medical problems or the health condition of a pregnant mother or of the child may lead to physical or developmental disabilities (Meyers, 1992).

While many Hmong have cultural beliefs, others are using biological factors to explain disabilities. Some believe that their child has a disability because of a premature birth. Others indicated that environmental and societal factors such as the chemicals in food cause children in the United States to have disabilities (Vang & Barrera, 2004). Some Hmong believe that the chemicals used in farming and for preserving foods, which is a major difference from farming in Laos, result in more illness and disabilities among Hmong children living in the United States (Barrera, Vang, Liu, & Thurlow, 2005). Developmental factors, including a tumor formed in the child's brain or a broken cord in the child's brain, have been stated to cause disabilities (Vang & Barrera, 2004). Since marriage is allowed between cousins in the Hmong culture, some individuals believe that this could cause defects or disabilities. Another possible explanation of defects or disabilities is that a woman lacked foods that she craved during her pregnancy (Shoua Yang, Personal communication, October 26, 2006).

Hmong have many ideas on what cause disabilities because while many Hmong continue to hold traditional beliefs, others are using western ideas to explain disabilities.

Lee and Yuen (2003) concluded from their study that there are contradictions because Hmong are unclear on what really leads to disabilities.

Hmong cultural views of disability and illnesses.

Within all cultures, it is believed that their cultural practices, traditions, and beliefs are normal and right and others' perspectives are wrong or abnormal (Sue, 1990), Like other cultures, Hmong have their own views of individuals with disabilities.

Oftentimes Hmong refer to one with a mental disability as "ruam," literally meaning

"dumb." Hmong individuals with disabilities are often looked down upon because that person may not be able to do everything expected of a "normal" individual.

Regardless of any culture, both roles of a man and a woman require physical and mental abilities. In the Hmong patrilineal culture, it is expected that one day a Hmong son will become the head of his household and be the primary caretaker of his parents. If there are more sons than the one with a disability, parents will have their other sons to care for them when they age, but if there is only one son, and he is an individual with a disability, he may not be able to meet the expectations of a typical Hmong son. Extended family members will have to care for an elderly couple if their son is unable to because of a disability (Chou Her, Personal communication, November 14, 2006).

Hmong sons are also expected to carry on the family's name. IImong sons are highly valued because eventually they become the decision maker for the family when they are married. Once a Hmong male gets married, his role and responsibilities change. If a son has a physical or cognitive disability, he may not be able to fulfill these cultural expectations (Chou Her, Personal communication, November 14, 2006).

Hmong females, however, have different cultural expectations. When a Hmong woman gets married, she is expected to become a part of her husband's family and care for her in-laws as though they are her own parents. Hmong women are also expected to be good housewives by rising early in the morning to do the cooking and cleaning around the house. An individual with a mild disability will have a harder time getting and being in this position, but someone with a severe disability may not even have the chance to be a housewife.

Marriage can become complicated if one without a disability wants to marry someone with a mild or severe disability. It is often discouraged by parents for their son or daughter without a disability to marry someone with a disability. Some Hmong believe individuals with a disability are not able to raise a family of his or her own and may be discouraged from attempting to start a family (Lee & Yuen, 2003). Mai Neng Moua, a young woman who had kidney failure and had to go through a transplant, recalled her mother saying to her "A disabled person like you - who would want to marry you? A good daughter-in-law gets up early and cooks for the family. You won't be able to do that" (Moua, 2003). In this situation, Moua's mother considered Moua to have a disability while Moua and others may consider it a health battle.

Oftentimes two Hmong individuals with disabilities get married. Other times, a Hmong individual with a disability could be arranged to marry someone who is divorced or is a widow and has kids. In the traditional Hmong culture, someone without a spouse but has kids is often not given much respect by the elders, especially if it is a woman who has a child out of wedlock. When there is someone in need of a husband or wife, the individual with disabilities is considered an ideal spouse to complete a family. This practice was more common in Laos, but it does happen in few occasions in the U.S.

In situations where someone with a physical disability is in a relationship with someone who does not have an apparent disability, some Hmong individuals would assume that the one without the apparent disability may not love his or her significant other completely and believe that it might be better for the one with a disability to not be in the relationship at all (Chou Her, Personal communication, November, 14, 2006 & Shoua Yang, Personal communication, October, 26, 2006).

Although major decisions are made by family members and the clan, Hmong individuals are responsible for making basic life decisions such as what to prepare for dinner or where to shop. Someone with a severe disability will be able to make fewer decisions on his or her own and must rely on other family members more. Everson and Moon (1987) and McNair and Rusch, (1991) wrote that families play a major role in the transition of individuals with disabilities to adulthood and are perhaps the single most important element in the total transition continuum. It is common in the Hmong culture for immediate family members to care for someone with a disability instead of placing that person into a group home. Parents or other family members may have to care for the individual for his or her entire life. Many individuals with disabilities continue to live with or receive intense support from their parents throughout their lives (Freedman, Kraus, & Seltzer, 1997; Heller, Miller, & Factor, 1997).

According to McInnis (1991), Hmong families seek treatment through their culture before making use of the American health care system. With the belief that bad spirits may enter the body and good spirit may leave the body if cut open, traditional Hmong individuals avoid western practices as much as possible (McInnis, 1991). Other research (Fontaine, 2000; Pinzon-Perez, Moua, & Perez, 2005; Lee & Yuen, 2003) indicate that Hmong continue to utilize traditional healings, such as making use of a shaman. In the traditional Hmong culture, when a person is ill the person's soul is lost somewhere and unable to find its way back to the body (Quincy, 1995, Faderman & Xiong, 1998). The only way to reunite the body and the soul again is to have a shaman search for and call the soul back. To search for the soul, the shaman covers his face with

a black veil and performs a ritual by shaking his rattles, banging his gong, and speaking in a language only the spirits will understand (Cha, 2003; Faderman & Xiong, 1998).

Hmong believe that the shaman has the power to heal by searching for the lost, wondering, or attacked soul by entering another world to communicate and negotiate with the demons or evil sprits that cause people to become ill. The shaman will offer the spirits an animal such as a pig, chicken, cow, or goat as a sacrifice with "joss monies" and burning incense sticks to cure illnesses. If the soul is not found, it may lead to death (Cha, 2003; Faderman & Xiong, 1998; Thao, 1986). Fadiman (1997) described a Hmong girl, Lia, with epilepsy as Lia's spirit being caught to cause her to fall down. In this case, Lia's parents often had to consult a shaman for answers and treatments while also seeking modern medical help. Like Lia's families, many Hmong families have combined traditional and modern treatments (Fadiman, 1997; Faderman & Xiong, 1998; Lee & Yuen, 2003).

Hmong believe that when a person, such as Lia, is ill, changing her name could cure her. With a new name, the spirit who has stolen the individual's soul will be tricked that it is a different person and the lost soul will be returned (Fadiman, 1997). A name change could also occur after a shaman diagnoses that a sick child does not like his or her name.

In addition to shamans, Hmong believe in magic healing (khawv koob).

Faderman and Xiong (1998) write about a magic healer assisting American doctors to stop a Hmong patient from excessive bleeding after a surgery. Along with tying a string around the patient's neck, the magic healer says magic words for the bleeding to stop.

Surprisingly to the American doctors, the bleeding stopped a day after the healing was

done. Magic healers can be considered Hmong doctors and are often consulted when there is an illness (Faderman & Xiong, 1998).

Hmong herbalists are also available for treatments and have knowledge of all herbs and cures illness. An herbalist could also be a magic healer, as well as a shaman. Other than the effectiveness of traditional healings, it is also an advantage for Hmong families to seek treatments from a shaman, magic healer, or herbalist because of the cost. Some families explain that medical costs at a hospital could be up to three times more than a traditional healer (Faderman & Xiong, 1998). The traditional healer usually does not ask for money, but it is courtesy to give a reasonable amount.

However, Lee and Yuen (2003) wrote that, "Although Hmong have unique perceptions, beliefs, and understanding, and respect of disability and persons with disabilities, these beliefs have been challenged and altered by modern American concepts and legal regulations of disability" (p. 131). There is a large number of Hmong seeking western assistance such as medical doctors, mental health workers, or social workers instead of relying on Hmong shamans, magic-healers, or herbalists (Lee & Yuen, 2003).

Statistics on Hmong with disabilities.

According to the National Center for Family Support (2000), there are currently 526,000 Americans with disabilities over the age of 60. The number is expected to triple to over 1.5 million by 2030. However, no statistics of Hmong or Southeast Asians with disabilities or impairments were found on the National Institute of Health, National Center on Minority Health and Health Disparities, National Institute of Mental Health, and the Special Programs Development Branch, or the Center for Mental Health

Services. A Hmong leader estimated that approximately 20% of Hmong individuals in California have a type of disability (Lee & Yuen, 2003).

Lee and Yuen (2003) found from their study on Hmong individuals with disabilities that 64.9% of the participants reported knowing someone with a disability. Of those respondents, 86.6% indicated that they either have a family member or know a relative with a disability condition. In 1983, a research done on 72 Hmong families (424 individuals) in La Crosse, WI found that only four individuals reported being handicapped and five individuals indicated having a disability. The type and severity were not recorded (Bruder, 1985).

According to the United States Census (2000), 20% of the total Hmong population identified themselves having at least one disability. With the individuals who reported, 8% are ages 5 to 20, 35% are ages 21 to 64, and 59% are age 65 and up (See Table 1). Among Hmong individuals, employment disability was reported to be the highest and self-care disability was the lowest. The biggest difference in types of disabilities between Hmong population and the total U.S. population is physical disability. Of those who reported having a disability, 11% Hmong and 25% of the total U.S. population indicated having a physical disability (See Table 2).

Table 1 Hmong Population & Individuals with Disabilities Regions of the United States & Distribution by Age Group U.S. Census 2000

	Ages 5-20	Ages 21-64	Age 65 +
Northeastern States	1,502 (100%)	1,248 (100%)	62 (100%)
W/Disabilities	125 (18%)	362 (29%)	33 (53.2%)
Southern States	4,509 (100%)	3,866 (100%)	136 (100%)
W/Disabilities	263 (5.8%)	1,038 (26.8%)	71 (52%)
Midwestern States	40,806 (100%)	28,343 (100%)	2,086 (100%)
W/Disabilities	3,297 (8.1%)	9,353 (33.0%)	1,096 (52.5%)
Western States	38,768 (100%)	25,732 (100%)	2,101 (100%)
W/Disabilities	3,102 (8.0%)	10,101 (39.3%)	1,397 (66.5%)
United States	85,585 (100%)	59,189 (100%)	4,385 (100%)
W/Disabilities	6,787 (7.9%)	20,854 (35.2%)	2,597 (59.2)

Table 2
Types of Disabilities
Total U.S. Population and Hmong
U.S. Census 2000

	Total U.S. Population	Hmong Population
With one type of disability:	10.4%	8.8%
Sensory disability	12.7%	11.8%
Physical disability	25.7%	11.0%
Mental disability	13.6%	18.2%
Self-care disability	0.8%	2.8%
Go-outside-home disability	12.6%	17.3%
Employment disability	34.7%	38.9%
With two or types of disabilities	9.0%	11.5%
No disability	80.6%	79.7%
5	100.0%	100.0%

Research on Hmong Children with Disabilities

There continues to be an over-representation of ethnic minority students in special education, and many minorities are often inappropriately labeled with a learning disability (Jacobs, 1991). An explanation could be that expectations and teaching styles of public schools in the United States tend to be based on white, middle-class values; therefore, minority students struggle with learning and are quickly diagnosed with a learning disorder (Wathum-Ocama & Rose, 2002). Another explanation could be because of cultural difference awareness. The most common reason for labeling minority children as 'learning disabled' is illiteracy in English. Additionally, psychological tests are often used in public schools to measure intelligence without considering cultural factors (Trueba et al., 1990).

In Trueba, Jacobs, and Kirton's (1990) study of seven Inodochinese elementary students, three of which are Hmong students, the students are 'learning disabled' according to psychological tests and teachers' observations. These students are perceived as 'strange', unable to speak English fluently, and are the lowest achieving of their ethnic group. Findings also showed that some children stopped trying to learn when labeled 'learning disabled,' and they accepted their disabilities as their own personal attribute. As a result, these children find themselves cognitively isolated and lost (Trueba et al.).

American society views a mental disability more negatively than a physical disability (Furnham & Pendred, 1983; Altman, 1981). Tatman (2001) found similar results in his study of Hmong individuals with disabilities and their perceptions of disabilities. Due to the fast-paced society in the United States, the individuals in the study believed that having a high mental functioning ability is more positive than a high

physical ability. However, the individuals indicated that if they were living in Laos or Thailand, a physical disability would be more negative because physical work is needed in the farm (Tatman, 2001). In Velasco's (1996) study, she found that Hmong individuals with disabilities are often not encouraged to work inside or outside the home. They are to relax and let others do the chores. This is especially true for individuals with physical disabilities; however, some people with learning disabilities are expected to do light chores (Velasco, 1996).

Studies have shown that parents' beliefs and perceptions influence a child's access to intervention (Carnie & Orelove, 1988; Hornby, 1994; Patching & Watson, 1993; Yousef & Hadidi, 1992). In the limited researches done on Hmong children with disabilities, results tend to show similarities. Wathum-Ocama and Rose (2002) found that parents accepted their deaf or hard of hearing children unconditionally but had lower academic expectations for them than their children with no hearing loss. The child's hearing loss tended to be associated with learning difficulties and low academic performance. A reason for parents to have these beliefs may be because they have little or no knowledge of the impact of being deaf or hard of hearing. Another reason is that parents assume their child with a hearing loss is supposed to have lower academic performance (Wathum-Ocama & Rose, 2002). Xiong (2005) wrote that although Hmong parents feel sad because they know their child will face disability-related challenges throughout life, they value their children with disabilities and provide love and unconditional care.

In another study, Hmong parents indicated their hopes for their children with disabilities, which included getting a job, being self-sufficient, being able to read and

write, and finishing high school (Vang & Barrera, 2004). Parents also set long-term goals for their children with a disability. The majority of Hmong parents want their children to complete their education (Barrera et al., 2005). Although parents have hopes for their children with disabilities, no goals are set for them. In addition, some parents do not know the strengths and weaknesses of their children. Many Hmong parents depend on the child's teacher to identify the strengths and weaknesses of their child (Wathum-Ocama & Rose, 2002).

Programs with more parental involvement tend to correlate with higher achievement for a child (Comer, 1988). Studies (Wathum-Ocama & Rose, 2002; Vang & Barrera, 2004) found that Hmong parents have a low participation rate in special education processes, such as being involved in the student's IEP, due to the culture and language barrier. In both studies, parents of children with disabilities were found to have a great concern for their children's education and wanted to be actively involved with the school but indicated that they did not know how (Wathum-Ocama & Rose, 2002; Vang & Barrera, 2004).

With limited knowledge about mandated acts such as the *Individual with*Disabilities Act (IDEA) or No Child Left Behind, Hmong parents do not know what rights they and their children with disabilities have for the child to achieve academically (Vang & Barrera, 2004). For parents to be educated about the services available to them and their children, communication in their language is necessary for most parents. A trained interpreter is suggested (Meyers, 1992). Studies found that when there is reliable communication, parents tend to be more involved in their children's education (Meyers, 1992; Wathum-Ocama & Rose, 2002; Vang & Barrera, 2004).

# Chapter III: Methodology

#### Introduction

The purpose of this study is to determine whether Hmong high school children with disabilities and their parent's attitudes and perceptions of disability have an impact on the children's academic achievement. This chapter will explain how the sample was selected, provide a description of the sample, and describe the instruments used. Data collection and data analysis procedures will also be given. The final section of this chapter will discuss limitations of the study.

# Selection and Description of Sample

Three Hmong children with disabilities ages 18 and 19 and four sets of parents from the Eau Claire community participated. Some families that the researcher is associated with were first asked if they would be willing to participate in the study. The other children and parents' names were given to the researcher by the Eau Claire School District after obtaining permission from the families. Phone calls were made to all the families to further explain the study before meeting them. One child chose not to participate while his parents did.

Families with both parents present were first asked to be part of the study for results to be less distorted due to having a single-parent. In addition, families with more than one child were chosen for this study because Hmong parents may have either very high or very low expectations for their only child. All the children with disabilities who participated in the current study are females. The child who chose not to participate is male. The children participants were raised in the U.S. and speak and understand both English and Hmong. All the parents in the study do not have a formal education either in

Laos or the U.S. Although English is limited for all the parents in the study, the fathers have more English skills than the mothers. The participants are residents in Eau Claire, WI, which has a population of about 61,000. The Hmong population is approximately 2,000.

#### Instrumentation

After approval from the Research Institution Review Board, two questionnaires of five and six items were used. The items changed slightly whether the interviewee is the child or parent. The questionnaires were written in both Hmong and English. The Hmong version was used for parents. Each child was asked if she would like the researcher to use the Hmong or English questionnaire. One questionnaire focused on the perspectives and attitudes that the child and parent have on disabilities in general. The child and parents were asked if they agreed or disagreed with the five statements. In the other questionnaire, questions related to academic achievement such as grades, goals, and the education of the student were asked. The reason for keeping the questionnaires short is to be able to keep the child's attention span. Background information on the child's disability was obtained. Demographic information such type of disability, grade, age, and sex of the student were collected on a separate sheet of paper so the questionnaires remained anonymous.

#### Data Collection

Interviews were conducted individually with each child and with both parents present. All of the interviews were done in the family's homes. Interviews with children lasted between 15 and 25 minutes and interviews with both parents were between 30 and 45 minutes. Notes were taken during the interviews and all interviews were tape

recorded, so the researcher could refer back to what the interviewees said.

Confidentiality was assured for all subjects ahead of time. Informed consents from the child and both parents were obtained prior to interviewing and recording. An additional parent signature was also obtained if their child was under the age of 18. Child and parents were given a copy and the researcher kept a copy of all consents. All interviews were done within a one-month time frame.

# Data Analysis

Each item on the questionnaires was analyzed and common themes were noted.

The child's and parents' perspectives and attitudes on disability and education and expectations of the child were used to determine the child's academic achievement. The type and severity level of the disability was used as a factor for the child's expectations and academic achievement.

#### Limitations

A limitation to this study was the small sample size. A larger sample size would have provided more perceptions and attitudes on children with disabilities and their education expectations. With only female children participants, it was also a limitation that there was an imbalance gender representation. Boys and girls are treated differently in the Hmong culture, and it could also mean Hmong boys and girls with disabilities are perceived differently and are given different expectations in regards to academic achievement.

It was also a limitation that the families volunteered to participate. These volunteers could indicate that they have positive perceptions and attitudes of disabilities or that their children have higher academic achievements so they were more willing to

talk about it. Another limitation is the different severity levels of the children's disabilities. All the children participants have different functioning levels, but they were asked the same questions. However, one child participant required some explanations of some of the questions.

It was also a limitation that all families were from the same small community and school district. Lastly, a limitation was that many of the interviews were done in Hmong, which certain words or ideas could not be translated into the exact meaning in English.

Chapter IV: Results

The purpose of this study was to determine whether Hmong children with

disabilities and their parent's attitudes and perceptions of disability have an impact on

their children's academic achievement. This chapter will discuss the results and provide

a summary of the data provided by families interviewed.

Although both parents were present for the interviews, one parent had more to say

than the other in all four families. In all the families there was more than one child. For

this section, each child is represented with a letter. R is a 19-year old female diagnosed

with orthopedic impairment and speech impairment. She is the older of two children. K

is an 18-year old semale with a cognitive disability and is the oldest child of six. She was

not able to answer all the questions, even when it was explained in different terms in both

languages. T is also an 18-year old female with cognitive and learning disorders who

graduated from high school a year ago. She is the oldest of seven children. X is a 12

year old male with a learning disability who chose to not participate; however, his parents

did. He is a middle child.

Child's Perspectives on Disabilities

Statement 1.) Individuals with a physical disability are just as intelligent as non-disabled

ones.

Agree: 2

Disagree: 1

Statement 2.) It would be best for people with disabilities to live and work with those

without disabilities.

Agree: 3

Disagree: 0

Statement 3.) People with disabilities worry most of the time.

Agree: 3

Disagree: 0

Statement 4.) People with disabilities must depend on someone all the time.

Agree: 2

Disagree: 1

Statement 5.) Most people with disabilities feel they are not as good as other people.

Agree: 1

Disagree: 2

Child's Goals and Expectations

# 1.) Academic expectations for self

R indicated expecting to do well academically. She wants to be able to understand all that she learns at school. K, however, was not able to identify any expectations for her. T indicated always wanting to do well in school. She also said that she worked hard at school, so she could satisfy her parents because she knew they wanted her to do well.

# 2.) Plans after high school

Two of the participants, R and K, indicated wanting to attend some type of college after finishing high school. R's plans are consistent with her parents' plans for her, which is furthering her education to eventually become a teacher or teacher's helper someday. Although K's parents want K to work after high school, K is considering technical school. She does not have anything in mind what to study after high school yet. T indicated she wanted to work after high school. She believed she was not able to continue her education after high school.

# 3.) Academic performance

R stated she receives decent grades but would like to do better in school. She would like to be an "A" student. R and K indicated they are happy with their grades. T, however, wishes she would have done better in school. She also indicated that being the oldest child, she wanted to do well so her siblings could see her as a role model.

## 4.) Goals for self

R's goals for herself are also consistent with her parents' for her, although her parents have more goals for her than R does for herself. R wants to be independent, meaning being able to do things on her own and not having her parents worry about her all the time. She hopes to gain their trust by doing what they want her to do and doing a good job of it. She also indicated wanting to help others as another goal. Again, K was not able to identify any goals for herself, even after the question was explained both in Hmong and English. T also indicated wanting to be independent. She wants to be able to drive and not have to depend on others for rides. She also wants to have a job after high school.

# 5.) Academic comparison between self and siblings

R mentioned that she does better in school than her brother because she works hard, but if her brother works as hard as she does, he would do much better than R. Although K is happy with her grades, she indicated she does not do as well academically as her siblings, except one of her siblings with a cognitive disability. T also stated although she worked hard to earn good grades, she did not do as well as her siblings.

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6.) Additional assistance parent and child need at school now or in order to reach the

expected education level

Only R had something to say for this question. She mentioned that she is content

with how much her teachers care and help her to learn, but she would also like a Hmong

teacher or staff to be available for her to talk to when she thinks her other teachers do not

understand a certain issue. Although R knows that her current teachers care greatly about

her, she thinks it would be better to have a Hmong adult available.

Parent's Perspectives on Disability

Statement 1.) Individuals with a physical disability are just as intelligent as non-disabled

ones.

Agree: 7

Disagree: 1

Statement 2.) It would be best for people with disabilities to live and work with those

without disabilities.

Agree: 6

Disagree: 2

Statement 3.) People with disabilities worry most of the time.

Agree: 5

Disagree: 3

Statement 4.) People with disabilities must depend on someone all the time.

Agree: 2

Disagree: 6

Statement 5.) Most people with disabilities do not get marred and do no have children.

Agree: 2

Disagree: 6

Parent's Goals and Expectations for Child

# 1.) Academic expectations for children with disabilities

All parents indicated wanting their children with disabilities to do well in school. Both R and K's parents indicated that their children have obtained more information that they have expected and would like to see their children continue to learn more. To do that, both parents want their children to stay an additional year in high school, for a total of five years, so they can maximize their learning. T's parents indicated they understand that T is "slower" than other children her age, but they want T to do her best. X's parents stated that although they want X to do well in school, he is at a grade three level.

# 2.) Plans after high school

After high school, R's parents want to see R continue with her education by attending a four-year university or a two-year technical school. R's parents indicated that R wants to become a special education teacher and teach Hmong children who have the same disabilities as R does. They also believe R can be successful with a career in massage therapy if she decides to pursue a two-year school instead. X's parents also would like to see X continue with his education after finishing high school, but he might not be able to because of his current low skills. Although they indicated X does not have a subject he is interested in, they would like to see him find an interested area once he gets to high school. K and T's parents, however, want their children to work after finishing high school, so they can support themselves. T is currently looking for employment.

# 3.) Academic performance

Three out of the four parents mentioned that their children are placed in "slower classes." Both R and K's parents indicated their children do well at school and are content with their academic performances. According to her parents, K does well, considering her severe disability. T's parents stated they wanted T to do better in high school, but she earned passing grades to graduate; therefore, they are content. X's parents, however, explained that X receives low grades. He does not get any help with his homework at home because X's parents indicated they do not have the knowledge to help him. X's father stated,

I feel bad that I am unable to help my son with his homework. His weaknesses are reading and math. If there are any after-school help for my son every day, I am willing to let him stay, and I will pick him up once he gets the help he needs. Because after-school tutoring is only available on Mondays, he does not get help with his homework other days. A reason why he is falling behind in school is because his mom and I do not have the knowledge to teach and help him.

# 4.) Goals for children with disabilities

All parents have goals for their children with disabilities. A goal for R is to graduate from high school. R's parents indicated that the day R receives her high school diploma will be one of their happiest days. They are willing to do anything for R to obtain the degree. Another goal R's parents have for R is to be independent, which includes being able to drive and hold a job to financially support herself. K and T's parents indicated that they want their children with disabilities to be independent, which includes caring for and supporting themselves financially. A goal X's parents have for

their child is for him to be able to learn all that is presented to him at school, so he can do well. X's parents also mentioned that it is important that their children respect and give teachers all their attention when teachers are teaching. A parent indicated,

Although we want my daughter to hold a job after high school I am afraid she might not be able to because she does not know how to communicate with others. I just want her to be happy and be able to help herself, but since she does not like to talk with others, I do not know how to help her with that.

# 5.) Academic comparison between child with a disability and siblings

R's parents stated that R works hard at school, and her grades are much better than her sibling's. They also indicated that if R does not have any disabilities, she would excel academically because of her hard work and desire to do well. According to K's parents, K does not perform as well academically as her siblings because she is "mentally slow." T's parents indicated T did not do as well in school as their other children because of T's disability. X's parents also indicated that X does not do as well as his siblings. They made a comparison between their children, indicating that X takes much longer than his siblings to think when he is asked something at home.

# 6.) Additional assistance parent and child need at school now or in order to reach the expected education level

R's parents indicated satisfaction with the service they receive from the school; however, they would have liked to see a Hmong staff at school sooner. Although a bilingual assistant was always present at IEP meetings, there were times when R's parents wanted to meet with school staff, but they could not because of the language barrier. R's parents also mentioned that having a Hmong staff would encourage them to

be more involved with the school, which includes attending parent teacher conferences and other school-related activities. R's parents also indicated a concern about R's safety. There have been times when R did not feel safe using the city's public transportation. R's parents stated that this unsafe feeling has a lot to do with R's disabilities. Her parents stated that the safety concern affects R's concentration greatly. K's parents indicated they would like to be notified right away if K or any of their children are not in school for any reasons. X's parents would like more help with homework offered to his son. They believe if X is not given the help he needs now with certain subjects, he will fall farther behind and may not be able to catch up with his peers.

# Summary

In summary, children with disabilities and their parents have similar attitudes toward individuals with disabilities in general. Out of the five statements on perspectives on disabilities, the majority of the participants agreed or disagreed with four of the same statements. Common goals and expectations for children with disabilities include doing well at school, finishing high school, getting a job, and becoming self-sufficient. Parents, however, have lower expectations for their children with disabilities.

# Chapter V: Discussion, Conclusions, and Recommendations

#### Introduction

The purpose of this study was to determine whether Hmong students with disabilities and their parent's attitudes and perceptions of disability have an impact on the student's academic achievement. This chapter will provide a discussion, conclusion, and recommendations for future study and recommendations for schools and parents to increase Hmong children's academic achievement level.

#### Discussion

Although educators often assume parents of different cultural backgrounds do not want to be involved in their children's education because of cultural and linguistic barriers, research on parents of different cultural backgrounds found that they are indirectly involved with their children's education (Lopez, 2001; Mason-Chagil, 1999; Vang & Barrera, 2004). Hmong parents, including parents who have children with disabilities, are involved by setting academic expectations for their children and encouraging their children to work hard in school, (Mason-Chagil, 1999; Vang & Barrera, 2004), which is an important factor in supporting children's education (Lopez, 2001; McNall, Dunnigan, & Mortimer, 1994). Similarly, findings in this study showed that Hinong parents expect their children with disabilities to receive good grades and want them do get the highest education they can. However, some parents' academic expectations for their children with disabilities are not as high as expectations for their children with no disabilities. Wathum-Ocama and Rose (2002) found similar lower academic expectations in their study of Hmong families with children who are deaf or are hard of hearing.

For students to be able to do well in school, their presence is needed (O'Reilly, 1998). This study found that parents believe it is important to have good school attendance. They want their children to be present at school to be able to learn from teachers since parents are not able to provide academic help at home. This is similar to Mason-Chagil's (1999) and Thao's (2003) findings. Thao (2003) and Vang and Barrera (2004) explained that Hmong parents lack the ability to help their children with homework at home because parents do not have a formal education. Many Hmong parents depend on teachers to do all the teaching at school, but they provide other support as much as they can. With little or no formal education, parents in this study are aware of their inability to help their children with homework, and they indicated that they rely on the teachers a lot.

Hmong parents, however, provide other kinds of support for their children such as getting them to school on time, providing physical needs, and meeting with teachers when necessary. Lopez (2001) suggested in his research that parent involvement does not always have to follow the traditional school-related models, and children are able to learn the value of education if parents model it well in other ways.

This study supports other research (Mason-Chagil, 1999; Vang & Barrera, 2004; Yang, 2003) that Hmong value education greatly. Although Hmong and other Southeast Asian minority groups are often given lower academic standards by school personnel and are often not expected to attend college (Goldstein, 1985; Um, 2003), Hmong parents highly encourage their children to purser higher education (Lee, 2001, Vang, 2004), including parents who have children with disabilities. Two of the families in this study

believe post-secondary education is as important for their children with disabilities as much as it is for their other children.

Often times, Hmong children may not be ready for college and struggled greatly (Um, 2003). With this concern, parents from this study believe having their children with disabilities stay in high school an additional year, so they can be a little more prepared for work or college. Hmong parents look up to their children's teachers and believed their children are able to gain useful skills with an additional year of high school. Many are satisfied with the relationships their children with disabilities have with some teachers.

Similar to Vang and Barrera's (2004) findings, this study also found that Hmong parents have goals and hopes for their children with disabilities to be self-sufficient.

They also want their children to learn to read and write and finish high school. The majority parents in this study want their children with disabilities to be able to "live independently" and "be successful," regardless if the child is a male or female.

Although traditional Hmong sons and daughters are given specific gender roles where Hmong sons are encouraged to become the head of the household and daughters are expected to marry at an early age, this study and other research (Vang, 2004; Lee, 2001) on Hmong in higher education showed that Hmong females are now given education opportunities as well. Lee (2001) wrote that many Hmong parents support their daughters and encourage them to attend college, but parents expect them to stay close to home. Vang (2004) wrote that some Hmong females, however, challenge the traditional Hmong female role by attending college and not marrying in their teens.

Lee (2001) reported that Hmong female students are more likely to participate in after-school programs and work hard to be academically successful. She also found that

Hmong female students have the highest education aspirations and the highest academic levels of achievement (Lee, 2001). O'Reilly's (1998) study found that truancy, lack of motivation, and poor grades tend to be found more with Hmong males than with Hmong females. Some parents in this study believed if their daughters do not have a disability, they would be able to continue to post-secondary school just like any of their children. In one family, the parents believe their daughter will be able to go to college because of her hard work and motivation for an education and career. Hmong parents are beginning to realize that their daughters are as capable as their sons, if not, more because of the motivation presence in their daughters.

This study found that most Hmong parents and their children with disabilities have a positive attitude towards disabilities. The majority parents believe individuals with disabilities can be as intelligent as individuals with no disabilities, and that they are able to have their own families. Many Hmong individuals with mild disabilities do have their own families, but it is harder for those with severe disabilities to find a spouse (Chou Her, Personal Communication, November 14, 2006).

Many parents and children agreed that people with disabilities worry a lot. One parent justified his answer by adding that those individuals should worry more because they are less capable of at least one thing compared to individuals with no disabilities. Although the majority parents believe individuals with disabilities must depend on someone all the time, their children do not believe the same. Parents believe children must depend on their teachers up to high-school, but they will depend on their parents afterward. A reason could be because Hmong parents want to help their children as much as possible and may not think their children with disabilities are capable on their own,

(Wathum-Ocama & Rose (2002). Parents in this study felt their children with disabilities are incapable of some tasks.

Most parents in the study indicated wanting their children with disabilities to interact with other children and adults, so they can build social skills. Hmong parents believe it is important for their children to have good social skills, so their children can get and maintain jobs.

As past research (Thao, 2003; Yang, 2003) stated, a barrier to Hmong children's learning is the lack of connections with available Hmong staff. This study also found that Hmong parents and their children with disabilities would like to see more Hmong staff, so children can connect with adults with similar backgrounds. In O'Reilly's (1998) study, he found that although Hmong parents indicated their children need more Hmong role models in the schools Hmong children were able to identify adults at their school that they could talk to. His study was based on Hmong males and the current study involves female children, which could be an explanation of the need for role models of the similar cultural background.

### Conclusions

In conclusion, like parents who do not have children with disabilities, the parents who have children with disabilities have high academic expectations for their children. Even considering the children's disabilities, some Hmong parents want to see their children attend post-secondary school and eventually have a career, but others believe their children are capable of holding a job right after high school. Hmong parents value education and want to see their children with disabilities obtain the most education they can, but communication continues to be an issue because of the lack of common

language. Hmong parent's lack of education also tends to be a barrier to their children's low academic achievement.

#### Recommendations

More participants in various geographic locations are recommended for future research. Only one community and school district was represented in this study. It is also recommended to have a better gender representation. Although Hmong females are given more opportunities now, some traditional parents are less likely to encourage their daughters to continue to post-secondary school.

From this study and past research, it is obvious that children of different cultural and linguistic backgrounds need adults of the same background to feel connected at school. As the minority population is increasing in the United States, more minority professionals are needed in the schools to provide the support children need in order to succeed. More Hmong children are expected by their parents to further their education, regardless of their abilities, but many lack the skills to do so while many others are assumed by their teachers they are not capable of succeeding in college.

Hmong parents believe having Hmong staff at school could make a difference in their children's education. Additional academic programs and courses could be implemented for Hmong students to increase academic and social skills early on. Hmong students whose parents lack the educational background could be assigned mentors and tutors to increase student's achievement level. Additionally, workshops and trainings for Hmong parents to increase parental involvement may be necessary, especially parents who have children with disabilities who are already struggling with the cultural difference, but they also have to learn to be involved with special education programs.

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# Appendix A

Participant's Consent Form in English (Child)

# Consent to Participate in UW-Stout Approved Research (Child)

**Title:** Hmong Parents' Attitudes, Perceptions of Disability, and Expectations of Children with Disabilities: A Qualitative Study of its Impact on Academic Performance

Investigator:

Mao Xiong 2212 Bartlett Ave. Altoona, WI 54720 715-864-9283

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Research Sponsor:

Dr. Amy Schlieve, Department of Education

426 McCalmount Hall Menomonie, WI 54751

715-232-1332

schlievea@uwstout.edu

## Description:

Hmong families recognize the need for education. While many Hmong students continue onto post-secondary school, very few Hmong students with disabilities extend their education beyond high school. Most students start preparing for their future career during their high school years but are students with a disability going through the same process? It is crucial to determine what is expected of a student with a disability living in the United States and what he/she can actually achieve academically, based on the student and parent's perspective and attitude of disabilities. The purpose of this qualitative study is to:

- 1.) Survey Hmong high school students with disabilities on their attitudes and perceptions of disability and its impact on their academic performance as measured by their grades, goals, accomplishments, and education level
- 2.) Survey their parents to determine their attitudes and perceptions of disability and its impact on the student's academic performance as measured by the student's grades, goals, accomplishments, and education level
- 3.) Determine if parents perceive their child with a disability differently or have different academic expectations for them and determine how these standards affect the child's success.

#### Risks and Benefits:

A risk for participants include possibly sharing information that you may have never been asked to share before and feeling uncomfortable about it or being sensitive with this topic but do not indicate discomfort or sensitivity. Involvement in the study may be due to respect instead of a desire to be participants. Although there are risks, there are also some benefits for your participation. By participating in this study you will contribute to the few research studies focusing on Hmong children with disabilities. Perhaps the results of this study will lead schools and other services to provide additional resources and assistance to you or others in the same situation as you are. Results of this study will be available to you so that you and your parents will have the opportunity to compare your parents' and your attitudes toward disabilities, accomplishments, goals, and expectations to other parents and children with disabilities. Whether you choose to participate in the study or not, I will provide you and your parents with some community resources for individuals with disabilities.

# **Special Populations:**

By signing this form, you are giving me permission to interview you and your parents. If you are not able to provide a signature, your parents would agree to provide a signature to replace yours.

#### Time Commitment:

For this research project, I am asking to spend about 45 minutes interviewing you.

### Confidentiality:

Your participation will remain anonymous, and therefore, your answers can not be linked to your identity. However, your name will be needed for this consent form, which I will separate from your answers. No one else, other than myself, will hear your recorded answers, although I may have to share your answers with my research advisor for suggestions so I can have an effective study.

# Right to Withdraw:

Your participation is voluntary and you have the right to decline now, or at any time during the study without any penalty. You may also decline to respond to any questions that you feel uncomfortable answering.

# IRB Approval:

This study has been reviewed and approved by The University of Wisconsin-Stout's Institutional Review Board (IRB). The IRB has determined that this study meets the ethical obligations required by federal law and University policies. If you have questions or concerns regarding this study please contact the Investigator or Advisor. If you have any questions, concerns, or reports regarding your rights as a research subject, please contact the IRB Administrator.

#### Investigator:

Mao Xiong 2212 Bartlett Avenue Altoona, WI 54720 715-864-9283 xiongm@uwstout.edu

#### IRB Administrator:

Sue Foxwell, Director, Research Services 152 Vocational Rehabilitation Bldg. UW-Stout Menomonie, WI 54751 715-232-2477 foxwells@uwstout.edu

#### Advisor:

Dr. Amy Schlieve, School of Education 426 McCalmount Hall UW-Stout Menomonie, WI 54751 715-232-1332 schievea@uwstout.edu

#### Statement of Consent:

By signing this consent form you agree to participate in the project entitled, "Hmong Parents' Attitudes, Perceptions of Disability, and Expectations of Children with Disabilities: A Qualitative Study of its Impact on Academic Performance"

Signature	Date	
Cignoture of parent or avandian.	Data	
Signature of parent or guardian:	Date	
(if minors are involved)		

# Appendix B

Participant's Consent Form in English (Parent)

# Consent to Participate in UW-Stout Approved Research (Parent)

**Title:** Hmong Parents' Attitudes, Perceptions of Disability, and Expectations of Children with Disabilities: A Qualitative Study of its Impact on Academic Performance

Investigator:

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# Description:

Hmong families recognize the need for education. While many Hmong students continue onto post-secondary school very few Hmong students with disabilities extend their education beyond high school. Most students start preparing for their future career during their high school years but are students with a disability going through the same process? It is crucial to determine what is expected of a student with a disability living in the United States and what he/she can actually achieve academically, based on the student and parent's perspective and attitude of disabilities. The purpose of this qualitative study is to:

- 1.) Survey Hmong high school students with disabilities on their attitudes and perceptions of disability and its impact on their academic performance as measured by their grades, goals, accomplishments, and education level;
- 2.) Survey their parents to determine their attitudes and perceptions of disability and its impact on the student's academic performance as measured by the student's grades, goals, accomplishments, and education level;
- 3.) Determine if parents perceive their child with a disability differently or have different academic expectations for them and determine how these standards affect the child's success.

#### Risks and Benefits:

A risk for participants include possibly sharing information that you may have never been asked to share before and feeling uncomfortable about it or being sensitive with this topic but do not indicate uncomfort or sensitivity. Involvement in the study may be due to respect instead of a desire to be participants. Although there are risks, there are also some benefits for your participation. By participating in this study you and your child with a disability will contribute to the few research studies focusing on Hmong children with disabilities. Perhaps the results of this study will lead schools and other services to provide additional resources and assistance to your families or others in the same situation as you are. Results of this study will be available to you so that you and your child will have the opportunity to compare your attitudes toward disabilities, accomplishments, goals, and expectations of your child to other children with disabilities. Whether you choose to participate in the study or not, I will provide you and your child with some community resources for individuals with disabilities.

#### **Special Populations:**

By signing this form, you are giving me permission to interview you and your son/daughter (if under 18) who has been diagnosed with a disability. If your child is under 18, you would also sign another form to allow him/her to participate in this study.

However, if your son/daughter is not able to provide a signature, you would agree to provide yours again in replacement for your child's.

#### Time Commitment:

For this research project, I am asking to spend about 45 minutes interviewing you.

#### Confidentiality:

Your participation will remain anonymous, and therefore, your answers can not be linked to your identity. In order to remain anonymous, it is crucial not to mention your name at any time during the recorded interview. However, your name will be needed for this consent form, which I will separate from your answers. No one else, other than myself, will hear your recorded answers, although I may have to share your answers with my research advisor for suggestions so I can have an effective study.

### Right to Withdraw:

Your participation is voluntary and you have the right to decline now, or at any time during the study without any penalty. You may also decline to respond to any questions that you feel uncomfortable answering.

#### IRB Approval:

This study has been reviewed and approved by The University of Wisconsin-Stout's Institutional Review Board (IRB). The IRB has determined that this study meets the ethical obligations required by federal law and University policies. If you have questions or concerns regarding this study please contact the Investigator or Advisor. If you have any questions, concerns, or reports regarding your rights as a research subject, please contact the IRB Administrator.

#### Investigator:

Mao Xiong 2212 Bartlett Avenue Altoona, WI 54720 715-864-9283 xiongm@uwstout.edu

#### IRB Administrator:

Sue Foxwell, Director, Research Services 152 Vocational Rehabilitation Bldg. UW-Stout Menomonie, WI 54751 715-232-2477 foxwells@uwstout.edu

#### Advisor:

Dr. Amy Schlieve, School of Education 426 McCalmount Hall UW-Stout Menomonie, WI 54751 715-232-1332 schlievea@uwstout.edu

#### Statement of Consent:

By signing this consent form you agree to participate in the project entitled, "Hmong Parents' Attitudes, Perceptions of Disability, and Expectations of Children with Disabilities: A Qualitative Study of its Impact on Academic Performance".

	<del></del>	
Signature	***************************************	Date
0.3.10.0.0.		

Appendix C

Participant's Consent Form in Hmong (Child)

# Txaus siab nrog UW-Stout tshawb nrhiav (Tus Me Nyuam)

Lub npe: Niam txiv Hmoob txoj kev xav txog me nyuam uas tsis taus, qhov lawv xav kom lawm tus me nyuam ua tau zoo npaum cas: Muab cov kev xav no los piv rau txoj kev kawm ntawv

Tus tshawb nrhiav:

Mao Xiong 2212 Bartlett Ave. Altoona, WI 54720 715-864-9283

xiongm@uwstout.edu

Tus saib xyuas:

Dr. Amy Schlieve, Department of Education 426 McCalmount Hall Menomonie, WI 54751 715-232-1332

schlievea@uwstout.edu

#### Qhia txog:

Niaj hnub niam no Hmoob pom tias kev kawm ntawv tseem ceeb npaum cas. Muaj coob tus tub ntxhais hluas Hmoob mus kawm ntawv qhib siab tab sis cov tub ntxhais uas tsis taus muaj tsawg tus mus kawm ntawv tauj. Peb yuav tsum tshawb xyuas tias cov me nyuam uas tsis taus nyob teb chaws Meskas no yuam tsum mus tau deb npaum li cas thiab seb cov me nyuam no ho muaj peev xwm kawm ntawv zoo npaum li cas raws li niam txiv txoi kev xav. Qhov yuav tshawb nrhiav no yuav xav:

- 1.) Nrhiav seb cov me nyuam hmoob kawm ntawv high school ua muaj kev tsis taus ho xav li cas txog lawv qhov kev tsis taus thiab seb txoj kev xav no ho ua rau lawv kawm ntawv zoo npaum li cas thiab txog qib twg, lawv yuav xav ua dabtsi yav tom ntej, thiab lawv ua tau yam dabtsi uas lawv tau qhuas
- 2.) Nrhiav seb cov niam txiv Hmoob uas muaj me nyuam kawm ntawv high school uas muaj kev tsis taus ho xav li cas txog lawv txoj kev tsis taus thiab seb txoj kev xav no ho ua rau lawv kawm ntawv zoo npaum li cas thiab txog qib twg, lawv yuav xav ua dabtsi yav tom ntej, thiab lawv ua tau yam dabtsi uas niam txiv tau qhuas
- 3.) Nhriav seb niam txiv Hmoob puas saib lawv tus me nyuam uas tsis taus lub peev xwm txawv ntawm lawv tus me nyuam uas taus thiab seb cov kev xav ntawm cov me nyuam txawv deb npaum li cas

#### Txoj kev pab:

Qhov koj pab kuv no koj yuav tau qhia tej yam uas tej zaum tsis tau muaj neeg nug koj dua li thiab tej zaum koj yuav tsis xav teb. Koj kev pab kuv no yuav qhia tau rau cov neeg yuav pab koj thiab koj niam thiab txiv yav tom ntej los yog tau pab nej dua lawm xws li cov neeg tom tsev kawm ntawv hais tias lawv yuav tau ua li cas ntxiv thiaj yuav pab tau cov me nyuam uas tsis tau kawm ntawv kom tau zoo. Yog koj xav paub tias lwm tus niam txiv ho xav li cas txog lawv tus me nyuam thiab los kuv mam li qhia koj thaum kuv nrog lawv tham tag lawm. Koj yog tus yuav txiav txim seb koj puas pab kuv tshawb nrhiav txog cov me nyuam uas tsis taus li koj. Tsis tas li ntawd, kuv paub tias muaj chaw hauv zej zog no uas pab tau koj kuv mam li qhia rau koj thiab koj niam thiab txiv.

## Cov neeq:

Yog koj sau npe rau daim ntawv no ces txhais tau hais tias koj cia kuv nrog koj thiab koj niam thiab txiv tham txog koj qhov kev tsis taus. Yog koj tsis tau muaj 18 xyoo ces koj niam los koj txiv yuav tau sau nws lub npe rau ib daim ntawv ntxiv tias koj cia

kuv nrog koj tham. Yog koj tsis txawj sau koj lub npe ces koj niam los koj txiv tau sau rau koj.

#### Sij hawm:

Kuv xav siv li 45 nas this los nrog koj tham.

### Tsis qhia lwm tus:

Thaum kuv muab cov lus los sau kuv daim ntawv kuv yuav tsis sau koj los koj niam thiab txiv lub npe kom txhob muaj neeg paus tias nej tau nrog nej tham txog koj. Kuv ib leeg thiaj hnov cov lus wb kaw no xwb.

## Koj txoj cai:

Yog kuv nug tej yam koj tsis xav teb koj tsis teb los tsis ua li cas. Yog koj tsis xav nrog kuv tham los tsis ua li cas thiab.

#### IRB tso cai:

Ua ntej kuv nug cov lus no kuv tau muab mus rau cov neeg saib xyuas cov kev tshawb nrhiav no (IRB) saib ua ntej. Lawv tso cai rau kuv nug cov lus no kuv thiaj nug koj tau. Yog koj muaj lus nug dabtsi txog qhov kev tshawb nrhiav no koj hu mus nrog IRB tham los tau.

#### Tus tshawb nrhiav:

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## Tus thawj saib xyuas:

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#### Tus saib xyuas:

Dr. Amy Schlieve, School of Education 426 McCalmount Hall UW-Stout Menomonie, WI 54751 715-232-1332 schlievea@uwstout.edu

#### Tso cai:

Yog koj sau koj lub npe rau nram qab no ces txhais tau tias koj txaus siab pab kuv sau daim ntawv hu ua "Niam txiv Hmoob txoj kev xav txog me nyuam uas tsis taus, qhov lawv xav kom lawv tus me nyuam ua tau zoo npaum cas: Muab cov kev xav no los piv rau txoj kev kawm ntawv."

Npe	Hnub	
-		
Niam txiv sau npe	Hnub	

# Appendix D

Participant's Consent Form in Hmong (Parent)

# Txaus siab nrog UW-Stout tshawb nrhiav (Niam Txiv)

Lub npe: Niam txiv Hmoob txoj kev xav txog me nyuam uas tsis taus, qhov lawv xav kom lawv tus me nyuam ua tau zoo npaum cas: Muab cov kev xav no los piv rau txoj kev kawm ntawv

Tus tshawb nrhiav:

Dr. Amy Schlieve, Department of Education

Mao Xiong 2212 Bartlett Ave. Altoona, WI 54720

426 McCalmount Hall Menomonie, WI 54751

Tus saib xvuas:

715-864-9283 715-232-1332

xiongm@uwstout.edu schlievea@uwstout.edu

#### Qhia txog:

Niaj hnub niam no Hmoob pom tias kev kawm ntawv tseem ceeb npaum li cas. Muaj coob tus tub ntxhais hluas Hmoob mus kawm ntawv qib siab tab sis cov tub ntxhais uas tsis taus ib qho muaj tsawg tus mus kawm ntawv tauj. Peb yuav tsum tshawb xyuas tias cov me nyuam tsis taus nyob teb chaws Meskas no mus tau deb npaum li cas thiab seb cov me nyuam no ho muaj peev xwm kawm ntawv zoo npaum li cas raws li lawv niam lawv txiv txoj kev xav. Qhov yuav tshawb nrhiav no vuav xav:

- 1.) Nrhiav seb cov me nyuam Hmoob kawm ntawv high school uas muaj kev tsis taus xav li cas txog lawv txoj kev tsis taus thiab seb txoj kev xav no ho ua rau lawv kawm ntawv zoo npaum li cas thiab txog qib twg, lawv yuav xav ua dabtsi yav tom ntej, thiab lawv ua tau yam dabtsi uas nws tau qhuas
- 2.) Nrhiav seb cov niam txiv Hmoob muaj me nyuam uas tsis taus kawm ntawv high school xav li cas txog lawv txoj kev tsis taus thiab seb txoj kev xav no ho ua rau lawv kawm ntawv zoo npaum li cas thiab txog qib twg, lawv yuav xav ua dabtsi yav tom ntej, thiab lawv ua tau yam dabtsi uas niam txiv tau qhuas
- 3.) Nhriav seb niam txiv Hmoob puas saib lawv tus me nyuam uas tsis taus lub peev xwm txawv ntawm lawv tus me nyuam uas taus thiab seb cov kev xav ntawm cov me nyuam txawv deb npaum li cas

# Koj txoj kev pab:

Qhov koj pab kuv no tej zaum koj yuav tau qhia tej yam uas tsis tau muaj neeg nug koj dua li thiab tej zaum koj yuav tsis xav teb. Koj txoj kev pab kuv no yuav qhia tau rau cov neeg yuav pab koj thiab koj tus me nyuam yav tom ntej los yog tau pab nej dua lawm xws li cov neeg tom tsev kawm ntawv tias lawv yuav tau ua li cas ntxiv thiaj yuav pab tau cov me nyuam tsis taus kawm ntawv kom tau zoo tshaj yav tag los. Yog koj xav paub tias lwm tus niam txiv ho xav li cas txog lawv tus me nyuam thiab los kuv mam li qhia koj thaum kuv nrog lawv tham tag lawm. Koj yog tus yuav txiav txim seb koj puas pab kuv tshawb nrhiav txog cov me nyuam uas tsis taus. Tsis tas li ntawd, kuv paub tias muaj chaw hauv zej zog no uas pab tau koj thiab koj tus me nyuam kuv mam li qhia rau koj thiab koj tus me nyuam.

### Cov neeg:

Yog koj sau npe rau daim ntawv no ces txhais tau hais tias koj cia kuv nrog koj tham txog koj tus me nyuam uas muaj ib qho kev tsis taus. Yog koj tus me nyuam tsis tau muaj 18 xyoo ces koj yuav tau sau koj lub npe rau ib daim ntawv ntxiv tias koj cia

kuv nrog koj tus me nyuam tham thiab. Yog koj tus me nyuam tsis txawj sau nws lub npe ces koi mam sau rau nws.

## Sij hawm:

Kuv xav siv li 45 nas this los nrog koj tham.

### Tsis qhia lwm tus:

Thaum kuv muab cov lus los sau kuv daim ntawv kuv yuav tsis sau koj los koj tus me nyuam lub npe kom txhob muaj neeg paub tias koj tau nrog kuv tham txog koj tus me nyuam. Kuv ib leeg thiaj li yog tus hnov cov lus wb kaw no xwb.

## Koj txoj cai:

Yog kuv nug tej yam koj tsis xav teb koj tsis teb los tsis ua li cas. Yog koj tsis xav nrog kuv tham los tsis ua li cas thiab.

#### IRB tso cai:

Ua ntej kuv nug cov lus no kuv tau muab mus rau cov neeg saib xyuas cov kev tshawb nrhiav no (IRB) saib ua ntej. Lawv tso cai rau kuv nug cov lus no kuv thiaj nug koj tau. Yog koj muaj lus nug dabtsi txog ghov kev tshawb nrhiav no koj hu mus nrog IRB tham los tau.

#### Tus tshawb nrhiav:

Mao Xiong (Mos Xvooi) 2212 Bartlett Avenue Altoona, WI 54720 715-864-9283 xiongm@uwstout.edu

# Tus thaw saib xyuas:

Sue Foxwell, Director, Research Services 152 Vocational Rehabilitation Bldg. UW-Stout Menomonie, WI 54751 715-232-2477

foxwells@uwstout.edu

#### Tus saib xyuas:

Dr. Amy Schlieve, School of Education 426 McCalmount Hall UW-Stout Menomonie, WI 54751 715-232-1332 schlievea@uwstout.edu

# Tso cai:

Yog koj sau koj lub npe rau hauv qab no ces txhais tau tias koj txaus siab pab kuv sau daim ntawy hu ua "Niam txiv Hmoob txoj kev xav txog me nyuam uas tsis taus, ghov lawy xay kom lawy tus me nyuam ua tau zoo noaum cas; Muab coy key xay no los piv rau txoj kev kawm ntawv."

Npe	Hnub	

Appendix E

Questionnaire 1

This research has been approved by the UW-Stout IRB as required by the Code of Federal Regulations Title 45 Part 46.

Hmong Parents' Attitudes, Perceptions of Disability, and Expectations of Children with Disabilities: A Qualitative Study of its Impact on Academic Performance Questionnaire

Cov lus nug txog Niam Txiv Hmoob Txoj Kev Xav Txog Me Nyuam Uas Tsis Taus, Qhov Lawv Xav Kom Lawv Tus Me Nyuam Ua Tau Zoo Npaum Cas: Muab Cov Kev Xav No Los Piv Rau Txoj Kev Kawm Ntawv

Do you agree or disagree with the following statements: Koj ntseeg los tsis ntseeg cov lus nram qab no?

- Individuals with a physical disability are just as intelligent as non-disabled ones.
   Cov neeg tes taws los yog lub cev tsis tau txawj ntshe thiab muaj tswv yim npaum li cov neeg uas tsis taus.
- 2. It would be best for people with disabilities to live and work with those without disabilities.

Qhov zoo tshaj cia cov neeg uas tsis taus nyob thiab ua hauj lwm ua ke nrog lwm tus

3. People with disabilities worry most of the time.

Cov neeg uas tsis taus txhawj tas li.

4. People with disabilities must depend on someone all the time.

Cov neeg uas tsis taus yuav tsum tos lwm tus pab txhua lub sij hawm.

5 Most people with disabilities do not get marred and do not have children.

Muaj coob tus neeg tsis taus tsis yuav txiv/poj niam thiab tsis muaj me nyuam.

Slight changes were made to statements from the Attitude Toward Disabled Persons Scale - Form O by H. E. Yuker, J. R. Block, & W. J. Campbell (1960).

# Appendix F

Questionnaire 2 (Child)

# Questionnaire 2 (Child)

- 1. What are your academic expectations?
  Koj xav kom koj kawm ntawv tau zoo npaum li cas?
- 2. Would you like to attend school after high school? If so, what schooling would you like to complete?
  - Koj puas xav kom koj kawm ntawv tauj high school ntxiv? Mus txog qhib twg?
- 3. How well do you do in school? Would you mind telling me your grades?

  Koj kawm ntawv tau zoo li cas? Koj puas kam qhia koj cov qhab rau kuv?
- 4. What are your goals for yourself?

  Koj ghov kev cia siab tom ntem no (lub hom phiaj) muaj li cas?
- 5. Academically, how do you compare yourself to your siblings?

  Yog koj muab koj piv rau nej cov me nyuam hauv tsev no koj kawm ntawv tau
  zoo li cas?
- 1. What additional assistance do you and your parents need in order to reach that education level or what could be done to help you with your education?
  Koj thiab koj niam/txiv xav tau kev pab dabtsi ntxiv los tom tsev kawm ntawv es koj thiaj kawm tau zoo npaum li koj siab xav los sis dab tsi thiaj ua tau rau koj mus tau deb tshaj no?

# Appendix G

Questionnaire 2 (Parent)

# Questionnaire 2 (Parent)

- 2. What are your academic expectations for your son/daughter?

  Koj xav kom koj tus tub/ntxhais kawm ntawv tau zoo npaum li cas?
- 3. Would you like your child to attend school after high school? If so, what schooling would you like him/her to complete?
  Koj puas xav kom koj tus me nyuam kawm ntawv tauj high school ntxiv? Mus txog qhib twg?
- 4. How well does your son/daughter do in school?

  Koj tus me nyuam kawm ntawv tau zoo li cas?
- 5. What are your goals for your son/daughter?

  Koj qhov kev cia siab tom ntem no (lub hom phiaj) muaj li cas rau koj tus tub/ntxhais?
- 6. Academically, how do you compare your son/daughter with a disability to your other children?
  Yog koj muab koj tus me nyuam uas tsis tau piv rau lwm tus hauv tsev no tus me nyuam tsis taus kawm ntawv tau zoo li cas?
- 7. What additional assistance do you and your son/daughter need in order to reach that education level or what could be done to help with his/her education?

  Koj thiab koj tus me nyuam xav tau kev pab dabtsi ntxiv los tom tsev kawm ntawv los koj tus me nyuam thiaj kawm tau zoo npaum li koj siab xav los sis dab tsi thiaj ua tau rau koj tus me nyuam mus tau deb tshaj no?