The aim of this article is to discuss the everyday life of disabled persons in Slovenia and differences with the rest of society. The private everyday lives of the disabled persons is a topic that often stays in the background and is ignored in political attempts to gain equality for the disabled compared with the rest of the population. In this article, we have focused on two domains of private life – family life and leisure time activities. We examined how the three disability related factors, identified by Lutz and Bowers (2005) influence these two domains.

The basic conclusion of the article is that the gender and age of the disabled individual, the time when disability occurs and type of disability, strongly influence opportunities and characteristics of analysed micro-aspects of the everyday life of the disabled individual. The micro-sphere of disabled persons is structured by their disability and it would seem that the focus on “impairment” is still the main factor of how one is able to spend one’s leisure time or for the possibilities of starting a family.

Keywords: DISABLED PERSONS, INEQUALITIES, EVERYDAY LIFE, FAMILY LIFE, LEISURE TIME

1. INTRODUCTION

The aim of the article is to reveal some aspects of the everyday life of disabled persons in Slovenia, especially those that relate to their family life and leisure time activities. When speaking of the disabled, national social policy mainly deals only with particular macro issues of the daily lives of disabled people, e.g. employment, education, housing and health issues. Our interest is put on micro-sphere of everyday life of the disabled, with emphasis on family life, and leisure time activities. We especially take age and gender as possible factors of everyday life. For the purpose of this article, we define micro aspects of everyday life of disabled people as aspects of mainly private, intimate life, which is in Slovene political and national efforts of improving opportunities of people with disabilities under-represented theme. This article is based on the data from the research project “Consequences of Discrimination on Social and Political Inclusion of Youth in Slovenia” (Švab et al., 2008).¹

¹ Research project “Consequences of Discrimination on Social and Political Inclusion of Youth In Slovenia”, funded by Slovenian Research Agency, Governmental Office for Equal Opportunities and Gover-
When talking about disability, one usually comes across several different terminological classifications. We follow that of Jenny Morris (2001:3) who uses the term “disabled people” to describe “what is done to us. This language politicizes our experience and it takes the focus away from our impairments being the problem and puts the responsibility onto the society in which we live.” International classifications of the World Health Organisation distinguish between impairment, disability and handicap. Impairment means any loss or abnormality of psychological, physiological or anatomical structure or function. Disability is any restriction or lack of ability to perform an activity in the manner or within the range considered normal for a human being. Handicap is a disadvantage for a given individual, resulting from an impairment or disability, which limits or prevents the fulfilment of a role that is normal for that individual (Iterah and Kumar, 2007:83). Slovene experts are not in agreement when using terminology dealing with disability, so we use their original terms when quoting their statements.

Some of the current main topics Slovene researchers deal with in disability studies are the following:

– Handicap as a cultural dimension of the life of the disabled (Rutar, 1993; Zaviršek, 2000);
– Deinstitutionalization of care for the disabled (Napret, 1996; Flaker et al., 2008a);
– Gender and handicap (Zaviršek, 1998, 2003; Urek, 2006);
– Direct financing of disabled (Flaker et al., 2005, 2008b; Videmšek et al., 2006);
– Independent living and personal assistance of disabled (Pečarič, 2005);
– Problems of violence against the disabled (Urek, 2003).

Micro-aspects of everyday life of disabled people, such as family life, free time activities are usually not analysed, at least not on the level of the whole population of the disabled. We use the concept of disability-related factors within the context of everyday lives of persons with disabilities of Lutz and Bowers (2005). They analysed disability factors that are seen as the most important according to the disabled persons themselves. Three groups of factors were identified. First are the fundamental effects of the physically disabling conditions that encompass primary and secondary effects. Primary effects are seen as direct consequence of impairment, while secondary effects are indirect and can arise from the condition and include consequences such as a more vulnerable state of health, treatment effects, accelerated aging, more frequent hospitalizations, etc. The second group of factors deals with others’ perception of disability and its influence. The third group encompasses the need for resources and the use of resources. Resources, their access, usability, reliability and appropriateness to one’s
needs are critical factors in how one can integrate the experience of having impairment into his/her life. (Lutz and Bowers, 2005:1043–1049).

2. METHODOLOGY

In the study of everyday life of the disabled within the project “Consequences of Discrimination in Social and Political Inclusion of Youth in Slovenia” (Švab et al., 2008) qualitative and quantitative methods were combined, our aim being to provide a more holistic picture of the impediments faced by the disabled on a daily basis.

Semi-structured interviews with the experts from the field of disability as qualitative part of the survey were conducted from December 2007 to January 2008. We interviewed two representatives of governmental institutions, nine representatives of non-governmental organisations and one university professor, dealing with the field of disabilities.

With the aim of complementing expert opinions on discrimination and impediments to the everyday life of the disabled in Slovenia with opinions of disabled people themselves, we carried out an internet survey among disabled. We invited the disabled to participate in a poll through non-governmental organisations, which endeavour to improve position and possibilities of disabled people. The response rate was quite low in 14 days, from 5. 5. 2008 to 19. 5. 2008, of the 318 surveys received, there were 164 respondents having the status of disabled (95 women, 65 men and 4 individuals who gave no information about their sex). It is possible that such high percent of non-disabled respondents is consistent with interest of experts and/or relatives of disabled people to give their opinion about discrimination and inequality of disabled people in their everyday life. Besides, an internet poll has some limitations when speaking of accessibility to people with different disabilities, therefore the sample is not representative.

Nevertheless, the aim of the article is to draw attention to possible differences between the disabled and the general population and, where it is possible, to differences that occur among the disabled (e.g. between various groups of disabled). These differences among groups of disabled arise from their unequal legal position, socioeconomic position and state provisions entitlement.

2 Governmental representatives: Luj Šprohar, PhD (Ministry of Health), Barbara Kobal, MSc (Social Protection Institute of the Republic of Slovenia); representatives of nongovernmental organisations: Janez Jug, MSc (FIHO – Foundation for Financing Organisations of Disabled and Humanitarian Organisations), Boris Šuštaršič (Association of the Dystrophic of Slovenia), Katja Vadnal, PhD (Sožitje – Union of Associations for Help of People with Mental Problems of Slovenia), Vinko Skalar, PhD (ŠENT – Slovene Union for Mental Health), Tea Černigoj (Association of Disabled Students of Slovenia), Jože Primožič (Sonček – Union of Associations for Cerebral Palsy Slovenia), Tatjana Gričar and Marinka Hribernik (Humana – Union of Relatives caring for Mental Health Kranj), Drago Novak (Union of Disabled Workers of Slovenia); researcher Darja Zaviršek, PhD (Faculty of Social Work, University of Ljubljana).

3 Special groups of disabled that would absolutely show some particularities according to the rest of the disabled are retired disabled and disabled living in the institutions. Due to the limitations of the research, we cannot put out the categories that have even less opportunities, when talking about family life and leisure time activities.
3. FAMILY FORMATION AND FAMILY LIFE OF DISABLED PEOPLE

The median age of young people leaving home in Slovenia varies from 27 years for women to almost 30 for men (European Commission, 2008:26). Due to a longer dependency of disabled young adults from their parents either in sense of care or in the sense of economic dependence, the transition from life within the family of orientation to that of procreation is harder and more prolonged in comparison to non-disabled young adults. The latter have better chances to achieve conditions, which are perceived as vital to contribute towards reaching a decision to start families of their own. Conditions regarding decisions to start families as laid out by young adults in Slovenia encompass objective conditions (employment, social security, proper housing, finished education) and subjective conditions (to have safe, stable and loving relationship, to be mature, to achieve good quality of personal life, to have possibility of self-realization, etc.) (Ule and Kuhar, 2003:108). When respondents of the internet poll were asked if they have children and if not, why, answers of those without children encompassed mainly the same factors as stressed by non-disabled youth nowadays. In the age group up to 30 years, no respondent had a child. Respondents without children stressed the following main factors that influence their childlessness: housing, employment, completed education, economic conditions, age (not feeling old and mature enough) and their own preferences. On the other hand, disability can be an important factor of not having or thinking of having children:

"The reason why I don’t have children is cerebral paralysis, my condition in short."

"My handicap is too big."

"Disability and a fear of becoming impaired."

Disability can be perceived as either a fundamental effect of their disabling conditions and/or their awareness of a lack of resources (Lutz and Bowers, 2005) that would halt a transition to parenthood. However, as stressed by Slovene experts, it would be inadequate to neglect the influence of the third factor influencing everyday life of disabled, that is others’ perception of disability and its influence. "If they want to overcome loneliness, and to find a partner, handicapped people have to break through all range of negative opinions and physical obstacles, which in everyday life divide them from knowledge and opportunities which are self-evident for the un-handicapped part of society." (Urek, 2005:153). Disabled women in particular are in difficult position regarding their possibilities of creating their own family. They are usually discouraged to have intimate relations and are in both visible and invisible ways discouraged to have children (Zaviršek, 2000:235).

According to Simon (in Itterah and Kumar, 2007:86) women with disabilities were more likely never to marry, marry late or divorce in comparison with men with disabilities and able-bodied women. If we look at some detail information of how our survey respondents live, it becomes clear, that women more often live alone (29.0 %) than men do (7.7 %). On the one hand, this can be seen as an indicator of women’s greater independence, but on the other hand, it can be also an indicator of their limited options of becoming mothers that arise from social obstacles. Data on family status
reveal the similar situation. Disabled women are mainly single (36.8 %), a quarter of them are married, 14.7 % are divorced and the same percentage are widowed. On the other hand, half of disabled male respondents are married, a third are single and 12.3 % live in cohabitation. In the age group from 16 to 30 years 72.7 % of respondents live with parents, 12.1 % of respondents live with a partner and 9.1 % live alone. Most of the respondents between the ages of 31 to 45 years live together with a partner and children (45.2 %), still every fourth lives with their parents and 16.1 % live alone. Most commonly, respondents between the ages of 46 to 60 live either together with a partner and children (39.6 %) or with a partner (24.5 %). Almost half (45.5 %) of the respondents in the age group from 61 to 75 years live alone.

**TABLE 1: Family forms**

<table>
<thead>
<tr>
<th>Where/With whom do you live?</th>
<th>Alone</th>
<th>Alone with children</th>
<th>With partner</th>
<th>With partner and children</th>
<th>With parents</th>
<th>In housing community</th>
<th>In institution/home</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>5</td>
<td>1</td>
<td>13</td>
<td>25</td>
<td>19</td>
<td>2</td>
<td>0</td>
<td>65</td>
</tr>
<tr>
<td></td>
<td>7.7 %</td>
<td>1.5 %</td>
<td>20.0 %</td>
<td>38.5 %</td>
<td>29.2 %</td>
<td>3.1 %</td>
<td>0 %</td>
<td>100.0 %</td>
</tr>
<tr>
<td>Women</td>
<td>27</td>
<td>10</td>
<td>17</td>
<td>19</td>
<td>15</td>
<td>2</td>
<td>3</td>
<td>93</td>
</tr>
<tr>
<td></td>
<td>29.0 %</td>
<td>10.8 %</td>
<td>18.3 %</td>
<td>20.4 %</td>
<td>16.1 %</td>
<td>2.2 %</td>
<td>3.2 %</td>
<td>100.0 %</td>
</tr>
<tr>
<td>Total</td>
<td>32</td>
<td>11</td>
<td>30</td>
<td>44</td>
<td>34</td>
<td>4</td>
<td>3</td>
<td>158</td>
</tr>
<tr>
<td></td>
<td>20.3 %</td>
<td>7.0 %</td>
<td>19.0 %</td>
<td>27.8 %</td>
<td>21.5 %</td>
<td>2.5 %</td>
<td>1.9 %</td>
<td>100.0 %</td>
</tr>
</tbody>
</table>

Due to gendered perception of the caring role and the perception of women as the main caregivers in the family, we can expect that disabled men are in transition to living within partnership or family exposed to fewer obstacles. As one of the experts stated:

“... when you are talking with mothers they say: “Thank God, it’s a boy. Boys easier find women who are ready to take care of them.” (Barbara Kobal, Social Protection Institute of the Republic of Slovenia)

Those individuals with intellectual disabilities have the smallest chances of creating their own family. In the past they were often subjected to (coercive) sterilization and some data show that sterilization in one Slovene institution for people with intellectual disabilities in Črna na Koroškem was not abandoned till 1994 (Zaviršek, 2000). The development of institutions for people with intellectual disabilities currently goes in the direction of supporting partnerships among this group of disabled. Still, we are not talking about parenthood. Parenthood of intellectually handicapped people (mostly it is about motherhood of intellectually impeded women) belongs to the most tabooed and controversial ways of parenting (Urek, 2006:156). These taboos are in one way linked up by myths about people with intellectual disabilities, and on other side with prolonged parental rights of the parents of people with intellectual disabilities according to whom permission to create a partnership is required.

In a survey of Pascall and Hendey (2004) about the transition of young disabled individuals to independent living, authors found out that parental support is a key to
the ability of young disabled people in becoming independent. On the other hand, everyday experience of Slovene experts shows that parents can also be a barrier for the disabled to create their own family:

“... Taking care of the child became the purpose of their life and this purpose cannot be taken away, for if the child were to leave home, the mother would lose the sense of purpose to her life.” (Jože Primožič, Sonček – Union of Associations for Cerebral Palsy Slovenia)

Reasons lie in family expectations of children with developmental problems to remain dependent on their primary family. Surroundings do not offer needed services and financial support is too low to make it possible to think about independent living (Ceglar, 2005:63). Katja Vadnal and Darja Zaviršek also confirmed a lack of services that would help children from these families or the families themselves.

Chances of the disabled to create their own family depend also on the time when disability starts, especially in the case of mental health problems (Vinko Skalar, Sent – Slovene Union for Mental Health). Tea Černigoj (Association of Disabled Students) believes that education also matters, and estimates that more than a half of their members have a partner. According to Janez Jug (FIHO – Foundation for Financing Organisations of Disabled and Humanitarian Organisations), the degree of disability matters too.

4. AGE AND GENDER AS DETERMINANTS OF POSITION AND CHANCES OF THE DISABLED

Both, age and gender are social categories that in addition to impairments influence position and chances of disabled. As stressed by several Slovene (Zaviršek, 2000, 2005; Urek, 2006) and foreign authors (Dominelli, 2005; Itterah and Kumar, 2007; O’Hara, 2004; Nosek and Hughes, 2003) women with disabilities experience multiple burdens in their life and hence are among the most vulnerable and marginalised groups in society. Their position derives from social perceptions as not “… being fit to fulfil the traditional roles of mother, wife, homemaker or lover and economically productive roles are not seen as appropriate for them.” (Itterah and Kumar, 2007:109). Social roles, ascribed to women, determine position of women with disabilities:

“Generally speaking, we can say that women are traditionally perceived as car ers of those who are weak, or physically weak. It happens often that a man in a wheelchair is able to find a partner sooner than a woman in a wheelchair. If a man chooses as his partner a woman with a handicap, he meets with prejudice: ‘How silly are you? Couldn’t you get anyone better?’ If a woman decides to live with disabled man, it is perceived as evidence of her goodness and is assumed she will take care of him for the rest of her life. It turns out, that men relegate women to institutional care sooner than women do. This is connected with the perception of care work, which is done by women, and not men. I think women are more deprived, if they are handicapped.” (Darja Zaviršek, Faculty of Social Work)
For people with intellectual disabilities, gender differences are obvious, especially in the field of employment and inclusion in special institutions, where men are more often included in institutions outside the home:

“I think that daughters stay at home more often than sons, help in household etc. This is still a stereotype.” (Katja Vadnal, Sožitje – Union of Associations for Help of People with Mental Problems of Slovenia)

Among the respondents of the internet survey, 7.9 % of women and 4.3 % of men reported difficulties due to gender in their everyday life, but this information should be treated with reservation since there were 48.2 % of missing answers among female respondents and even 64.6 % among male respondents. Disabled women mainly mention problems with prejudice about motherhood and partnership and workplace discrimination but also sexual discrimination and a lack of possibilities to engage in some sports:

“It is not clear to many people that I have a partner that I have a child – a priori because of the disability I am not to be a mother!”

“There is not enough information about sex, motherhood, and social support, there is not enough interest from employees in disabled women, there is not enough general information, and exclusion from the media.”

“It was hard during pregnancy and after birth to care for a child.”

“Sexual abuse.”

“I love sport, but for one sport in particular, basketball, we have no team, while among deaf men a basketball team exists.”

Obstacles, stressed by disabled men refer to partnership, sexual life and self-image:

“I cannot find a girlfriend.”

“I feel less worthy.”

Age is another personal circumstance that influences the life of the disabled. It seems that age is strongly linked with the need for and the use of resources. With aging, needs are growing and the use of resources change mostly in the direction of enlarged dependence on other people. Old age problems are not only connected with disability but also with health problems that inhibit the social participation of elder persons (Verbrugge and Yang, 2002:263). The prevalence of disabilities in old age is higher and the number of old people with disabilities rises along with longevity (The Finnish Centre for Interdisciplinary Gerontology, 2004). As stressed in interviews, elderly disabled persons are determined also by worse economic position and position regarding nursing and care (Jože Primožič, Sonček). Once again, people with mental development problems are in a special position. When parents of children with mental development problems get old, children are together with their parents often placed in home for elderly (Katja Vadnal, Sožitje).

Age structure of the respondents of internet survey was as follows: one respondent (0.6 %) was younger than 15 years, 34 (22.1 %) were from 16 to 30 years old, 32
(20.8 %) of respondents were from 31 to 45 years old, we had 53 (32.2 %) respondents in the age group from 46 to 60 years, in the age group from 61 to 75 years 33 respondents (21.4 %) and one respondent (0.6 %) older than 75 years. 10 responses regarding age were missing. According to internet research, 40.8 % of male respondents and 59.2 % of female respondents deal with difficulties and obstacles in everyday life due to an old age. Data reveal the importance of impacts of age in the life of disabled people. If, in western European societies, to be old is considered 65 years of age or more, opinions of respondents show that they feel difficulties because of old age even sooner. Disabled men are in better position, which confirms some findings that say it is typical for old women with disabilities to live under “multiple jeopardy”, which means influence of combinations of social disadvantages (The Finnish Centre for Interdisciplinary Gerontology, 2004:2). The main problems and obstacles that were emphasized by participants of the internet poll in relation to being old are related to health problems, availability of basic goods and services, loneliness and greater dependence on others in everyday activities and occupations.

5. LEISURE TIME ACTIVITIES OF THE DISABLED PEOPLE

Some of the most important dimensions of leisure time are personal choice, self-expression, one’s satisfaction and pleasure of the individual, engaged in one (or more) of free time activities. Leisure time was always the field of inequality, the field of personal and social influences of different social groups, who construct which activities are desirable. The meaning of leisure activities, spaces and styles originates from the social distribution and the individual choices are made in accordance with the knowledge about the choices of others (Černigoj Sadar, 1998).

There are many important factors which can influence how and with whom people spend their leisure time, for instance age, gender, working status and availability and price of activities. In this article, we are interested in how important factor is disability in these choices. Do impairment and the position of being disabled influence the possibilities of spending one’s leisure time?

One of the important factors of spending one’s time is whether people can spend it with the ones that they choose to or with persons that that they are bound to. Our internet poll data shows that 40.4 % men and 59.6 % women socialize with friends in their leisure time. Disabled men from our sample seem to socialize a bit more with members of their families, 42.1 % than with friends. On the other hand, disabled women from the sample seem to socialize with family members a bit less than with friends (57.9 %). Based on the collected data it was not possible directly to explain the differences, but one guess can be that disabled men are more often married and have partners than disabled women. In addition, FIHO research4 (Kolarič et al., 2003:

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4 FIHO – Foundation for financing organisations of disabled and humanitarian organisations – launched public tender for evaluation of so called special social programmes of the organisations of the disabled and social problems of humanitarian and self-help organisations. Evaluation was carried out by Centre of Welfare Studies at the Faculty of Social Sciences and by Faculty of Social Work from 2001 to 2003.
showed that members of the associations of the disabled most often socialize with friends; they also more often spend their time with neighbours than with relatives, children or their parents. Based on the data it cannot be said that any of the three groups of disability-related factors, identified by Lutz and Bowers (2005), influence directly with whom the disabled spend their leisure time.

In the internet survey, the respondents were asked how they spend their leisure time and what their main leisure activities are. One of the most important activities of leisure time is certainly watching television. It is the case also with the disabled persons as 55.7% of women and 44.3% of disabled men from the sample watch television in their leisure time. This result is interesting because statistics for general population in Slovenia show that 83% of women and 87% of men watch television or videos in their free time (Aliaga, 2006:7). Based on the view of watching television as a passive, undesirable activity, it could be said that disabled persons spend their leisure time less passively. In addition, it seems that disability-related factors do not influence the possibilities of watching television probably with the exception in cases when one’s impairment is blindness or deafness.

In their leisure time, 53.4% of disabled women and 46.4% of men from the sample use a computer. According to National time survey (Aliaga, 2006:7) from 2001, only 3% of women and 7% of Slovenian men spend their leisure time using a computer. This large discrepancy probably comes out of fact that our survey was conducted as an internet poll available only to people using computers. On the other hand, data from Aliaga’s research was gathered in 2001, when having and using computer at home was not as common as it is today.

Volunteer work is an important way of social participation and can positively influence self-image of the persons who carry it out. In our survey, 40.9% of the disabled persons do volunteer work. Mostly, they perform this within their organisations, for instance therapeutic talks with members, advising talks, helping older members etc. There were 36.6% of respondents who do not do volunteer work. Others did not respond to this question. Data for the whole population show, that 6% of women and 8% men do volunteer work (Aliaga, 2006). It can be said that volunteer work is an important leisure time activity of the disabled and besides that, this work is especially beneficial since it helps improving the quality of life of the disabled. Differences with the overall population most likely comes from the fact that the non-disabled population does not need special attention and so they do not see the importance of volunteer work as the disabled do. Therefore, disability in this case is the factor of spending one’s leisure time but it cannot be put within any of the groups of factors named by Lutz and Bowers.

Sport is probably one of the most common ways of spending leisure time and for this reason, respondents were asked about their habits regarding sport. Since the FIHO research (Kolarič et al., 2003) revealed that associations5 of disabled are very important

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5 According to the data of Ministry of Labour, Family and Social Affairs, in Slovenia, there are 229 organisations for the disabled. The great majority of these are associations and alliances of associations therefore we address them as associations. They offer a lot of programmes for their members, from information about impairments to a great variety of leisure activities and rehabilitation programmes.
subjects in satisfying the need for physical activities, we also asked the respondents if they attend sport activities within their associations or they attend sport activities elsewhere. Our data support findings from FIHO research. Only 18.3% of respondents attend sport activities outside their organisations.

The share of respondents that spend their leisure time engaging in sport activities within their associations was only 37.2%. It is difficult to assess whether this is the consequence of people’s physical limitations or is it a consequence of a limited choice of attending different activities in the same way as the rest of the population. Sport is the only activity, where the share of active men is higher than the share of active women (55.9% and 44.1%). National time survey results again show lower participation in sport activities of the general Slovenian population, with 31% of women and 33% of men participating in sport activities in their free time (Aliaga, 2006:7). We believe that high percent of sport activities of the disabled is the consequence of the possibilities of engaging sport activities within associations of the disabled and possible lack of attending other free time activities outside associations, which are not adjusted to special needs of the disabled people.

Other leisure activities, such as attending art exhibitions or visiting museums had lower participation so available or important to a minority of the respondents.

In talking about options and opportunities of spending leisure time respondents of internet poll stressed the same issues as experts. Especially independence and autonomy were emphasized and in most answers, independent living without assistance was pointed out:

“I would like to go abroad and meet different deaf people, play in the university basketball league, to take a course of English language with the assistance of the interpreter...”

“I wish to go to the centre of the town with public transport; I wish to reach for and take products from the store shelf by myself...”

“I wish I could leave home more often, to sit down, have coffee and chat; I wish I could spend some time in nature; I wish to visit theatre or exhibitions.”

5.1. Factors that influence the possibilities of spending leisure time of the disabled

Possibilities of spending leisure time the disabled persons can attend and participate are limited. Experts set out two reasons for this claim. Firstly, because of financial reasons, as the majority of activities have a cost attached to them. Secondly, the supply outside the associations of the disabled is not adapted for the disabled and suppliers are not qualified enough for working with the disabled. One interviewee stated:

“All recreational services that are on the market today are, in my opinion, based on the logic of profit. You have to pay to participate. Then there are professionals, who guide the programme and I do not believe that he/she is qualified for work if three disabled persons come and want to participate. It is a huge barrier.” (Janez Jug, FIHO)
On the other hand, possibilities of spending leisure time within activities in the associations are limited and the supply is not satisfactory for all members.

“If one is satisfied with spending leisure time attending the activities within his/her association than for her/him the quality of leisure is higher in comparison with someone, who wants to do things outside. In this case, the possibilities are reduced…” (Barbara Kobal, Social Protection Institute of the Republic of Slovenia)

If a disabled person wishes to attend activities outside organisations it is of great importance what kind of social network he or she has:

“The key problem is that personal assistance is not suitably enabled, so you don’t have a professional assistant and you have to rely on someone near you, who can, for instance, take you to a concert. ... As I said, your time – not only leisure time – significantly depends on your environment and networks.” (Barbara Kobal, Social Protection Institute of the Republic of Slovenia)

In the interviews with experts, type of impairment was set out as a very important factor of possibilities of spending leisure time. Type of impairment is a part of the first group of disability-related factors, which can be defined as one of the fundamental effects of the physically disabling conditions. Empirical studies in Slovenia showed a statistical link between how people spend their leisure time and their health status. Health status has much stronger impact than education and employment status do (Černigoj Sadar, 1998:95). It seems that health is overall the most important factor regardless of disability.

Apart from the typical health limitations that all population face in possibilities of spending their leisure time, disabled persons have one more. It is nature of their impairment. However, the biggest one comes from society and environment. It is interesting that not many interviewees mentioned prejudices and stereotypes about the disabled in the society; only one researcher seemed to see this as an important factor of inequality for the disabled. This could be due to the fact that prejudices against the disabled, while being constantly present in inabilities, indifference and obviousness of the fact that the world is not designed for disabled, are not emphasised by disabled people or by experts, a least in such a “marginal theme” as free time activities are.

On the other hand, most experts put out physical mobility and difficulties with the use of appliances for the disabled:

“... This is the main problem – one is given super modern wheelchair with which he or she is supposed to have better mobility but it is so heavy that it is not manageable. Persons with dystrophy also need elevators for access...” (Boris Šuštaršič, Association of the Dystrophic of Slovenia)

Appliances should be important for the possibilities of independent living and that is why they are also important factors in spending leisure time. More disabled persons would be able to live at home and would not need to live in institutions.
If the disabled had more appliances, more people would live at home not in institutions, homes for the elderly or care homes. I know some handicapped persons from abroad who are able to live at home because they have movable respiratory appliances and adaptable beds, which they obtain in two or three days. They don’t have to wait for them for half a year or even three years. The worst situation is that he or she doesn’t even get the appliance.” (Darja Zaviršek, Faculty of Social Work)

The third disability-related factor – availability and usability of the resources – is therefore also important in the possibilities of time use for the disabled.

Once again, persons with intellectual disabilities are the category with the weakest possibilities and facing the most prejudices regarding leisure time activities:

“We have special Olympics but they say that it is not sport. We participate in the para-olympic committee but it is not really serious...we develop sport programmes for the most difficult cases, we have abilympics but they say that it is not sport.” (Katja Vadnal, Sožitje)

Activities which disabled persons would like to do but (often) cannot, as stressed in internet poll, are so common – from taking public transport to leaving home more often. It clearly shows that Slovenian society is disabling. On the other hand, the results of the poll are positive as they show that our respondents are overall more active than the whole population. However, based on the results, it is difficult to discuss the inequalities between the disabled and other population, because our internet poll sample is limited, so the results cannot show the overall picture.

6. CONCLUSION

The possibilities of having a family or spending leisure time are structured within the disability factors and it looks like the focus on “impairment” is still the main factor that influences both spheres of everyday life of the disabled. All three disability-related factors mostly strongly intertwine and it is hard to single out the one with the biggest impact on any of analysed micro aspects of the daily life of a disabled individuals. Besides, gender and age of disabled, the time when disability occurs and type of disability strongly influence opportunities and characteristics of analysed micro aspects of everyday life of the disabled.

In the case of family life, the basic effects of disabling condition are mostly revealed through statements of young childless disabled adults, who stress their disability as the (main) factor in not having the children. As experts say, their statements can also reveal the fact that being disabled means to represent a group of population that is not encouraged to have their own children. However, the disabled parenthood discourse concerns mainly motherhood, mostly because of the dependant position of disabled women, which is incongruent with the socially desired role of caregiver. The third disability-related factor that influences family life of disabled is the non-existence of public services that would help the disabled parents to carry out their parental role.

Traditional gender roles influence everyday life of disabled, which is reflected in family type and family status, where disabled women live alone more often. On the other hand, disabled men have more chances to live in family types with women (either partner or mother) as a caregiver.

With aging, health problems, mobility problems, psychological problems (such as loneliness), the chances of the disabled to participate fully in social life become more and more influenced. Age is a factor that influences the everyday life of the disabled on the grounds of all three disability-related factors. With the aging process, fundamental effects of the disabling condition deepen, so the need for resources grows.

In leisure time, identities can be created (Černigoj Sadar, 1998) and (re)affirmed. We believe that leisure time activities, conducted mainly within the associations of the disabled, on the one hand reaffirm the identity of the disabled, but on other hand segregate the disabled persons from the non-disabled persons, which also leads to re-production of the existing stereotypes about the disabled and disability. Segregating sport (and other) leisure activities from the rest of the population may prolong dependency and on the other hand enable the society to stay disabling. In order to change stereotypic perceptions of disability and their influence, it would be necessary to enlarge the extent of leisure time activities, available to disabled people outside of associations.

To conclude, fundamental effects of disabling conditions, others’ perception of disability, its influence, and the need for resources and use of resources of disabled people influence family life and leisure time activities of the disabled. Society, with its system of help, does not have impact only on disabling conditions, while there is much place to improve acceptance and integration of disabled, all with the accompanying resources, that help to weaken fundamental effects of disabling conditions.

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SVAKODNEVNI ŽIVOT OSOBA S INVALIDITETOM U SLOVENIJI: OBITELJSKI ŽIVOT I SLOBODNO VRIJEME

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Tema ovog rada je svakdanašnji život osoba s invaliditetom u Sloveniji in nejednakosti naspram ostale populacije. Privatni je svakdanašnji život osoba s invaliditetom često zapostavljen v političkim pokušajima za ujednačenje mogučnosti osoba s invaliditetom s ostalim gradjanima. U ovom smo se članku fokusirali na dva područja privatnog života – obiteljski život i slobodno vrijeme i na to, kako na njihovo doživljavanje utječu tri faktora, koje su u svome radu izpostavili Lutz i Bowers (2005). Osnovni zaključek je, da spol i starost osobe s invaliditetom, vrijeme nastanka i vrsta invaliditeta važno utječu na svakdanašnji život osoba. Invaliditet strukturira njihov svakdanašnji život, a usmjerenost na povrđu je osnovni činitelj koji utječe na mogućnosti formiranja obitelji i provođenja slobodnog vremena.

Kljunče riječi: OSOBE S INVALIDITETOM, NEJEDNAKOSTI, SVAKIDAŠNJI ŽIVOT, OBITELJSKI ŽIVOT, SLOBODNO VRIJEME