



PERCEPTION OF PEOPLE ON THE SOCIAL INCLUSION AND CAPABILITIES OF INDIVIDUALS WITH DOWN SYNDROME

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ABSTRACT

Despite growing awareness of inclusivity, individuals with Down syndrome in the City of San Fernando, Pampanga may still face limited social acceptance and restricted opportunities for participation in education, employment, and community life. While prior studies have examined the general challenges faced by individuals with Down syndrome, little is known about how local communities specifically perceive their social inclusion and capabilities. This study, conducted in April 2026 during School Year 2025–2026, analyzed the perceptions of community members in the City of San Fernando, Pampanga regarding the social inclusion and perceived capabilities of individuals with Down syndrome, and identified the factors shaping these perceptions. Data were generated through semi-structured interviews with ten community members and analyzed using Braun and Clarke's Reflexive Thematic Analysis. Findings showed that community perceptions center on both opportunities for, and barriers to, social inclusion. Education was viewed as a right, though systemic gaps and bullying concerns made it a contested one. Friendships were valued for their warmth, though participants noted they require patience and understanding. Employment inclusion was seen as attainable through training and role adaptation, and participants recognized the capacity of individuals with Down syndrome to contribute meaningfully to their communities despite persisting stigma. Personal background and prior exposure strongly shaped these perceptions. The findings underscore the need for community-based interventions that translate positive attitudes into sustained inclusive practice.

Keywords: *Down syndrome, social inclusion, community perceptions, capabilities, disability*

INTRODUCTION

Despite increased awareness of Down syndrome, misconceptions about the condition persist. Individuals with Down syndrome are commonly assumed to be either excessively dependent on others or uniformly cheerful and easygoing—an assumption that does not hold true for most individuals. Framing the condition this way can restrict social inclusion: like anyone else, individuals with Down syndrome may be misjudged based on how others interpret their conduct and character, and society can respond with either alienation or misplaced pity (Amado et al., 2013).

Down syndrome, also known as Trisomy 21, results from an extra copy of chromosome 21 and produces a broad spectrum of clinical features. Antonarakis et al. (2020) describe it as the most common survivable chromosomal abnormality and one of the most complex inherited genetic conditions compatible with life, with individuals sharing common physical features, a range of developmental trajectories, and varying neurodevelopmental differences. As more individuals with intellectual and developmental disabilities are physically included in community life—in schools, neighborhoods, jobs, and recreation—the challenge of moving beyond physical inclusion toward true social inclusion becomes increasingly apparent (Amado et al., 2013).

Understanding the risk factors associated with Down syndrome also supports early awareness and preventive education. Advanced maternal age remains the most well-established risk factor, with the likelihood of conceiving a child with Trisomy 21 rising progressively after age 35 (Antonarakis et al., 2020). A prior pregnancy affected by Down syndrome slightly raises the likelihood of recurrence (Bull, 2020), and in rarer translocation cases, a parent may carry a chromosomal rearrangement that can be passed to offspring, making genetic counseling an important preventive measure (Antonarakis et al., 2020). Most cases, however arise from nondisjunction—abnormal cell division during early fetal development (National Down Syndrome Society, 2023). Raising awareness of these factors is not meant to stigmatize individuals with Down syndrome or their families, but to equip prospective parents with knowledge that supports informed reproductive decisions and early prenatal care (Bull, 2020).

Social inclusion broadens participation for individuals with disabilities by ensuring access to resources, rights, representation, and opportunity (Amado et al., 2013). The 2030 Agenda and its 17 Sustainable Development Goals affirm that every individual should share in well-being and have access to healthcare, education, and information, regardless of ability. Promoting inclusion therefore requires both removing structural barriers and cultivating environments that support full societal participation. For individuals with Down syndrome specifically, inclusion is shaped by an interaction between personal traits and environmental conditions—such as classroom social climate, teacher attitudes, and peer behavior (de Graaf, 2002)—meaning that support systems must actively foster acceptance, build friendships, and cultivate a positive social climate rather than assume inclusion will occur on its own.

Stigma and misconception nonetheless persist. In a survey of people with Down syndrome ages 12 and older, nearly 99% reported being happy with their lives, 97% said they liked who they are, and 96% said they liked how they look (Skotko et al., 2011)—yet this self-perception is not consistently mirrored by the broader public's confidence in their capabilities. Public attitudes toward individuals with Down syndrome are often shaped by assumptions of limited learning capacity and a need for ongoing protection, alongside skepticism about their prospects in the workplace, school, and family life. This disconnect between how individuals with Down syndrome see themselves and how communities perceive them underscores the need to examine community perceptions directly, rather than infer them from the experiences of the individuals alone.

In the Philippines context, national policy and everyday practice do not always align. Disability remains framed as a matter of human rights, with formal guarantees of access to education, employment, and social participation, yet actual community-level implementation of these guarantees remain inconsistent, with many schools lacking the resources or trained staff to support learners with disabilities (Muega, 2016). Existing Philippine research, such as the Filipino Attitudes to Disability Scale, has largely measured general public attitudes toward disability broadly rather than examining specific community perceptions of inclusion and capability tied to a single, genetically defined condition (Palad et al., 2021). This leaves a gap in the literature regarding how communities—particularly in localities such as the City of San Fernando, Pampanga—perceive the participation, behavior, and capability of individuals with Down syndrome specifically.

This study addressed that gap by examining how community members in the City of San Fernando, Pampanga perceive the social inclusion and capabilities of individuals with Down syndrome. Specifically, it sought to (1) identify prevailing community perceptions of social inclusion in areas such as education, employment, and community participation; (2) understand community attitudes toward the capabilities and potential contributions of individuals with Down syndrome; and (3) determine factors — such as age, education, and prior exposure to individuals with Down syndrome — that shape these perceptions. In doing so, the study aimed to inform community-based interventions that translate stated support for inclusion into sustained, everyday practice.

Research Questions

This study aimed to analyze community perceptions of the social inclusion and capabilities of individuals with Down syndrome in the City of San Fernando, Pampanga. Specifically, it sought to answer the following questions:

1. What are the prevailing community perceptions of the social inclusion of individuals with Down syndrome in areas such as education, employment, and community participation?
2. What are community attitudes toward the capabilities and potential contributions of individuals with Down syndrome?

3. What factors (e.g., age, education, prior exposure to individuals with Down syndrome) influence community perceptions of their social inclusion and capabilities?

Literature Review

Reducing Stigma Through Interpersonal Disposition

Beyond public awareness campaigns, recent Philippine-based research suggests that stigma toward individuals with developmental conditions can be reduced through prosocial disposition rather than knowledge alone. Among Filipino high school students, kindness negatively predicted stigma and positively predicted acceptance toward peers with special educational needs, even after controlling for age and gender (Datu & Chan, 2025), building on earlier findings that kindness combined with accurate knowledge predicts more favorable attitudes toward developmental conditions broadly (Datu, 2023). These findings support treating community perception as changeable through interpersonal disposition, not only through information, which is directly relevant to the community perceptions examined in this study.

Social Inclusion, Health, and Community Participation

Participation in recreational and community programs enhances independence and self-esteem for people with intellectual disability (Merrells et al., 2017), yet global data show that people with disabilities, including those with Down syndrome, continue to experience earlier mortality, poorer health, and greater functional limitation than the general population (World Health Organization, 2022) — underscoring that inclusion affects not only participation, but health and longevity as well. A 2025 scoping review found that community participation among adults with Down syndrome remains consistently lower than that of the general population, shaped jointly by personal factors, such as communication ability, and environmental factors, such as accessibility and others' attitudes — evidence that participation is a modifiable outcome rather than an inherent limitation of the condition (Lee et al., 2025).

Employment Inclusion in Practice

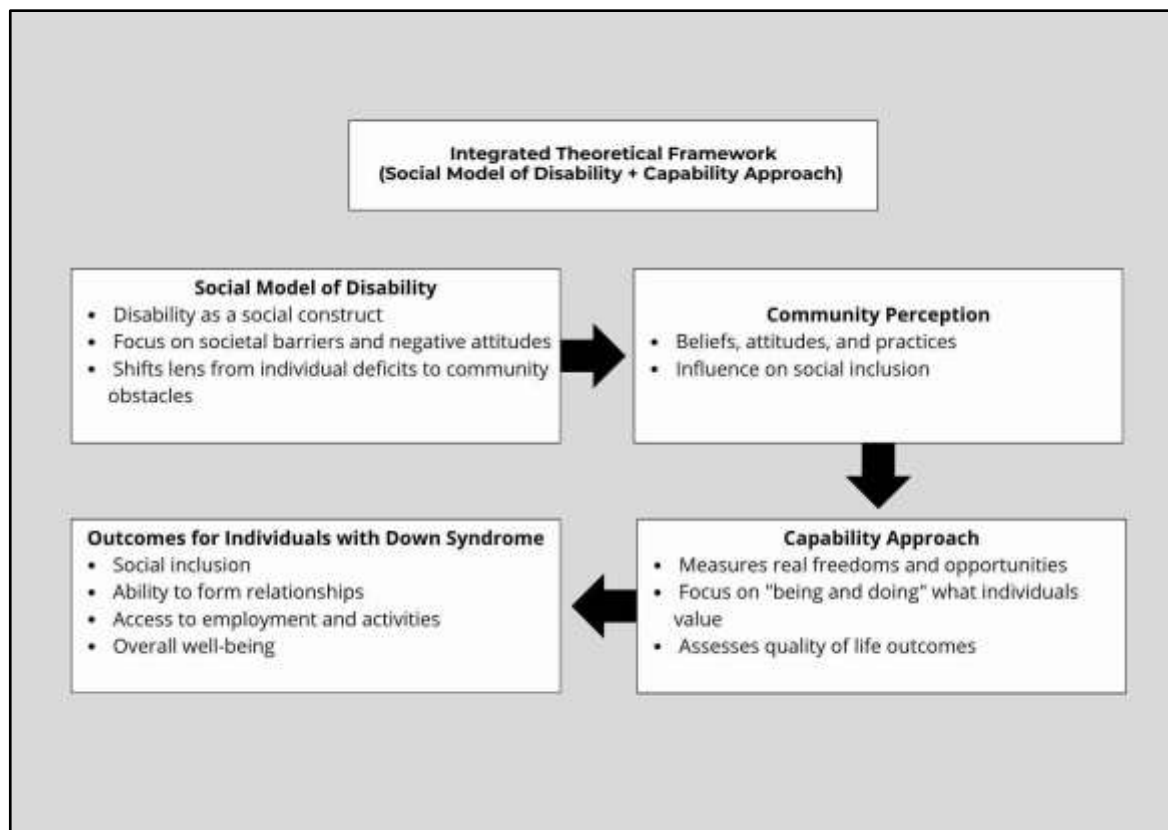
A mixed-methods study in Malaysia found that while community members held only moderate knowledge of the legal employment rights of individuals with Down syndrome, their attitudes toward inclusive hiring were largely positive; the primary barriers identified were communication gaps and employer uncertainty about task adaptation, not a belief in incapability (Adenan et al., 2025). This mirrors the ambivalence found among community members in the present study, who viewed individuals with Down syndrome as capable workers while still identifying training and role adaptation as prerequisites for success.

The Widening Policy-Practice Gap in the Philippines

The success of disability service delivery ultimately depends on local governance capacity — political will and resource allocation at the municipal level (Arcinas, 2025). A 2025 policy brief by the Second Congressional Commission on Education found that only a small fraction of the estimated population of Filipino children with disabilities were enrolled in public schools during School Year 2024–2025, attributing the shortfall primarily to local resource constraints (Second Congressional Commission on Education [EDCOM 2], 2025). Consistent with this, recent commentary on national disability registration figures notes that many disabilities remain "invisible" and therefore especially prone to being misunderstood or overlooked (Inquirer Opinion, 2025), while over a million persons with disabilities remain formally registered nationwide yet excluded from services due to weak local implementation (United Nations Children's Fund, 2024).

These findings collectively support the study's use of the Social Model of Disability, which holds that the limitations experienced by individuals with disabilities are produced far more by societal response than by impairment itself (Oliver, 1990). Read together with the Introduction's discussion of self-perception, employment attitudes, and the Philippine policy-practice gap, the literature points to community perceptions as the specific mechanism through which policy does or does not translate into real capability for individuals with Down syndrome — the gap this study addresses in the City of San Fernando, Pampanga.

Figure 1. Integrated Theoretical Framework



METHODOLOGY

Research Design

This study used a qualitative narrative inquiry design to examine community perceptions of the social inclusion and capabilities of individuals with Down syndrome. Narrative inquiry treats participants' stories and lived experiences as the primary source of data, on the premise that people make sense of their world through the narratives they construct and share (Creswell & Poth, 2018). This design suited the study's aims because it allowed the researchers to capture personal accounts, reflections, and lived experiences rather than surface-level attitudes, preserving the richness of each participant's story and allowing a more nuanced picture of how perceptions are shaped by personal background, direct experience, and social context.

Locale

The study was conducted in the City of San Fernando, Pampanga.

Participants and Sampling

Ten (10) adult community members served as the participants. Inclusion criteria required participants to be 18-59 years old, residing in the City of San Fernando at the time of the study, and to have prior knowledge of or exposure to individuals with Down syndrome— whether personal, professional, or through direct community interaction. Business owners and local pop-up store operators were specifically included given their relevance to potential employment opportunities for individuals with Down syndrome. Participants also needed to be willing to give informed consent and be able to communicate in Filipino or English. Individuals outside the 18-59 age range, residing outside San Fernando, lacking prior exposure to Down syndrome, or unable to provide informed consent were excluded.

Participants were selected using purposive sampling, a non-probability technique in which individuals are chosen because they hold characteristics relevant to the research objectives (Nikolopoulou, 2022). This judgment-based approach allowed the researchers to identify community members most likely to provide data that meaningfully addressed the study's aims.

Research Instrument

Data were collected using a semi-structured interview guide consisting of six core open-ended questions with two follow-up prompts, developed by the researchers and aligned with the study's objectives (Kallio et al., 2016). The instrument underwent expert validation using a Content Validity Index (CVI), reviewed by psychometricians and nursing professionals prior to use. A pilot test was subsequently conducted with two participants to check the clarity and feasibility of the questions; pilot data were not included in the final analysis. The semi-structured format allowed participants room to raise new topics, which

the researchers could then explore further, with questions focused on participants' awareness and perceptions of the capabilities of individuals with Down syndrome, prior related encounters, and recommendations for how the community could better support inclusion.

Data Gathering Procedure

Following ethical clearance and instrument validation, full informed consent was obtained from each participant before interviews began. Interviews were conducted largely in Tagalog to achieve cultural fluency and elicit more authentic responses, and were scheduled at times and locations convenient for participants to promote comfort and openness. Sessions were audio-recorded with consent and later transcribed verbatim to preserve the depth and authenticity of each narrative.

Ethical Considerations

The study was reviewed and approved by the University's Research Ethics Board for compliance with institutional and national ethical standards, following the Philippine Health Research Ethics Board's National Ethical Guidelines for Health and Health-Related Research (PHREB, 2017). Written informed consent was obtained from all participants prior to interviews, with the study's purpose, procedures, and voluntary nature fully disclosed. Participants were free to withdraw at any point without consequence, consistent with the ethical principles of beneficence, justice, and respect for persons (PHREB, 2017; Resnik, 2020). Throughout data collection, the researchers used polite, non-discriminatory language given the sensitivity of the subject matter, allowed participants to skip questions or end sessions at will, and applied strict confidentiality — using participant codes rather than personal identifiers and safely storing and disposing of data upon study completion (Resnik, 2020; National Commission for the Protection of Human Subjects, 1979).

Process of Analysis

While narrative inquiry guided the overall design and data collection, interpretation was carried out using Braun and Clarke's Reflexive Thematic Analysis (RTA), chosen for its capacity to identify patterns and meaning across participants' diverse narratives (Braun & Clarke, 2021). Analysis proceeded through familiarization with the transcripts, generation of initial codes, development of candidate themes, and refinement into final themes, with analytical notes kept throughout to reflect the diversity of participant viewpoints. Reflexivity was maintained across the process: the researchers continually examined their own assumptions and biases to ensure the interpretation remained neutral, accurate, and culturally sensitive.

Scope and Limitations

This study focused on how adult community members in the City of San Fernando, Pampanga perceive the social inclusion and capabilities of individuals with Down

syndrome, examining perceptions across three areas — education, employment, and community involvement — and how these perceptions varied with age, educational background, and prior exposure to individuals with Down syndrome. Participants were drawn specifically from business owners and local pop-up store operators, given their relevance to potential employment opportunities for individuals with Down syndrome; this means the findings reflect the perspectives of this occupational group rather than the community at large. As the study captures participants' general opinions rather than objective measures, these perceptions may not correspond to the actual abilities of individuals with Down syndrome or other intellectual or developmental conditions. The findings are further limited to the City of San Fernando, Pampanga, and are not intended to characterize broader national or regional perceptions.

RESULTS

Analysis of interviews with ten community participants (BO1–BO10) using Braun and Clarke's Reflexive Thematic Analysis produced six major themes, organized below according to the study's three research objectives.

Objective 1: Perceptions of Inclusion in Education, Friendship, and Employment

Education was viewed as both a right and a challenge. Participants described systemic barriers to inclusive classrooms: "mahihirapan naman ung Down syndrome students to catch-up... teachers... not actually focusing on the needs... mas malaking reprogramming ng curriculum ang kailangan" (BO1). Bullying concerns led some participants to favor separate schooling — "Mahirap para sakanila... madalas po siya nabu-bully... mas maganda if may separate silang school" (BO3) — while others pushed for mainstream normalization: "Kailangan ang mga down syndrome is ma-normalize sa mga school... respect katulad ng pag respect natin sa tao" (BO4), and framed inclusion as a matter of rights rather than charity: "they do have rights for education... they actually deserve a spot sa mga school" (BO10).

Friendships were consistently described as a strength. Participants characterized individuals with Down syndrome as sociable and approachable — "They are very very sociable and friendly... most innocent, open-minded" (BO1) — while noting some prefer smaller groups: "mas madaling makapag build ng friendships... kung ang mga nakakasama nila ay mostly katulad nila" (BO6). Peer patience was seen as key to sustaining these relationships: "we should be the one who should adjust... because they also want to interact" (BO7), though miscommunication could still lead to isolation: "way of saying 'I love you' nila, pero sa iba is rude" (BO9).

Employment inclusion was widely viewed as achievable given fairness, training, and role adaptation. Participants emphasized judging capability by performance: "As long as they can perform the tasks, there should not be any issue... why not give them the chance" (BO1), citing real examples of inclusive hiring — "May mga matalino... nagtatrabaho sila sa Jollibee... Shakey's provides work... my sister is also doing beads"

(BO3, BO10). Others noted that role fit mattered more than blanket exclusion: certain jobs, such as prolonged desk work, were seen as less suitable (BO2), while structured, repetitive tasks and back-of-house roles were seen as a good match for their skills once properly trained (BO8, BO9).

Objective 2: Perceptions of Capabilities and Contributions to Society

Participants described individuals with Down syndrome as creative ("They could also be artistic, creative... why are you limiting it to this disorder," BO1), resilient and focused (BO2, BO7), cheerful ("Most of them kasi are happy... they can connect right away with people," BO10), and honest ("sila po yung hindi mo po talaga mapagsisinungaling... they will say what they feel," BO9). Several felt individuals with Down syndrome could exceed expectations when given the opportunity: "may mga mas skillful pa sila sa mga regular na tao... chance na maging athletes" (BO5).

At the same time, participants identified stigma and limited representation as ongoing barriers, and proposed several pathways to address them: greater media visibility ("Better if mas nakikita sila sa TV... knowledge and education combat discrimination," BO1), a shift from pity to acceptance (BO2, BO3), government-level empowerment akin to existing programs for women (BO4, BO6), skill-based programs run by companies and agencies (BO7), and support beginning at the family level and extending into schools and the broader community (BO9, BO10).

Objective 3: Factors Shaping Community Perceptions

Personal background strongly influenced participants' views. Professional exposure — through architecture, nursing, graphic design, or direct work experience — was linked to more inclusive attitudes (BO1, BO5, BO7, BO8), as was family upbringing: "specially yung nag hubog sa kinang mga parents... paano irespeto yung bawat isa" (BO4). Even participants without direct personal experience with Down syndrome expressed support for fairness and inclusion: "wala pa akong direct experience... but every living thing deserves to be treated... they should be loved also" (BO2).

Table 1. Alignment of Research Objectives to Emergent Themes

Research Objective	Corresponding Theme/s	Key Focus
Objective 1: Identify prevailing perceptions of social inclusion in education, employment, and community participation	Theme 1: Education Inclusion — Between Barriers and Normalization; Theme 2: Friendships and Social Networks; Theme 3: Employment Inclusion through Opportunity and Training	Education as both a right and a challenge; friendships as a relational strength; employment as achievable through fairness and role adaptation

Objective 2: Understand community attitudes toward the capabilities and potential contributions of individuals with Down syndrome	Theme 4: Contributions to Society; Theme 5: Stigma and Representation	Recognition of creativity, resilience, and positivity; persistent stigma and calls for greater visibility and structural support
Objective 3: Determine factors that influence community perceptions	Theme 6: Personal Backgrounds and Attitudes	Professional exposure and family upbringing as drivers of empathy and inclusive attitudes

Table 2. Summary of Themes and Subthemes

Theme	Subthemes
1. Education Inclusion — Between Barriers and Normalization	Systemic barriers; effort required; bullying/safety concerns; calls for normalization; rights-based inclusion
2. Friendships and Social Networks	Relational strengths; conditional comfort; communication as bridge; emotional intelligence; communication challenges
3. Employment Inclusion through Opportunity and Training	Fairness and opportunity; health/role constraints; training and repetition; role optimization
4. Contributions to Society	Creativity and artistry; resilience and focus; joy and positivity; honesty and authenticity; potential to excel
5. Stigma and Representation	Visibility; empathy and acceptance; government empowerment; skill-based programs; family/community support
6. Personal Backgrounds and Attitudes	Professional exposure; family influence; limited exposure but fairness

DISCUSSION

This study examined community perceptions of the social inclusion and capabilities of individuals with Down syndrome in the City of San Fernando Pampanga. The six themes that emerged— education inclusion, friendships and social networks, employment inclusion, contributions to society, stigma and representation, and personal backgrounds and attitudes— together reflect both meaningful progress and persisting obstacles to genuine inclusion, consistent with the study's Integration of Social Model of Disability and the Capability Approach, which together frame disability limitations as produced by societal responses rather than impairment itself.

On education, participants agreed on its importance but were divided on implementation— some called for mainstream normalization, others cited bullying and underprepared teachers as reasons to favor separate schooling. This tension is consistent with Muega's (2016) finding that inclusive education in the Philippines remains uneven due to limited resources, teacher preparation, and inconsistent local implementation, and with de Graaf's (2002) observation that a child's social inclusion in mainstream classrooms depends heavily on environmental factors such as classroom climate and teacher attitude, not on the child's traits alone. Participants' repeated calls for individualized support point toward the same conclusion reached in both studies: genuine inclusion requires structural and attitudinal change together, not one without other.

On friendships, participants described individuals with Down syndrome as sociable and capable of forming meaningful relationships— directly challenging the assumption of dependency and limited social capacity that Amado et al (2013) identify as a persistent barrier to social inclusion for individuals with intellectual and developmental disabilities more broadly. However, participants also reported communication mismatches that occasionally led to isolation, suggesting that the barrier here is less about capacity and more about a two-way gap in mutual understanding— consistent with Amado et al.'s (2013) argument that true inclusion depends on genuine relational effort and respect, not proximity alone.

Employment emerged as an area of guarded optimism. Participants recognized that individuals with Down syndrome could work productively when properly trained and matched to suitable roles— consistent with Skotko et al.'s (2011) finding that the large majority of individuals with Down syndrome report being happy with their lives and want to be meaningfully engaged. At the same time, participants' limited direct exposure to inclusive workplaces reflects a policy-practice gap: national disability frameworks exist, but participants' own accounts suggest community-level implementation remains inconsistent, echoing Muega's (2016) broader finding about the gap between Philippine disability policy and everyday practice. The consistent emphasis on training and opportunity, rather than charity, reflects the Capability Approach's core concern with expanding real freedom and choice rather than simply providing access.

Participants' descriptions of creativity, resilience, honesty, and positivity as defining traits directly counter deficit-based narrative about individuals with Down syndrome. Their view of these traits as social assets— not just individual strengths— suggests that inclusion benefits the broader community as well, consistent with Amado et al.'s (2013) point that the challenge of inclusion is ultimately about the community moving beyond mere physical proximity toward genuine social belonging.

Stigma and limited representation nonetheless remained persistent concerns. Participants pointed to education, media visibility, and government-level empowerment as necessary countermeasures. This is broadly consistent with Palad et al.'s (2021) finding that while Filipino public attitudes toward disability are generally positive overall, discrimination remains the domain where attitudes score lowest— suggesting that goodwill alone has not closed the gap between attitude and structural inclusion. The comparison participants drew to gender-based advocacy— treating disability empowerment as a matter of structural policy rather than individual goodwill— reflects a shift from personal tolerance toward institutional accountability, consistent with the Social Model's core claim that the barrier sits in social attitudes and structures, not in the person.

Finally, personal background consistently shaped how participants understood and related to individuals with Down syndrome. Those with family exposure or professional training reported greater acceptance, which aligns with the broader pattern in the literature that direct contact and lived exposure— rather than information alone— tend to shift attitudes toward inclusion (de Graaf, 2002). This suggests that experiential learning and community engagement are not incidental but central to shifting attitudes— a finding with direct relevance to how education, healthcare training, and community programs are designed going forward.

Taken together, the findings affirm that individuals with Down syndrome are perceived as capable and socially valuable, yet their inclusion remains constrained less by their own limitations than by societal misconceptions and structural gaps. This study is limited by its geographic and occupational scope — participants were adult community members drawn largely from business owners and local store operators within a single city, so the findings should not be generalized to other regions or sectors without further research.

Conclusions

This study examined how community members in the City of San Fernando, Pampanga perceive the social inclusion and capabilities of individuals with Down syndrome, guided by the three research questions.

On prevailing perceptions of social inclusion (Research Question 1), findings showed that education is regarded as a right but a contested one in practice— valued in principle, yet complicated by systemic barriers and bullying concerns. Friendships were consistently seen as a relational strength, though dependent on patience and mutual

understanding. Employment inclusion was viewed as achievable given fair treatment, proper training, and role adaptation, rather than as something individuals with Down syndrome are inherently unsuited for.

On community attitudes toward capabilities and contributions (Research Question 2), participants consistently described individuals with Down syndrome as creative, resilient, honest, and positive— traits they saw as genuine assets to social and professional life, not compensations for limitation. At the same time, stigma and underrepresentation were identified as ongoing obstacles that these recognized strengths have not yet overcome.

On the factors shaping these perceptions (Research Question 3), personal exposure emerged as the clearest driver of empathy and inclusive attitudes— participants with family connections or professional training toward individuals with Down syndrome consistently expressed more inclusive views than those without such exposure, though even participants with no direct experience expressed support for fairness and inclusion in principle.

Viewed through the Social Model of Disability and the Capability Approach, these results confirm that inclusion is not simply a matter of access, but requires actively removing structural barriers while expanding real, exercisable opportunity. Ultimately, this study contributes to the growing recognition that inclusion is not merely a policy goal, but a lived experience shaped continuously by community attitudes — one that requires both the dismantling of barriers and the deliberate creation of opportunity.

Recommendations

Given that community members already hold largely favorable views of the capabilities of individuals with Down syndrome, future efforts would benefit less from attitude-change campaigns and more from converting existing goodwill into structural opportunity. **Schools and educational institutions** should provide teacher training in differentiated instruction and strengthen anti-bullying policies, directly addressing the implementation gap participants themselves identified. **Local government units** should establish peer mentoring initiatives that build on the relational strengths participants already recognized. **Businesses and government agencies** should adopt structured training and role-adaptation programs, since participants' hesitation centered on preparation and fit rather than a belief in incapability. **Media outlets** should increase positive representation to close the gap between private goodwill and public visibility.

Because the finding that most community members already hold favorable attitudes runs somewhat counter to the persistence of stigma reported in the literature, future researchers should investigate this apparent gap directly — for instance, examining whether favorable *stated* attitudes translate into favorable *behavior* in hiring, teaching, or everyday social settings. Extending this study to other localities, sectors, and

demographic groups beyond business owners in San Fernando would also help determine whether these patterns hold at a broader, more representative scale.

Compliance with Ethical Standards

The researchers affirm that this study was conducted in full compliance with ethical research standards. Written informed consent was secured from all participants prior to data collection, with full disclosure of the study's purpose, procedures, and voluntary nature. Participants were informed of their right to withdraw from the study at any point without penalty. Anonymity and confidentiality were strictly maintained throughout the research process, with participant codes used in place of personal identifiers, and all data were handled in accordance with the Philippine Data Privacy Act of 2012. The well-being of respondents was safeguarded at every stage of data collection, particularly given the sensitivity of the subject matter. The researchers declare no conflict of interest in the conduct of this study. Plagiarism was strictly avoided, and all sources used were properly cited and referenced. The researchers exercised due diligence to minimize bias in the interpretation of the findings, and the results reported are used purely for academic and research purposes. Artificial intelligence (Claude, developed by Anthropic) was used to assist in restructuring the manuscript into the required format, condensing content to meet word requirements, and verifying the accuracy of citations against original sources; all data collection, analysis, interpretation, and conclusions remain the original work and responsibility of the authors.

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