

The Attitudes of Allied Medical Professional Members Towards People With Disabilities in Taif, KSA.

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Abstract: Negative attitudes of health care professionals towards persons with disability are considered to be an invisible barrier to rehabilitation and integration. In contrast, positive attitudes are a key to successful integration. The attitudes of health care professionals towards people with disability have been studied worldwide. It is believed that cultural values, traditional beliefs, educational environment and religion are factors affecting attitudes towards disabilities. This may indicate that each community should study its own attitudes towards people with disability, separately. Therefore, the objective of this study was to determine the attitudes of health care professionals towards people with physical disabilities in KSA. Attitudes of a sample of 150 health care professionals in Saudi governmental hospitals will be investigated using a Scale of Attitudes Towards Disabled Persons (ATDS). All participants worked with various types of disabilities including the physically disabled showed a positive attitude toward disability, but physical therapist show a high attitude toward disability in comparison to nursing and laboratory profession.

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1. Introduction

Historically, certain medical conditions (e.g. mental illness, physical disabilities, developmental disability) were isolated from mainstream society. Stigma, detracting stereotypes, and negative attitudes toward medical conditions are a major impediment in the provision of healthcare, with research showing that such attitudes can have a direct impact on patients' well-being and the type of health care they receive¹.

Health care professional may bring with them potential pre-conceived perceptions, notions, and values and then they become socialised to their chosen discipline². Hence it is important to examine these attitudes, beliefs, and perceptions about the patient groups they will be working with.

Understanding the attitudes and beliefs towards different medical conditions amongst health care professionals is a fundamental step in addressing the issue of negative attitudes so often reported in studies^{1,3,4}. they will be expected to treat a wide range of people presenting with various medical conditions without bias throughout their professional careers.

In general, the attitudes of health care professionals can influence how patients with disabilities feel about themselves and their progression with rehabilitation. It is well known that health professionals who work with persons with disabilities significantly affect the patient's treatment and rehabilitation potential. Negative attitudes of health care professionals can inhibit patient adaptation and acceptance of their disability and limit the development of positive staff - concept, irrespective of the limitation of disability. In contrast,

a positive attitude increases patients' motivation to recover, adapt to and accept disability. Several studies worldwide have investigated the attitudes of health professionals toward disabilities⁵⁻⁹. Roush⁵ reported that negative attitudes towards people with disabilities are common in society, but are not directly voiced. They are expressed in different ways and serve as barriers to the full realization of human potential. It has been agreed that health care professionals hold attitudes toward people with disabilities that are similar to those of society as a whole, and they may be actual perpetrators of this limiting practice⁵.

When negative attitudes are formed about a particular group of people, it is likely that they will be treated poorly, rejected and devalued within society. Furthermore, negative attitudes are often associated with people who have certain types of diagnoses or disabilities, leading the individual to experience limited lifestyle, educational and vocational opportunities, a decrease in overall quality of life and a decline in community participation^{2,7}. Children and adults who are sick or present with certain health care problems commonly receive treatment and support from health professionals and it is assumed that health professionals are free from negative attitudes. However, positive and negative attitudes are formed routinely, and members of different health care disciplines are as susceptible to experiencing the same negative attitudes as individuals within society¹¹. Negative attitudes held by health care professionals towards people with diagnoses can impact on the quality and range of services offered, and also hinders the development of the therapeutic relationship between the patient and health care provider^{7,2}. The

study of health professionals towards people with specific medical conditions has been documented in health literature; however there has been limited investigation into the attitudes held by health professional students' attitudes.

Several medical schools are currently involved in implementing curricula to improve students' knowledge, attitude and skills regarding caring for patients with disabilities. There are also calls on many levels to expand efforts in this area¹³⁻¹⁵. If these curricula are to be robust, there is a need for evaluation strategies – including validated instruments - to evaluate their effectiveness and guide their development.

Attitudes have been measured with various scales. However, the most commonly used attitude measure is Scale of Attitudes Toward Disabled Persons (SADP)¹⁰⁻¹². This scale has been reported to be a reliable, valid and a simple measure of attitudes¹⁰⁻¹².

Attitudes towards people with disabilities are debatable and vary among health care professionals and within specialties worldwide. It is believed that the variation in attitudes towards people with disabilities result from cultural values, traditional beliefs, educational environment, religion, age, working experience and sex^{8, 12}. Therefore, it is important for each community to have its own data on attitudes towards people with disabilities. Consequently, the attitudes of Saudi health care professional towards people with disabilities must be addressed. **Therefore, the purpose of this study** was to characterize the attitudes of physiotherapist, nursing and laboratory health care professionals towards people with physical disabilities.

2. Material and Methods

Design:

A cross-sectional study using a paper based version of the attitude toward disability Scale (ATDS) questionnaire was administered.

Participants:

There will be 150 allied health care professionals (nursing, laboratory, physiotherapy) eligible for inclusion in the study.\

Procedure:

Scale of Attitudes Towards Disabled Persons (ATDS) will be personally distributed among a sample of 150 Egyptian health care professionals in general hospitals at Saudi,. All participants worked with various types of disabilities including physical disabilities. The ATDS is a reliable self-report scale which consists of 30 items, developed by Antonak¹¹. It provides a convenient and effective tool for evaluating attitudes towards people with disabilities. The 30 items of the SADP are expressed as

statements to which participants respond on a Likert-type scale. The participants will be asked to circle the appropriate number which best corresponds with how they felt about the statement. There will be no right or wrong answers. There was no time limit. They will be asked to respond to every statement. The participants will also asked to respond to the scale statements according to their personal reaction, but not to professional reaction. Any participant who will not respond to all of the scale statements will be omitted from the study. The total scores ranged from (0), indicative of a very negative attitude, to (144), indicative of a very favorable attitude.

Data Analysis

Descriptive statistics, Kruskal-Wallis and Spearman's correlation coefficient tests, were used to analyze the data of this study with alpha level 0.05, using the SPSS statistical programme.

3. Results:

One hundred and fifty out of 200 participants responded to the ATDS as instructed. They were 100 males and 50 females, with a mean age of 44.4±3.4 years, one hundred of them were Bsc degree, thirty of them were Msc degree, and 20 of them were PhD degree. Spearman's correlation coefficient showed a poor relationship between attitude scores and either age ($r=0.03$) or educational level ($r=0.05$). as shown in table (1).

Table 1: Participant demographic data:

Variable	Mean
Age	44.4±3.4
Sex	100 male : 50 female
Educational level	Bsc = 100 : Msc = 30 : PhD = 20

Table 2: Attitudes of health care professionals toward person with disability (Mean ± Standard deviation)

Comparison	P.T	Nurs.	P.T	Lab	Nurs.	Lab.
Mean ± SD	122±3.400	110±3.500	122±3.400	109±3.200	110±3.500	109±3.200
P value	$P < 0.001$		$P < 0.001$		$P > 0.05$	
Sig.	HS		HS		NS	

SD = Standard deviation, Sig = Significance, HS = highly significant, NS = Not significant.

Chi Square test showed that there was no significant difference ($P < 0.05$) between nursing profession (110±3.500) and laboratory profession (109±3.200). on the other hand there was a highly significant difference ($P < 0.001$) in attitude toward disability between physical therapist profession (109±3.200) and nursing profession (110±3.500), similarly, there was a highly significant difference

($P < 0.001$) between physical therapist profession (109 ± 3.200) and laboratory profession (109 ± 3.200) as shown in (Table 2).

4. Discussion:

The present study showed that Saudi healthcare professionals had a positive attitude towards people with disability. The positive attitudes reported, could be due to the influence of contact of the participants with disabled people¹⁶ and a chance to obtain accurate information.^{17,18} Researchers reported that those who experience more contact with people with disabilities, appeared to have more positive attitudes^{19,20,21}. This contact appears to decrease the fear of the unknown and erase negative stereotypes. The positive attitudes toward people with disability in this study, may also be due to the knowledge and education regarding disability issues. Attitudes towards people with disability are reported to be improved with increased knowledge and education regarding disability issues^{22,23}, while negative attitudes are based on the lack of knowledge²⁴. Therefore, people including health professionals, view disability depending on their personal experience of interacting with such people, as well as on the basis of the art and literature they are exposed to. Attitudes such as determining of behaviour can be negative or positive, depending on the perceptions held by the person, and the behaviour he or she expresses pertaining to these perceptions. Those who have no concept of what disability entails, and have not made any previous contact or attempt to learn, are more subject to form a negative perception concerning beliefs about persons with disability. Anderson and Antonak²⁵ state that persons who have less frequent and less intimate contact with people with disabilities are more likely to develop stereotypical negative attitudes.

There were no significant differences observed between men and women, in this study. A similar result was found in other studies¹⁴. This could indicate, that the gender of general public or health care professionals has little influence on attitudes towards people with disabilities.

Educational level in this study showed no association with attitudes. This is in contrast to the findings of a previous study where registered nurses had more positive attitude than either fresh student nurses or graduate nurses⁸.

The positive attitudes of physical therapist in this study, can be used to encourage other health care workers, who have contact or experience with disability, to treat a person with disability in a genuine, warm and accepting manner.

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References

1. Link BG, Struening EL, Rahav M, Phelan JC, Nuttbrock L: On Stigma and its Consequences: Evidence from a Longitudinal Study of Men with Dial Diagnoses of Mental Illness and Substance Abuse. *J Health Soc Behav* 1997, 38(2):177-190.
2. Miller MJ: Attitudes of preservice students towards persons with disabilities. PhD Thesis University of Maine 1996.
3. Christison GW, Haviland MG: Requiring a One-Week Addiction Treatment Experience in a Six-Week Psychiatry Clerkship: Effects on Attitudes Toward Substance-Abusing Patients. *Teach Learn Med* 2003, 15(2):93-97.
4. Dixon RP, Roberts LM, Lawrie S, Jones LA, Humphreys MS: Medical Students' Attitudes to Psychiatric Illness in Primary Care. *Med Educ* 2008,42:1080-1087
5. Roush SE, Health professionals as contributors to attitudes toward persons with disabilities. A special communication, *Phys Ther.*,1986;66(10):1551-4.
6. Paris MJ, Attitudes of medical students and health-care professionals toward people with disabilities, California School of Professional Psychology, Berkeley/Alameda, *Arch Phys Med Rehabil* 1993;74(8):818-25
7. Gething L, Nurse practitioners' and students' attitudes towards people with disabilities, *Aust J Adv Nurs* 1992;9(3):25-30.
8. Brillhart BA, Jay H, Wyers ME, Attitudes toward people with disabilities. *Rehabil Nurs* 1990;15(2):80-85.
9. White MJ, Olson RS, Attitudes toward people with disabilities: comparison of rehabilitation nurses, occupational therapists, and physical therapists. *Rehabil Nurs.*, 1998;23(3):126-31.
10. Benham P. Attitudes of occupational therapy personnel toward persons with disabilities. *The American Journal of Occupational therapy* 1988;42(5):305-311.
11. Antonak R. Development and psychometric analysis of the scale measure attitudes toward disabled persons. *Journal of Applied Rehabilitation Counseling* 1982;13(2):22-8.
12. Packer TL, Iwasiw C, Theben J, Sheveleva P, Metrofanova N. Attitudes to disability of Russian occupational therapy and nursing students. *Int J Rehabil Res.*, 2000;23(1):39-47.

13. Kirschner KL, Curry RH: Educating health care professionals to care for patients with disabilities. *JAMA* 2009, 302:1334-1335.
14. Symons AB, McGuigan D, Akl EA, Symons AB, McGuigan D, Akl EA: A curriculum to teach medical students to care for people with disabilities: development and initial implementation. *BMC Medical Education* 2009,9:78.
15. Minihan PM, Robey KL, Long-Bellil LM, Graham CL, Hahn JE, Woodard L, & Eddey GE. Desired educational outcomes of disability-related training for the generalist physician: Knowledge, attitudes, and skills. *Acad Med.* 2011; 86; 1171-1178.
16. Wright B. Developing constructive views of life with a disability. *Rehabilitation Literature* 1980;41(11-12):274-9.
17. Pernice R, lys K. Interventions for attitude change toward people with bdisabilities: How successful are they? *International Journal of Rehabilitation Research* 1996;19:171-4.
18. Timms M, McHugh S, O'Carrol A, James T. Assessing impact of disability awareness training using the attitudes towards disabled persons scale (ATDP-form). *International Journal of Rehabilitation Research* 1997;20:319-23.
19. Gething L. Generality vs. specificity of attitudes toward people with disabilities. *British Journal of Medical Psychology* 1991;64:55-64.
20. Strohmer D, Grand S, Purcell M. Attitudes towards persons with disability :An examination of demographic factors, social context and specific disability. *Rehabilitation Psychology* 1984;29(3) :131-45.
21. Stovall C, Sedlacek W. Attitudes of male and female university toward students with different physical disabilities. *J College Student Personnel* 1983;21:354-357.
22. Gething L. Cumberland's strategy for changing attitudes toward disabled people. *Australian Disability Review* 1984;6:44-52.
23. Kirchman M. Attitudes toward disability. *Physical and Occupational Therapy in Geriatrics.* 1987;5(3):51-63.
24. Westbrook M, Legge V, Penna M. Attitude toward disability in a multicultural society. *Social Science and Medicine* 1993;36(5):615-23.
25. Anderson R, Antonak R. The influence of attitudes and contact on reactions to persons with physical and speech disabilities. *Rehabilitation-Counseling-Bulletin* 1992;35:240-247.
26. Yuker H, Block J. Research with the attitudes toward disabled persons scale (ATDP) 1960-1985. Hempstead, NY: Hofstra University Centre for the study of Attitudes toward People with Disabilities, 1986.

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