

ATTITUDES OF SAUDI ARABIAN HEALTH CARE PROFESSIONALS TOWARDS PEOPLE WITH PHYSICAL DISABILITIES

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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, but not in Saudi Arabia. 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 Saudi Arabia. Attitudes of a sample of 130 Saudi Arabian health care professionals was investigated using a Scale of Attitudes Towards Disabled Persons (SADP). All participants worked with various types of disabilities including the physically disabled. Descriptive statistics, the Kruskal-Wallis and the Spearman's correlation coefficient were used to analyse the data of this study using SPSS statistical programme. The participants exhibited positive attitudes towards physically disabled people with mean score of 100 ± 17 . Attitudes among health care professionals were not significantly different ($p < 0.40$). Educational degrees showed no significant effect on attitudes of participants towards people with disabilities ($p < 0.45$). A poor relationship was found between attitude scores and both age ($r = 0.03$) and experience ($r = 0.003$). This study concluded that Saudi Arabian health care professionals displayed positive attitudes towards people with disability as do other health care professionals worldwide. This may indicate that cultural values, traditional beliefs, educational environment and religion have little effect on attitudes of health care professionals.

INTRODUCTION

The attitude of health care professionals can have a direct influence on aspects of care. When health care professionals interact with persons with disabilities, attitudes and feelings

are reflected in the interaction. 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 disabilities (1, 2, 3, 4, 5). Roush (1) 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 realisation 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 practice (1). This conclusion is at variance with the findings reported by Paris (2) who reported that health-care professionals and medical students, similarly, had positive attitudes toward individuals with physical disabilities. Moreover, Gething (3) found that Australian nurses and nursing students' attitudes are more positive than those of the general population and that nursing education strategies are effective in promoting positive attitudes. Also, Brillhart et. al. (4) found that nursing faculty, fresh nursing students, graduating nursing students and registered nurses had positive attitudes toward people with disabilities. However, the faculty held the least positive attitude, followed closely by graduating nursing students. Registered nurses had more positive attitudes than fresh student nurses, graduating nurses and nursing faculty. On the contrary, Biley (6) reported that nurses had negative attitudes and a general lack of awareness of the needs of people with physical disabilities. He concluded that there is a need for increased awareness among nurses, of the needs of people with disability.

This variation in attitudes found in these studies may indicate that practice sites, age, clinical experience, educational level, belief and cultural aspects may affect the attitudes of health care professionals.

In other studies, rehabilitation professionals including 150 rehabilitation nurses, 57 occupational therapists, and 43 physical therapists in southeast Texas, reported to have positive attitudes toward people with disabilities (5). In fact, occupational therapists had significantly higher scores than the rehabilitation nurses and physical therapists. Attitude scores among rehabilitation professionals have been reported to not be significantly affected by practice setting, age, educational level, and duration of experience (5). Such positive attitudes among rehabilitation professionals were also documented by Benham (3), who investigated the attitudes of 619 occupational therapists.

Attitudes have been measured with various scales 1-29. However, the most commonly used attitude measure is Scale of Attitudes Toward Disabled Persons (SADP) (7, 9, 10). This scale has been reported to be a reliable, valid and a simple measure of attitudes (7, 9, 10, 11).

Attitudes towards people with disabilities are debatable and vary among health care professionals and within specialities 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 (4, 10, 12, 15). 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 professionals towards people with disabilities must be addressed. Therefore, the purpose of this study was to characterise the attitudes of Saudi Arabian health care professionals towards people with physical disabilities and to determine the relationships between attitude and age and working experience.

METHODS

Scale of Attitudes Towards Disabled Persons (SADP) was personally distributed among a sample of 130 Saudi health care professionals in four hospitals, including King Fasal Specialist Hospital and Research Centre, King Kalid University Hospital, King Fahad National Guard Hospital and Security Forces Hospital in Riyadh city. All participants worked with various types of disabilities including physical disabilities. The SADP is a reliable self-report scale which consists of 24 items, developed by Antonak (9). It provides a convenient and effective tool for evaluating attitudes towards people with disabilities. The 24 items of the SADP are expressed as statements to which participants respond on a Likert-type scale. The participants were asked to circle the appropriate number which best corresponds with how they felt about the statement. There were no right or wrong answers. There was no time limit. They were asked to respond to every statement. The participants were also asked to respond to the scale statements according to their personal reaction, but not to professional reaction. Any participant who did not respond to all of the scale statements was omitted from the study. The total scores ranged from 0, indicative of a very negative attitude, to 144, indicative of a very favourable attitude.

DATA ANALYSIS

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

Results

One hundred and one out of 130 participants responded to the SADP as instructed. They were 51 males and 50 females, with a mean age of 32.4 ± 6.4 years and working experience

of 8.0 ± 2.2 years. Fifty of them were physical therapists, 28 speech pathologists and 23 family medicine physicians. 60 had a BSc and 41 had either a Professional fellowship or MSc/PhD.

The participants had positive attitudes towards physically disabled persons with mean score 100 ± 17 . Chi Square test showed that there was no significant difference ($p < 0.08$) between males (97 ± 6.4) and females (105 ± 2.6). Attitudes among health professionals were not significantly different ($p < 0.40$) (Table 1).

Table 1: Attitudes of health care professionals toward person with disability (mean \pm standard deviation)

Physical therapists	98 ± 2.5
Speech pathologists	102 ± 3.4
Family medicine physicians	102 ± 3.5
p-value	0.4

Educational degrees showed no significant effect ($p < 0.45$) in the attitudes of participants towards people with disabilities (Table 2).

Table 2: Attitudes of health care professionals toward person with disability based on educational degrees (mean \pm standard deviation)

BSc./MD	99 ± 2.10
MSc.	109 ± 5.94
Ph.D/Professional fellowship	98 ± 3.66
p-value	0.45

Spearman's correlation coefficient showed a poor relationship between attitude scores and either age ($r = 0.03$) or experience ($r = 0.003$).

DISCUSSION

The present study showed that Saudi Arabian 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 people (16) 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 knowledge(24). 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 Antonak (25) state that persons who have less frequent and less intimate contact with people with disabilities are more likely to develop stereotypical negative attitudes.

Positive attitudes towards people with disability have also been reported among healthcare professionals worldwide (7, 10, 26, 27), which may indicate that culture and beliefs of different societies have little effect on attitudes towards people with disability. Dentists, occupational therapists and nurses were reported to express positive attitudes toward people with disabilities (7, 10, 26, 27). It seems that healthcare educational programmes in various universities, regardless of speciality, result in positive attitudes toward people with disabilities. It has been reported that teaching values, understanding the possible effect on patients and their families, and information about disability gained during academic experience in undergraduate programmes, affect attitudes (13). This could explain why health professionals have positive attitudes toward people with disabilities.

The participants' age was not a determining factor that affected attitudes in the present and other studies (14).(14) This may be attributed to the small age range of the participants.

Working experience 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 nurses (4). This may be due to the fact that the participants in this study had a limited range of working experience and they may have reached the plateau of a positive attitude towards people with disabilities during 8.0 ± 2.2 years of their work in the disability field.

There were no significant differences observed between men and women, in this study. A similar result was found in other studies (14). This could indicate, that the gender of general public or health care professionals has little influence on attitudes towards people with disabilities.

The positive attitudes of health professionals in this study, can be used to encourage non-disabled people, who have no contact or experience with disability, to treat a person with disability in a genuine, warm and accepting manner, welcoming interactions. This can be

worked out, as the voice of health professionals is usually acceptable and welcomed by society, if properly highlighted in the media. Kirchman (23). reported, that attitudes of health care professionals, both, mirrors and shapes societal attitudes towards people with disabilities. Public attitudes including health care professionals, influence authority policy and allocation of resources such as health care services (28). and access to education, transportation, governmental building and employment (29). These issues need to be investigated in Saudi Arabia.

A positive attitude reflects a desire to be nice, helpful and to treat a person with disability in an equal manner. Thus, these people may be perceived by persons with disability to be expressing negative attitudes, when they are really trying to express their own conceptualisation of a positive attitude. Therefore, these issues should be discussed thoroughly between health professionals, people with disability and their families.

The limitation of this study includes a small sample size, based on four hospitals in one city. There were only three healthcare disciplines involved in this study. Moreover, the majority of participants were physical therapists.

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REFERENCES

1. Roush SE, *Health professionals as contributors to attitudes toward persons with disabilities. A special communication*, Phys Ther 1986 Oct;66(10):1551-4.
2. 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 Aug;74(8):818-25
3. Gething L, *Nurse practitioners' and students' attitudes towards people with disabilities*, Aust J Adv Nurs 1992 Mar-May;9(3):25-30.

4. Brillhart BA, Jay H, Wyers ME, *Attitudes toward people with disabilities*. Rehabil Nurs 1990 Mar-Apr;15(2):80-2, 85.
5. White MJ, Olson RS, *Attitudes toward people with disabilities: a comparison of rehabilitation nurses, occupational therapists, and physical therapists*. Rehabil Nurs 1998;23(3):126-31
6. Biley AM. *A handicap of negative attitudes and lack of choice: Caring for inpatients with disabilities*. Professional Nurse 1994 September 786-788.
7. Benham P. *Attitudes of occupational therapy personnel toward persons with disabilities*. The American Journal of Occupational therapy 1988;42(5):305-311.
8. Gething L, Wheeler B, Cote J, Furnham A, Hudek-Knezevic J, Kumpf M, McKee K, Rola J, Sellick K, *An international validation of the interaction with disabled persons scale*. Int J Rehabil Res 1997 Jun;20(2):149-58.
9. Antonak R. *Development and psychometric analysis of the scale measure attitudes toward disabled persons*. Journal of Applied Rehabilitation Counseling 1982;13(2):22-8.
10. 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
11. Antonak R, Livneh H. *The measurement of attitudes toward disabilities*. Springfield, Illinois: Charles C. Thomas, 1988.
12. Oermann MH, Lindgren CL, *An educational program's effects on students' attitudes toward people with disabilities: a 1-year follow-up*. Rehabil Nurs 1995 Jan-Feb;20(1):6-10
13. Yuker H. *Variables that influence attitudes toward people with disabilities: Conclusions from the data*. Journal of Social Behavior and Personality 1994;9(5):3-22
14. 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.
15. Zaromatidis K, Papadaki A, Gilde A. *A cross-cultural comparison of attitudes toward person with disabilities: Greeks and Greek-Americans*. Psychol Rep 1999;84(3 pt 2):1189-96.

16. Wright B. *Developing constructive views of life with a disability*. Rehabilitation Literature 1980;41(11-12):274-9.
17. Pernice R, Iys K. *Interventions for attitude change toward people with disabilities: How successful are they?* International Journal of Rehabilitation Research 1996;19:171-4.
18. Timms M, McHugh S, O'Carroll 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. Christensen R. *Nursing educators' Attitudes toward and decision-making related to applicants with physical disabilities*. Journal of Nursing Education 1998;37(7):311-13.
27. Alsarheed M, Bedi R, Hunt NP. *Attitudes of dentists, working in Riyadh, toward people with a sensory impairment*. Special Care Dentist 2001;21(3):113-6.
28. Chamberlain M. *Changing attitudes to disability in hospital*. The Lancet 1998;351:771-2.
29. Walker S. *A comparison of the attitudes of students and non-students towards the disabled in Ghana*. International Journal Rehabilitation Research 1983;6(3):313-20.