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Attitudes of college students toward people with disabilities

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Attitudes of College Students toward People with Disabilities

**Thesis submitted to
The Graduate College of
Marshall University**

**In partial fulfillment of the
Requirements for the Degree of Psychology
Masters of Arts**

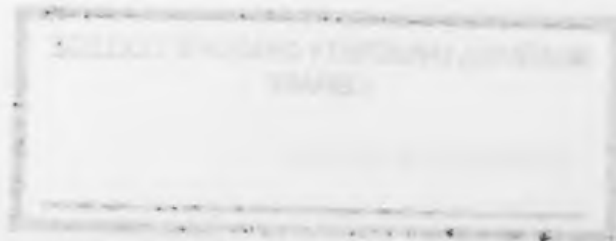
by

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South Charleston, West Virginia

October 21, 2000



Thesis

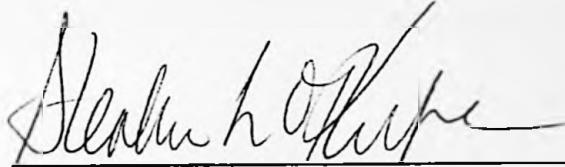
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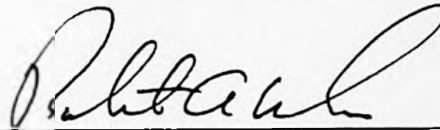
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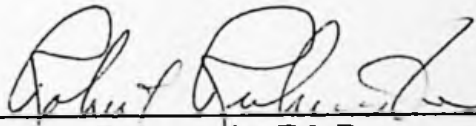
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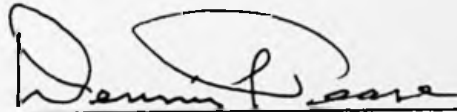
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This thesis was accepted on December 8 2000
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as meeting the research requirements for the master's degree.

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Dean of the Graduate College

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Running Head: Attitudes of College Students

Attitudes of College Students toward People with Disabilities

Doris M. King

Marshall University

2000

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Abstract

The purpose of this study is to explore the attitudes of college students toward individuals with disabilities. The instrument used was the Attitude Toward Disabled Persons Scale (ATDP), which was adapted to yield two additional scales. The words "mental illness" and "alcoholic" were substituted for "physically disabled". The test was administered to undergraduate and graduate students in counseling and psychology.

Analysis of Variance was performed. The results showed a significant gender effect with females having more positive attitudes toward individuals with physical disabilities and mental illnesses. Both groups, males and females, had more positive attitudes toward individuals with physical disabilities than alcoholism or mental illnesses. Level of education was not significant in either group.

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Attitudes of College Students Toward People With Disabilities

Stigma is a major concern for individuals with a disability. Prejudices and negative attitudes of society hinder timely recognition of crises and illnesses, early and adequate treatment, readjustment to community life, and recovery from illnesses (Hafner, 1970). When the clinician fails to address stigma, an opportunity to assist the client with developing important coping skills is missed. According to a study published in *Home Health Care Provider* in 1998, fifty percent of adults in the U.S. believe people with depression are simply lazy despite evidence that depression has biological causes and is a treatable mental illness (Thobaben, 1998). The *Journal of Community Psychology* published a study in 1981 comparing the attitudes of psychiatrists, psychologists and social workers towards ex-patients on five dimensions: perceived worth, dangerousness, effectiveness, comprehensibility, and social desirability. Analysis of the questionnaire responses revealed not only that professionals collectively held a negative attitude, but that significant group dimension and interaction effects existed. Psychologists displayed the most benign attitude, followed by social workers. Psychiatrists' perceptions were generally the most negative. While each group evidenced significant inconsistency in its dimensional responses, the rejection factor was the most discriminative (Calicchia, 1981). According to a study published in the *Journal of Social Psychology*, a candidate for public office may lose votes if it is known that he or she has been consulting a psychotherapist (Boor, 1981). Social survey reports and other data

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point to the conclusion that the public tends to declare negative (rejecting) valuations on persons diagnosed as mentally ill. However, the public tends to be more tolerant of deviant conduct when it is not associated with mental illness (Sarbin, 1971). More than 40 million people in the United States have psychiatric impairments; and of that number, 4 to 5 million adults are considered seriously mentally ill. Stigma can affect people with mental illness in two ways: externally, through rejection by relatives, friends, neighbors, and employers or internally, in aggravating feelings of rejection, loneliness, and depression. Persons with mental illness are more likely to be unemployed, have less income, experience a diminished sense of self, and have fewer social supports (O'Donnell, Stevenson, Kalb, 1999). Time and again the alcoholic has been characterized as an orally dependent, immature individual. Alcoholism carries such social stigma that the condition is often considered unmentionable. Great efforts are made to conceal or deny its existence.

Earl Freed investigated the attitudes of 303 college students and 521 psychiatric hospital staff members toward alcoholism, mental illness, and physical disability. The Attitude Toward Disabled Person Scale was adapted to yield two additional scales probing alcoholism and mental illness. Statistically significant differences were not found between the mean scores of college students and the hospital personnel on the scales. Both groups were significantly more accepting of physical disability than of the other two illnesses. The students were slightly, and

the hospital personnel were significantly, more accepting of alcoholics than of mentally ill people. The means of the scores of both groups on both scales were still within the non-accepting range (Freed, 1964). In Freed's study, each sample was instructed to anonymously complete one of three forms of the adapted Attitudes Toward Disabled Persons Scale. Some of the individuals received a test concerning alcoholism, while others received a test concerning mental illness or physical disability. The purpose of the current study is to explore the attitudes of college students toward individuals with mental illness, physical disability and alcoholism. Each participant in the study will be given the same test about all three variables.

Ho 1: There will be a significant gender effect with females having more positive attitudes than males toward individuals with disabilities.

Ha 1: There will not be a significant gender effect with females having more positive attitudes than males toward individuals with disabilities.

Ho 2: There will be a significant education effect with the more educated individuals having more positive attitudes toward individuals with disabilities.

Ha 2: There will not be a significant education effect with the more educated individual having more positive attitudes toward individuals with disabilities.

Ho 3: There will be a significant disability effect with individuals having more positive attitudes toward individuals with physical disabilities.

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than mental illnesses or alcoholism.

Ha 3: There will not be a significant disability effect with individuals having more positive attitudes toward individuals with physical disabilities than mental illnesses or alcoholism.

Method

Subjects

Seventy-two college students were instructed to anonymously complete an adapted form of the Attitudes Toward Disabled Persons Scale. Of the 72 college students participating in the study, 36 were undergraduate psychology students enrolled in classes at West Virginia State College. The remaining 36 participants were psychology and counseling students enrolled in classes at Marshall University Graduate College. The participants in each group were equally divided between males and females.

Procedures

For this study, subjects were classified as undergraduate female, undergraduate male, graduate female and graduate male. A letter describing the study and subsequent use of test responses was provided to the Chairperson of the Psychology Department at West Virginia State College. The study was discussed in person with the Chairman of the Psychology Department at Marshall University Graduate College, South Charleston campus.

Instruments

An approach using construct validity was selected as being the most appropriate for validation of the original ATDP. The scale was then examined in terms of the interrelationships that might be predicted to exist between the ATDP and other measures of behavior. The test battery included a scale to measure job satisfaction, Weiss Plutchik Anxiety Scale, the Social Desirability Scale, and Vocabulary Test. Employment records provided supervisory rating of productivity, attendance, punctuality and medical history. The individuals were requested to indicate the extent to which they had close personal contact with disabled persons. Scores on the ATDP were found to be positively related to satisfactory work performance and job satisfaction. A correlation of .23 between the ATDP and intelligence was obtained. Females tend to have more accepting attitudes than males. A group of 76 physically normal college students showed a test-retest reliability coefficient of .70 after a four month period (Yuker, 1964).

The Attitudes Toward Disabled Persons Scale (ATDP) is a likert-type instrument on which subjects respond to 20 statements by expressing the level of their agreement or disagreement on a six point scale. Each statement suggests that disabled persons are either the same as physically normal people, or that they are somewhat different (Yuker, 1964). An alternate form of the ATDP was prepared by substituting the word "mental illness" for "physically disabled", and "alcoholic" for "physically disabled". The alternate form consists of 60 statements. The range of possible scores is 60 to 120, with high scores representing an accepting or more

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positive attitude, and relative low scores reflecting a negative and rejecting attitude.

The author personally administered and scored the alternate ATDP.

The author used a split half reliability in which another alternate form of the ATDP was used. The alternate form began with mental illness, alcoholism and physical disability.

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Analysis of Data

Data was analyzed by Analysis of Variance, 2 x 2, factorial design to determine if gender and education level affected attitudes toward disabled persons. The study was conducted at a .05 level of significance.

There is a significant gender effect with females having a more positive attitude toward individuals with mental disabilities. ($F, 3, 71 = 7.506$, p . less than .05), which partially supports Hypothesis I that females would be more positive toward individuals with disabilities. Table 1 shows the means and standard deviations of males and females toward individuals with mental disabilities.

Females had a significantly more positive attitude toward individuals with physical disabilities. ($F, 3, 71 = 20.26$, p . less than .05), which partially supports Hypothesis I that females had more positive attitudes toward individuals with disabilities. Table 2 shows the means and standard deviations of males and females toward individuals with physical disabilities.

There was no significant gender difference in attitudes toward individuals with alcoholism. ($F, 3, 71 = 3.174$, p . less than .05). Therefore, Hypothesis I was not supported that females had more positive attitudes toward individuals with alcoholism. Table 3 shows the means and standard deviations of males and females toward individuals with alcoholism.

Education, interaction of education and gender was not significant on physical disability, mental illness or alcoholism. Therefore, Hypothesis II was rejected.

In order to answer the third Hypothesis, a 2x2 repeated measures was used in

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which the group was nested. ($F, 3, 71 = 20.257, p. \text{ less than } .05$). This supports Hypothesis III where females and males were significantly more positive toward individuals with a physical disability than mental illness or alcoholism. Table 4 shows that both males and females has more positive attitudes towards physical disabilities than mental illnesses or alcoholism.

Discussion

The ATDP was developed in the late 1950's as an effort to measure attitudes of disabled persons toward themselves and attitudes of non-disabled persons toward the disabled. Earl Freed investigated the attitudes of individuals toward alcoholism, mental illness and physical disabilities by adapting the ATDP to yield two additional scales. Each sample group was instructed to complete one of three forms of the ATDP. The attitudes of 303 college students and 521 psychiatric hospital staff members toward alcoholism, mental illness, and physical disabilities were assessed in Earl Freed's study. Statistically significant differences were not found between the mean scores of the college students and the hospital personnel on the scales. Both groups were significantly more accepting of physical disabilities than the other two illnesses. The students were slightly, and the hospital personnel significantly, more accepting of individuals with alcoholism than of mentally ill people, but the mean scores of both groups on both scales were still within the non-accepting range (Freed, E. 1965).

The purpose of this study was to attempt to answer the question: Is there a gender and education effect concerning attitudes toward individuals with disabilities? To try to answer this question an ANOVA procedure was conducted using an adapted form of the Attitudes Toward Disabled Persons Scale. In this study, each group received the one test with all three variables.

The ANOVA procedure shows a significant difference between male and female attitudes toward individuals with physical disabilities and individuals with mental

illnesses. Females were more accepting of individuals with physical disabilities and mental illnesses. Education, gender and education interaction did not show a significant effect. Undergraduate females were the most accepting towards all three groups, although, it was not significant at .05 level. Both males and females were significantly more accepting of individuals with physical disabilities than mental illnesses or alcoholism. Overall, graduate males were the least accepting toward all three groups. It was not at a significant level. A split half reliability was utilized changing the order of the three groups. According to a study published by the American Psychological Association, women had consistently more positive help seeking attitudes than men (Fischer, E. & Turner, J. 1969).

Certain limitations exist in this study concerning the exploration of attitudes of college students toward individuals with disabilities. There was not much of an educational difference between graduate and undergraduate students. It was a small sample size with well-educated backgrounds. Individuals taking this test could present themselves in a more favorable light. Age was a confounding variable with educational level. Future studies should use age as an independent variable and individual subjects with less than a high school education. Gender differences should be further explored.

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Author Note

I would like to thank the professors on my thesis committee, Dr. Stephen O'Keefe for his continued guidance, patience and understanding; Dr. Robert Wilson for his masterful statistical ability and Dr. Robert Rubenstein for his generosity and professional knowledge.

I would like to thank Dr. Fred Krieg and Dr. Del Lawhon for their continued guidance and expertise. Also, without Dennis Pease, Vicki Pleasant and Frankie Warfield's support and encouragement none of this would have been possible.

Table 1**Table of Means and Standard Deviations****Dependent Variable: Mental**

Gender and Education		Mean	Standard Deviation
Males	Undergraduates	70.22	9.50
Males	Graduates	70.11	13.09
Total Males		70.17	11.27
Females	Undergraduates	81.50	16.85
Females	Graduates	76.56	14.41
Total Females		9.03	15.66
Total	Undergraduates	75.86	14.64
Total	Graduates	73.33	13.96
Total Undergraduates and Graduates		74.60	14.25

(N = 36 undergraduates and 36 graduates)

Table 2**Table of Means and Standard Deviations****Dependent Variable: Physical**

<u>Gender and Education</u>		<u>Mean</u>	<u>Standard Deviation</u>
Males	Undergraduates	80.39	12.51
Males	Graduates	77.61	10.10
	Total Males	79.00	11.30
Females	Undergraduates	93.94	12.42
Females	Graduates	91.83	16.51
	Total Females	92.89	14.44
Total	Undergraduates	87.17	14.08
Total	Graduates	84.72	15.30
	Total Undergraduates and Graduates	85.94	14.65

Table 3**Table of Means and Standard Deviations****Dependent Variable: Alcohol**

Gender	Education	Mean	Standard Deviation
Males	Undergraduates	74.17	12.99
Males	Graduates	69.17	12.33
	Total Males	71.67	12.73
Females	Undergraduates	81.39	16.08
Females	Graduates	73.78	14.65
	Total Females	77.58	15.65
Total	Undergraduates	77.78	14.87
Total	Graduates	71.47	13.55
	Total Undergraduates and Graduates	74.62	14.47

Table 4

Table of Means and Standard Deviations

<u>Number</u>	<u>Mean</u>	<u>Standard Deviation</u>
Physical 72	85.94	14.65
Mental 72	74.60	14.26
Alcohol 72	74.62	14.47

APPENDIX A: A letter to the Agency

Route 2, Box 357
Charleston, WV 25314
May 1, 2000

Dr. James Spencer, Ph.D.
Chairperson of Psychology Department
West Virginia State College
P.O. Box 1000
Campus 170
Institute, WV 25122

Dear Dr. Spencer:

In order to complete the requirements for a Master of Arts Degree, a research project that results in a thesis must be completed. I would like to conduct this research at West Virginia State College by administering an attitude test to undergraduates enrolled in psychology classes.

Stigma is a major concern for individuals with disabilities. The purpose of this study is to explore attitudes of college students toward individuals with mental illness, physical disabilities and alcohol addiction. The Attitudes Toward Disabled Persons Scale was adapted to yield two additional scales probing alcoholism and mental illness. The ATDP is a likert-type scale in that subjects respond to 20 statements by expressing their degree of agreement or disagreement on a six point scale. The alternate form consists of 60 statements. Each individual will be instructed to anonymously complete an adapted form of the ATDP.

Thank you for your assistance in this endeavor.

Respectfully,

Doris M. King

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APPENDIX B: Inform Consent

I voluntarily agree to fill out an adapted form of the Attitudes Toward Disabled Persons Scale. I give Doris King permission to use my answers anonymously to compile statistics for research and evaluation. I understand that the purpose of this study is to meet the requirements for a master thesis and explore attitudes of college students towards individuals with mental illness, physical disabilities and addicted to alcohol. I understand that neither my name nor any identifying information about me from this test will be released to anyone without a signed release of information signed by myself. I understand that I can choose not to participate at any time.

Participant

Date

APPENDIX C: Adapted ATDP-O

Mark each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write +1, + 2, + 3: or -1, -2, -3: depending on how you feel in each case.

+3 I Agree Very Much
+2 I Agree Pretty Much
+1 I Agree A Little

-1 I Disagree A Little
-2 I Disagree Pretty Much
-3 I Disagree Very Much

- ___ 1. Parents of physically disabled children should be less strict than other parents.
- ___ 2. Physically disabled persons are just as intelligent as nondisabled ones.
- ___ 3. Physically disabled people are usually easier to get along with than non-disabled people.
- ___ 4. Most physically disabled people feel sorry for themselves.
- ___ 5. Physically disabled people are the same as anyone else.
- ___ 6. There should not be special schools for physically disabled children.
- ___ 7. It would be best for physically disabled persons to live and work in special communities.
- ___ 8. It is up to the government to take care of physically disabled persons.
- ___ 9. Most physically disabled people worry a great deal.
- ___ 10. Physically disabled people should not be expected to meet the same standard as non-disabled people.
- ___ 11. Physically disabled people are as happy as non-disabled ones.
- ___ 12. Severely physically disabled people are no harder to get along with than those with minor disabilities.
- ___ 13. It is almost impossible for a physically disabled person to lead a normal life.
- ___ 14. You should not expect too much from physically disabled people.
- ___ 15. Physically disabled people tend to keep to themselves much of the time.
- ___ 16. Physically disabled people are more easily upset than non-disabled people.
- ___ 17. Physically disabled people cannot have a normal social life.
- ___ 18. Most physically disabled people feel that they are not as good as other people.
- ___ 19. You have to be careful of what you say when you are with physically disabled people.
- ___ 20. Physically disabled people are often grouchy.
- ___ 21. Parents of mentally ill children should be less strict than other parents.
- ___ 22. Mentally ill persons are just as intelligent as non-disabled ones.
- ___ 23. Mentally ill people are usually easier to get along with than other people.
- ___ 24. Most mentally ill people feel sorry for themselves.

- 25. Mentally ill people are the same as everyone else.
- 26. There should not be special schools for mentally ill children.
- 27. It would be best for mentally ill people to live and work in special communities.
- 28. It is up to the government to take care of mentally ill persons.
- 29. Most mentally ill people worry a great deal.
- 30. Mentally ill people should not expect to meet the same standards as non-disabled ones.
- 31. Mentally ill people are as happy as non-disabled ones.
- 32. Severely mentally disabled people are no harder to get along with than those with minor disabilities.
- 33. It is impossible for a mentally ill person to lead a normal life.
- 34. You should not expect too much from mentally ill people.
- 35. Mentally ill people tend to keep to themselves much of the time.
- 36. Mentally ill people are more easily upset than non-disabled people.
- 37. Mentally ill people cannot have a normal social life.
- 38. Mentally ill people feel that they are not as good as other people.
- 39. You have to be careful of what you say when you are with mentally ill people.
- 40. Mentally ill people are often grouchy.
- 41. Parents of alcoholic children should be less strict than other parents.
- 42. Alcoholic persons are just as intelligent as non-disabled persons.
- 43. Alcoholic people are usually easier to get along with than other people.
- 44. Most alcoholic people feel sorry for themselves.
- 45. Alcoholic people are the same as everyone else.
- 46. There should not be special schools for alcoholic children.
- 47. It would be best for alcoholic persons to live and work in special communities
- 48. It is up to the government to take care of alcoholic persons.
- 49. Most alcoholic people worry a great deal.
- 50. Alcoholic people should not expected to meet the same standards as non-disabled people.
- 51. Alcoholic people are as happy as non- disabled ones.
- 52. Severely alcoholic people are no harder to get along with than those with minor disabilities.
- 53. It is almost impossible for an alcoholic person to lead a normal life.
- 54. You should not expect too much from alcoholic people.
- 55. Alcoholic people tend to keep to themselves much of the time.
- 56. Alcoholic people are more easily upset than non-disabled people.
- 57. Alcoholic persons cannot have a normal social life.
- 58. Most alcoholic people feel that they are not as good as other people.
- 59. You have to be careful of what you say when you are with alcoholic people.
- 60. Alcoholic people are often grouchy.

APPENDIX D: Adapted ATDP-O

Mark each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write +1, +2, +3: or -1, -2, -3: depending on how you feel in each case.

+3 I Agree Very Much
+2 I Agree Pretty Much
+1 I Agree A Little

-1 I Disagree A Little
-2 I Disagree Pretty Much
-3 I Disagree Very Much

- ___ 1. Parents of mentally ill children should be less strict than other parents.
- ___ 2. Mentally ill persons are just as intelligent as non-disabled ones.
- ___ 3. Mentally ill people are usually easier to get along with than other people.
- ___ 4. Most mentally ill people feel sorry for themselves.
- ___ 5. Mentally ill people are the same as everyone else.
- ___ 6. There should not be special schools for mentally ill children.
- ___ 7. It would be best for mentally ill people to live and work in special communities.
- ___ 8. It is up to the government to take care of mentally ill persons.
- ___ 9. Most mentally ill people worry a great deal.
- ___ 10. Mentally ill people should not expect to meet the same standards as non-disabled ones.
- ___ 11. Mentally ill people are as happy as non-disabled ones.
- ___ 12. Severely mentally disabled people are no harder to get along with than those with minor disabilities.
- ___ 13. It is impossible for a mentally ill person to lead a normal life.
- ___ 14. You should not expect too much from mentally ill people.
- ___ 15. Mentally ill people tend to keep to themselves much of the time.
- ___ 16. Mentally ill people are more easily upset than non-disabled people.
- ___ 17. Mentally ill people cannot have a normal social life.
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- ___ 22. Alcoholic persons are just as intelligent as non-disabled persons.
- ___ 23. Alcoholic people are usually easier to get along with than other people.
- ___ 24. Most alcoholic people feel sorry for themselves.
- ___ 25. Alcoholic people are the same as everyone else.
- ___ 26. There should not be special schools for alcoholic children.
- ___ 27. It would be best for alcoholic persons to live and work in special communities.

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- _____ 28. It is up to the government to take care of alcoholic persons.
- _____ 29. Most alcoholic people worry a great deal.
- _____ 30. Alcoholic people should not be expected to meet the same standards as non-disabled people.
- _____ 31. Alcoholic people are as happy as non-disabled ones.
- _____ 32. Severely alcoholic people are no harder to get along with than those with minor disabilities.
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