



Measuring public discomfort at meeting people with disabilities



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ABSTRACT

The discomfort reported by the general public at the prospect of personal contact with marginalised groups is an expression of the stigma they experience. This has been widely studied in relation to ethnic minorities and immigrants but less so for persons with disabilities. A national survey with a representative sample of over 1100 Irish adults provided an opportunity to examine reported discomfort with persons who had different impairments, including mental health conditions, with four other minority groups. Moreover, the personal and situational variables associated with expressions of discomfort were identified.

Respondents were most comfortable having persons with physical and sensorial disabilities living in their neighbourhood or in their workplace but less so for persons with intellectual disabilities and even less for people with mental health conditions. They were much less comfortable with the four other social groups: gay, lesbian or bisexual people; Eastern European migrant workers; black and ethnic minority groups and least of all, travellers. Moreover, a factor analysis confirmed that the scores given to the impaired groups were significantly correlated with each other but less so with the other four social groupings, although these were significantly inter-correlated among themselves. Respondents who were more comfortable with both sets of minority groups tended to have more social connections in their personal lives and to reside in towns or villages rather than cities. They also expressed more positive attitudes to the inclusion of persons with disabilities in Irish society.

The gradient in levels of public discomfort across minority groups may provide a sensitive indicator of the differential stigma experienced by persons with impairments within societies but there remains the possibility that an alliance with other minority groups would also help to promote more positive attitudes and reduce their wider social exclusion.

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1. Introduction

People with disabilities are often marginalised both within rich and poor countries. They face discrimination and exclusion from schools, health services and employment for example (WHO & World Bank, 2011). In more affluent countries, segregated services have developed specifically to meet their needs and often these have been further separated into

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particular impairment groupings, such as schools for the visually impaired or the intellectually disabled. This specialisation, although for good intentions, has compounded the lack of contact children and adults with disabilities have with their non-disabled peers (Hannon, 2006). In poorer countries, specialised provision is rarely available. Hence their exclusion from mainstream services often compounds their disability while maintaining their marginalisation within societies (Eide & Ingstad, 2011).

The UN Convention on the Rights of Persons with Disabilities (2007) is the latest international effort to tackle their social exclusion. The Convention has been ratified by over 150 countries. One of its main principles is to ensure the 'full and effective participation and inclusion in society' of persons with disabilities which the Convention defines as 'those who have long-term physical, mental, intellectual or sensory impairments'. The focus of the Convention is on the legal and administrative procedures that governments should undertake to reduce if not eliminate discrimination on the grounds of a person's disability. However these actions alone will not necessarily change societal customs and practices particularly at a personal level within families and local communities (Sartorius, 2006).

A fairly extensive literature has documented the stigmatised attitudes and prejudicial perceptions held by societies globally towards persons with disabilities and in particular the desire to avoid personal contact with them (Scior, 2012; Thompson, Fisher, Purcal, Deeming, & Sawrikar, 2011). This avoidance can also extend to others closely associated with the stigmatised group such as family members (Ali, Hassiotis, Strydom, & King, 2012). Similar reactions are found with other groupings which deviate from the dominant norms of society on the basis of ethnicity, religion and sexual orientation (Parillo & Donoghue, 2005). Allport's (1954) seminal work on intergroup prejudice identified the importance of comfortable contact between the majority group and the 'outgroup' as a means of reducing prejudicial attitudes and behaviours. Subsequently, an extensive body of research has clearly demonstrated the impact that increased comfort through interpersonal contact has on attitudinal change (Al Ramiah & Hewstone, 2013; Pettigrew & Tropp, 2006). Although disability has not featured strongly in this body of research, various studies have found that prior contact with disabled persons is associated with more positive attitudes (Seewooruttun & Scior, 2014). Moreover the more commonly given reasons for avoiding contact is because of the personal discomfort in meeting a person with disability, such as feeling embarrassed, anxious, wary and insecure (Morin, Rivard, Crocker, Boursier, & Caron, 2013; Thompson et al., 2011).

In addition to various small-scale studies (e.g. Ouellette-Kuntz, Burge, Brown, & Arsenault, 2010), several national surveys have included a measure of public discomfort towards persons with disabilities. For example in 2001 a comparison of attitudes to disabled persons was undertaken using representative samples of over 1000 respondents in each of the 15 member states of the European Union (European Opinion Research Group, 2001). This documented the variation in people's ease at being in the company of 'persons with disabilities' using a four-point rating scale from 'completely at ease' to 'very uneasy'. Highest 'at ease' scores were reported for Denmark, United Kingdom and Sweden with Germany and Greece having the lowest scores. Overall those who felt least at ease were students, men, the 15–24 age-group, the unemployed and the lowest earners. However, no details were given on the relative contribution which these characteristics made to ratings of ease nor if respondents had prior contact with people who were disabled.

A national survey in the United Kingdom with a representative sample of around 1200 respondents (Staniland, 2011), asked them to rate how comfortable they would feel if they were to interact with people with various impairments in a range of different situations including as neighbours. A four-point scale from 'very uncomfortable' to 'very comfortable' was provided. Generally people were more comfortable having contact with people with physical and sensory impairments than with those who had a learning (intellectual) disability and 'mental health conditions'. Men, older persons (65 years and over) and those under 24, those with low educational attainment and lowest income tended to feel more uncomfortable across various situations although the pattern varied across impairment groups. Again no further analysis was undertaken to examine the inter-relationships among the predictor variables.

A recent national survey in the Republic of Ireland (National Disability Authority, 2011) provided an opportunity to further explore public discomfort in relation to people with different impairments. This overcame the shortcomings in previous research by using a potentially more sensitive and robust measure of comfort which contrasted ratings of comfort to persons with various disabling conditions in relation to other minority groups such as immigrants. Respondent's prior contact with persons with disabilities was also ascertained. A measure was also included of respondent's level of social engagement with family, friends and acquaintances as this could also be an important determinant of their comfort levels in meeting people for whom the term 'stranger' is especially apt. To date though this characteristic of people has not been widely explored in relation to their comfort at meeting people with disabilities which has tended to focus on situational rather than personal factors (Akrami, Ekehammar, Bergh, Dahlstrand, & Malmsten, 2009). Moreover, Werner, Corrigan, Ditchman, and Sokol (2012) have noted the dearth of adequate measures for examining the stigma of disability and in particular the dimension of discomfort (Morin et al., 2013).

A secondary analysis of the Irish survey was undertaken with the following aims:

- To examine the psychometric properties of a measure of discomfort towards persons with disabilities.
- To contrast public discomfort towards persons who had different impairment conditions with other marginalised groups in Irish society.

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