



Attitudes towards disability in an undergraduate nursing curriculum: A literature review

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Accepted 22 August 2006

KEYWORDS

Nursing;
Education;
Disability;
Attitudes

Summary In the process of introducing a new disability unit into an undergraduate nursing curriculum in a New Zealand educational setting, the opportunity arose to conduct a small study comparing the attitudes of student nurses towards people with disabilities. This paper discusses the literature reviewed, which formed the basis for the study. A range of perspectives and research was identified that explored societal and nurses' attitudes, disability studies in undergraduate nursing curricula, the impact of nurses' attitudes on patient care, and interventions for changing those attitudes. Effective nursing care can be severely compromised through negative attitudes, and concerns are expressed at the lack of attention given to this issue in nursing curricula generally. The literature showed that combining educational approaches with opportunities for student nurses to interact with disabled people provides the most effective means for student nurses to develop positive attitudes towards disabled people. The goal for nurse educators is to ensure the inclusion of disability studies as a core component in undergraduate nursing education.
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A literature review

In the process of revising a New Zealand undergraduate nursing curriculum, a new unit addressing disability issues was introduced to ensure a focused rather than fragmented approach to disability issues in the student nurses' education. During implementation of the revised curriculum, an opportunity was identified to compare the attitudes of two cohorts of nursing students towards disabled people in a

small research project. Relevant literature was identified through manual library searches plus exploration of EBSCO Host and CINAHL databases. In order to capture previous studies that had used the attitude questionnaire proposed for the current study, the literature was reviewed from 1975 onwards. A wide variety of keywords were utilized to include the various aspects of nursing, disability, education, attitudes and curriculum change inherent in this study. The literature reviewed showed diverse approaches to facilitating attitudinal change and particular implications for nurse educators. The literature is summarized in relation to societal

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and nurses' attitudes, the impact of negative attitudes on nursing care, disability studies in nursing curricula and interventions for changing attitudes. The research results will be summarized in a separate report.

The scheduled closure in 2006 of the Kimberley Centre at Levin will mean the end of large institutions for intellectually disabled people in this country. All children and adults with physical and/or intellectual disabilities will be supported and cared for in our communities rather than institutions (Hunt, 2000). One in five New Zealanders identify themselves as 'disabled' which equates to large numbers of people requiring comprehensive support and health services in the future (Statistics NZ, 2003). Society provides the greatest barriers to the quality of life for disabled people in the community. These barriers may be physical such as access, financial, or attitudinal with ongoing discrimination and prejudice shown to people who are disabled (Ministry of Health [MOH] 2001).

Nurses may reflect societal attitudes in their care by demonstrating avoidance, judgment and negative comments about disabled people. The medical model of care, where curing the condition is the focus, continues to guide the delivery of nursing care in many situations. This approach sustains the constraining and negative interactions with health professionals that continue to be experienced by disabled people. Currently, a social model of care is supported which, while not perfect, recognizes the individuality of disabled people and their rights to participate in and make choices regarding their health care and lifestyle (Beatson, 2001).

Societal and nurses' attitudes

The attitude of one person towards another impacts upon the effectiveness of any interactions between them. This interaction is most significant in the provision of health care, where open communication is essential for safe practice to occur. Society's attitudes towards and perceptions of disabled people are influenced by the images, language and information provided in the media (Barnes et al., 1999; Wishart and Johnston, 1990). The language used is very important as it says a lot about the people and organisations that use it, the value of disabled people and their place in the community (Millen, 1999). Attitudinal barriers, particularly discrimination, are identified as one of the significant disabling factors in NZ society (MOH, 2001). The attitudes of society may be reflected in the attitudes and care of health professionals

towards people who are different. Attitudes are developed across an individual's lifetime and can reflect their environment, the perceptions of significant others, and personal experiences in life. Student nurses thus enter the profession with a predetermined set of values and beliefs that influence their attitudes to others (Brillhart et al., 1990). The negative attitudes of parents, teachers and friends can also have a negative effect on a developing child's attitude (Royal and Roberts, 1987). Previous experiences and contact with disabled people, ethnicity and family values contribute to attitude development (Brillhart et al., 1990; Westbrook et al., 1993). A number of studies have identified prior experience with disabled people in a social or work environment as positively affecting student nurses' attitudes to disabled people (Gething, 1991; Lindgren and Oermann, 1993; Slevin, 1995). A study by Tervo (2004) considered the attitude and comfort of various health disciplines towards disabled people and found "Nursing students had the least positive attitudes to people with a disability as a group" (p. 913).

The impact of negative attitudes on nursing care

People living in the community with learning disabilities, expressed their dissatisfaction with hospital care in a study by Hart (1998). Hart suggested a need to improve health service provision in this area and specifically in the area of communication. Nurses working in a medical model of care disempower and at times de-humanise their patients according to George (1992). Citing numerous examples from hospital and community settings, George found discrimination and negativity towards disabled people was clearly reflected in the attitudes, approaches and comments of health professionals encountered by disabled people during times, when positive support and care was needed. Nurses' attribution of blame is also a significant factor with possible consequences on ensuing care. Sharu (1996) found that nurses made judgments about maternal control and blame in relation to the type of disability with which a child was born.

The impact of nurses' attitudes occurs across the spectrum of ages. The personal experiences of disabled people and parents of disabled children reinforce the belief that nurses still relate disability to illness and the need to 'rehabilitate', while demonstrating patronising and disempowering practices (Bowes, 1998; Heaton, 2002; Hershey, 1999; Shaw, 1995). From an Australian perspective, Parsons (1993) suggests stereotyping, myths and

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