

A comparative study on the level of the social distance of the students of psychology and physical education in relation to their attitudes towards people with disabilities (An example from Albania)

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Abstract

The aim of the study was to identify the level of social distance as far as concerned the attitudes of the students of psychology and physical education in the first year at “Marin Barleti” University based in Tirana towards people with disabilities. The methodology used for this study is based on a sample of 200 students, for the purposes of the study it was used a questionnaire in the field of psychology the Person First Disability Language Scale .For the data analysis it was implemented the Statistical Package for Social Sciences. As conclusion we can say that exists a statistically significant difference between the field of study and social distance as far as concerned the attitudes of the students towards people with disabilities.

Keywords: social distance; students; people with disabilities; physical disorders; psychological disorders

1. Introduction

Disability is part of the human condition. Most extended families have a disabled member and many non-disabled people take responsibility for supporting and caring for their relatives and friends with disabilities. The medical model and the social model are often presented as dichotomous, but disability should be viewed neither as purely medical nor as purely social: persons with disabilities can often experience problems arising from their health condition. A balanced approach is needed, giving appropriate weight to the different aspects of disability. Disability is the umbrella term for impairments, activity limitations, and participation restrictions, referring to the negative aspects of the interaction between an individual (with a health condition) Studies have shown that a lot of normal people which means without disabilities are more predisposed to prejudice people with disabilities, so they pretend to keep a social distance from them. Social distance is defined as the perceived distance, or perceived dimension of closeness between interacting individuals or groups (Dufwenberg and Muren, 2006, p.7). (Akerlof, 1997, p.1) points out that social distance needs to be incorporated into economic modeling to explain individual decisions bearing social consequences .Empirical studies show that social distance can greatly affect economic outcomes (Rao and Schmidt, 1998; Eckel and Wilson, 2002; Cox and Deck, 2005; Charness, Haruvy and Sonsino, 2007, p.1). Disability has been a medical matter for as long as people have been attempting to escape the stigma of the death, disease. In the theory of personality, (Allport, 1935, p, 10) mentioned that there are two components to attitudes: thoughts and feelings. Attitudes and behaviours are correlated, but they are not always the same: a person can think and feel in one way, but act in another (even opposite) way. Attitudes can be either positive or negative, and even when they are positive, there can be a disjunction between the way people

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without disability interpret ‘positive’ and the way it is interpreted by people with disability. Vygotsky in his theory of social constructionist on disabilities stressed that “disability is a social aberration” without refusing the primateship of biology. This aberration causes changes and disturbances in social behaviour to all children. According to Vygotsky’s view is very important for us as professionals to distinguish between primary disability (organic impairment), secondary and tertiary disability (cultural distortions of socially conditioned, higher mental functions) .Primary disorders (i.e. visual and hearing, language and speech-related, motor and CNS-related impairment) lead to the child’s “exclusion” from the sociocultural, traditional and educational environment – in turn causing secondary (socio-cultural) disability. Due to primary disorders, the child displays a distorted connection to culture as a source for the development of higher mental functions (Vygotsky 1993, p.9-11).According to Vygotsky, secondary developmental complications – as the social and psychological consequences of primary disabilities – are less resistant to and more subject to elimination. Secondary (socio-cultural) disability may be prevented and eliminated by medical and educational means. According to Link and Phelan, when people are labelled and linked to negative stereotypes, a rationale is constructed for devaluing and excluding them. Social distancing refers to the construction of a social barrier to keep an individual with a disability at a comfortable physical or emotional distance (Albrecht, Walker, & Levy, 1982; Dietrich et al., 2004, p.9).

2. Methodology

2.1 .Objective

This study aims to respond to four main questions as below:

1-Is there any difference in the level of social distance as far as concerned the attitudes of the students studying psychology field and those studying physical education towards people with disabilities?

2-Is there any difference in the level of social distance as far as concerned the attitudes of the students studying for psychology field and those studying physical education towards people suffering from substance use disorders?

3-Is there any difference in the level of social distance with regard to the attitudes of the students studying psychology field and those studying physical education towards people suffering from physical disorders?

4-Is there any difference in the level of social distance with respect to the attitudes of the students studying psychology field and those studying physical education towards people suffering from psychological disorders?

2.2 Participants

The population of this study was composed of the students studying at the “Marin Barleti“ University in Tirana. The Age sample varies from 19 to 23 years old.

The total population/sample of this study is 400 students. In order to determine the sample size, we applied one of the formulas of Determining Sample. This formula was used for the first time by Yamane (1967:886) who provides a simplified formula to calculate sample sizes. A 95% confidence level and P = 0.05.

$$n = \frac{N}{1 + N(e)^2}$$

Where n is the sample size, N is the population size, and e is the level of precision which in this case is $P= 0.05$, from the calculation of the data the number of sample size was $n=200$ sampled. Through this formula came out the sample of this study which consists of 200 students in the first year of their studies, specifically 100 students studying psychology and 100 studying physical education at the 'Marin Barleti' University in Tirana.

2.3 Instrument

Person-First Disability Language Scale "(PFDS) was used for the data collection of the study. The questionnaire was created by (Antonak and Livneh 1988, p.31). The questionnaire consists of 39 multiple choice questions. PFDS test was based on Bogardus' test which is the most popular questionnaire widely used in the field of psychology for assessing the level of social distance with regard to the attitudes of the students towards people with disabilities. (Antonak and Livneh 1988, p.31) suggested that the DSDS be modified to include standardized terminology, deletion of uncommon disabilities and the inclusion of common disabilities. The current authors adopted the DSDS and made the following modifications: (a) the addition of new disabilities b) the addition of current disabilities (e.g., multiple sclerosis, HIV/AIDS); (c) the deletion of uncommon disabilities (e.g., (d) the removal Likert scale category 9 "Would Put to Death," and, (e) the utilization "person first "disability language (e.g., refer to client as "a person with schizophrenia" instead of "a schizophrenic client").

2.4 Procedure

The type of this sample was based on the convenience sampling, which is useful in getting general ideas about the phenomenon of interest. Confidentiality and anonymity were taken into consideration during the application of Person-First Disability Language Scale (PFDS).

2.5 Data analysis

The results were analyzed with the SPSS version 20, and the findings of the study can be characterized more than interesting and can positively contribute to the debate on this issue.

3. Results

3.1. The Cronbach's alpha coefficient for reliability

Results over Cronbach's α (Alpha) in Table 1 showed that the reliability of Person-First Disability Language Scale was obviously very high, (39-statements, $\alpha =.922$).

Table 1. The coefficient of alpha reliability for the scale of social distance Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.922	.922	39

3.2. Descriptive analysis

Descriptive analysis for the field of the study between students studying psychology and those studying for physical education at “Marin Barleti” University.

Table 2. Descriptive statistic for the field of study

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Psychology	100	50.0	50.0	50.0
	Physical Education	100	50.0	50.0	100.0
	Total	200	100.0	100.0	

Table 2 shows that in this study have been participated 200 students, where 100 or 50% students are studying psychology, whereas 100 or 50% students are studying physical education.

3.3. Data analysis through ANOVA.

In this part of the study, ANOVA was used as one of the effective tools/methods for analyzing and interpreting the differences between the averages of variables.

Table 3. ANOVA for the difference between the field of the study and social distance with regard to the attitudes of the students towards people with disabilities

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	44.397	1	44.397	66.784	.000
Within Groups	131.627	198	.665		
Total	176.024	199			

The Table 3 indicates that exists a statistically significant difference between the field of study and social distance as far as concerned the attitudes of the students towards people with disabilities, $F(1,198) = 66.784, P = .000 < .05, (P < \alpha)$.

Figure 1 shows the comparison for the mean between the field of study and social distance with regard to the attitudes of the students towards people with disabilities.

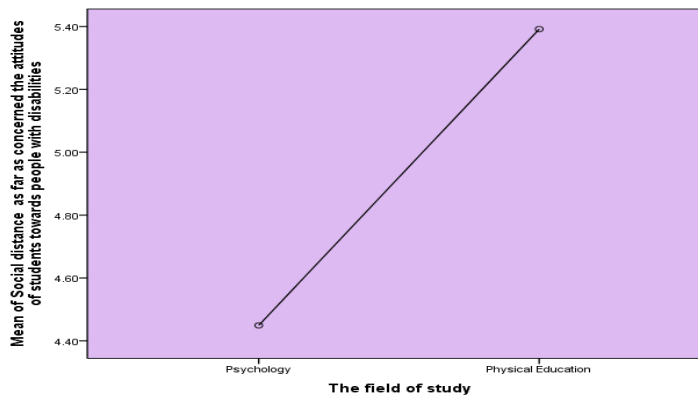


Fig. 1. Field of study and social distance – people with disabilities

The figure 1 showed us that the mean of students of psychology is $M= 4.45$, whereas the mean of students of physical education is $M=5.39$, which means that students studying psychology have a lower level of social distance as far as concerned their attitudes towards people with disabilities than students studying physical education.

Table 4. ANOVA for the difference between the field of the study and social distance with respect to the attitudes of the students towards people suffering from substance use disorders.

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	718.205	1	718.205	80.909	.000
Within Groups	1757.590	198	8.877		
Total	2475.795	199			

The Table 4 indicates that there is a statistically significant difference between the field of study and social distance with regard to the attitudes of the students towards people suffering from substance use disorders, $F(1,198) = 80.909, P = .000 < .05, (P < \alpha)$.

Fig. 2 indicates our comparison for the mean between the field of study and social distance with respect to the attitudes of the students towards people suffering from substance use disorders.

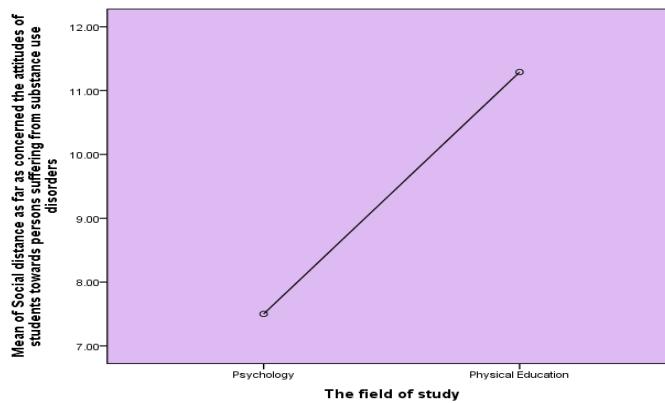


Fig. 2. Field of study and social distance – substance use disorders

Fig 1. indicated that the mean of students of psychology is $M= 7.5$, whereas the mean of students of physical education is $M=11.29$, which means that students studying physical education have a higher level of social distance regarding their attitudes towards persons suffering from substance use disorders than students studying psychology.

Table 5. ANOVA for the difference between the field of the study and social distance as far as concerned the attitudes of the students towards people suffering from physical disorders.

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	1607.445	1	1607.445	23.361	.000
Within Groups	13624.110	198	68.809		
Total	15231.555	199			

The Table 5 indicates that there is a statistically significant difference between the field of study and social distance with respect to the attitudes of the students towards people suffering from physical disorders, $F(1,198) = 23.361$, $P = .000 < .05$, ($P < \alpha$).

Fig. 3 indicated the comparison for the mean between the field of study and social distance with regard to the attitudes of the students towards persons suffering from physical disorders.

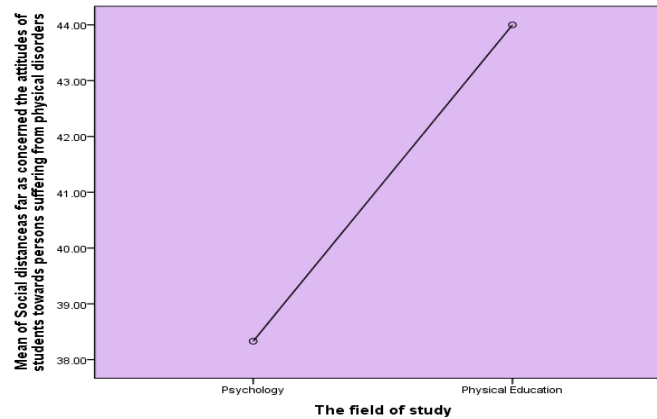


Fig. 3. Field of study and social distance – physical disorders

Fig. 3 indicates that the mean of students of psychology is $M = 38.3$, while the mean of students of physical education is $M = 44$ which means that students studying physical education have a higher level of social distance as far as concerned their attitudes towards persons suffering from physical disorders than students studying psychology.

Table 6. ANOVA for the difference between the field of the study and social distance with respect to the attitudes of the students towards people suffering from psychological disorders.

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	37510.605	1	37510.605	57.124	.000
Within Groups	130017.270	198	656.653		
Total	167527.875	199			

The Table 6 shows that there is a statistically significant difference between the field of study and social distance regarding the attitudes of the students towards people suffering from psychological disorders, $F(1,198) = 57.124$, $P = .000 < .05$, ($P < \alpha$).

Fig. 4 shows the comparison for the mean between the field of study and social distance with regard to the attitudes of the students towards persons suffering from psychological disorders.

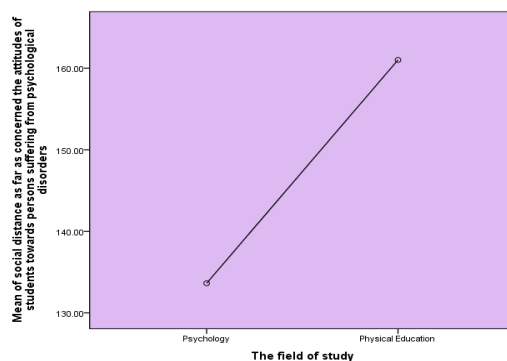


Fig. 4. Field of study and social distance – psychological disorders

Fig. 4 indicates that the mean of students of psychology is $M= 133.63$, whereas the mean of students of physical education is $M=161$, which means that students studying psychology have a lower level of social distance regarding their attitudes towards persons suffering from psychological disorders than students studying physical education.

4. Discussions

The aim of this study was to identify the level of social distance as far as concerned the attitudes of the students of psychology and physical education in the first year at “Marin Barleti” University based in Tirana towards people with disabilities, as well as persons suffering from substance use and psychological disorders including also those suffering from physical disorders. The methodology used for the compilation of this study is basically quantitative and it is based on a sample of 200 students, more concretely 100 students studying psychology and 100 students studying physical education at the “Marin Barleti” University in Tirana. For the purposes of the study it was used a well-known questionnaire in the field of psychology – the Person-First Disability Language Scale “(PFDS) – while at the same time for the data analysis it was implemented the Statistical Package for Social Sciences. Results over Cronbach's α (Alpha) showed that the reliability of Person-First Disability Language Scale was obviously very high, (39-statements, $\alpha=922$).The study has treated the below-mentioned research questions:

1- Is there any difference in the level of social distance as far as concerned the attitudes of the students studying psychology field and those studying physical education towards people with disabilities?

Regarding the first question was used ANOVA. The table Nr.3 of ANOVA results indicated that there is a statistically significant difference between the field of study and social distance with regard to the attitudes of the students towards people with disabilities, $F(1,198)=66.784$, $P=.000<.05$, ($P<\alpha$).The graph nr.1 of ANOVA showed that the mean of students of psychology is $M= 4.45$, whereas the mean of students of physical education is $M=5.39$, which means that students studying psychology have a lower level of social distance with regard to their attitudes towards people with disabilities than students studying physical education.

2- Is there any difference in the level of social distance as far as concerned the attitudes of the students studying for psychology field and those studying physical education towards people suffering from substance use disorders?

For the second question was used ANOVA, The table Nr.4 of ANOVA results showed that there is a statistically significant difference between the field of study and social distance with regard to the attitudes of the students towards people suffering from substance use disorders ($1,198$) =80.909, $P=.000<.05$, ($P<\alpha$).The graph nr.2 of ANOVA indicated us that the mean of the students of psychology is $M= 7.5$, whereas the mean of students of physical education is $M=11.29$, which means that students

studying physical education have a higher level of social distance regarding their attitudes towards persons suffering from substance use disorders than students studying psychology.

3- Is there any difference in the level of social distance with regard to the attitudes of the students studying psychology field and those studying physical education towards people suffering from physical disorders?

Regarding the third question, it was used ANOVA. The table 5 of ANOVA results showed that there is a statistically significant difference between the field of study and social distance with respect to the attitudes of the students towards people suffering from physical disorders, $F(1,198) = 23.361$, $P = .000 < .05$, ($P < \alpha$). The graph nr.3 indicated us that the mean of the students of psychology is $M = 38.3$, whereas the mean of students of physical education is $M = 44$ which means that students studying physical education have a higher level of social distance as far as concerned their attitudes towards persons suffering from physical disorders than students studying psychology.

4- Is there any difference in the level of social distance with respect to the attitudes of the students studying psychology field and those studying physical education towards people suffering from psychological disorders?

Regarding the last question, this study was based on ANOVA results. The table 6 of ANOVA results showed that there is a statistically significant difference between the field of study and social distance with respect to the attitudes of the students towards people suffering from psychological disorders, $F(1,198) = 57.124$, $P = .000 < .05$, ($P < \alpha$). The graph 4 indicated us that the mean of the students of psychology is $M = 133.63$ while the mean of students of physical education is $M = 161$, which means that students studying psychology have a lower level of social distance as far as concerned their attitudes towards persons suffering from psychological disorders than students studying physical education

5. Conclusions and recommendations

Having in mind the questions and results of this study, first of all, we can conclude that there is a statistically significant difference between the field of study and social distance as far as concerned the attitudes of the students towards people with special needs. Students studying psychology have a lower level of social distance as far as concerned their attitudes towards people with disabilities than students studying physical education. That means that as lower to be the level of the social distance of the students studying psychology towards people with disabilities so higher will be the predisposition of the students to accept these people. Secondly, there is a statistically significant difference between the field of study and social distance regarding the attitudes of the students towards people suffering from substance use disorders. Students studying physical education have a higher level of social distance with regard to their attitudes towards persons suffering from substance use disorders than students studying psychology. That means that as higher to be the level of the social distance of the students studying physical education towards persons suffering from substance use disorders so lower will be the predisposition of the students to accept these people. Thirdly, there is a statistically significant difference between the field of study and social distance as far as concerned the attitudes of the students towards people suffering from physical disorders. Students studying physical education have a higher level of social distance regarding their attitudes towards persons suffering from physical disorders than students studying psychology. That means that as higher to be the level of the social distance of the students studying physical education towards persons suffering from physical disorders so lower will be the predisposition of the students to accept these people. Finally, we conclude that there is a statistically significant difference between the field of study and social distance as far as concerned the attitudes of the students towards people suffering from psychological disorders. Students studying psychology have a lower level of social distance with respect to their attitudes towards persons suffering from psychological disorders than students studying physical education. That means that as

lower to be the level of the social distance of the students studying psychology towards people suffering from psychological disorders so higher will be the predisposition of the students to accept these people.

Based on the findings of this study we recommend:

The "Marin Barleti University" should develop modules, additional subjects, social activities, psychological training in order to raise the awareness of the students of physical education for people who suffer from psychological disorders or special needs as well as for people who suffer from substance use disorders, encouraging them to help and support these vulnerable groups of our society. Another recommendation might be related to basic curriculum in the high school which should include some special chapters dedicated to people with special needs, disabilities in order to draw the secondary school students' attention to these categories helping them.

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