

PRESCHOOL CHILDREN: ATTITUDES TOWARD CHILDREN WITH DISABILITIES

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ABSTRACT

Preschool children's attitudes toward peers with disabilities are highly important because positive attitudes promote acceptance and inclusion of the child with a disability within the classroom and in society. The purpose of this study is to assess preschool children's attitudes toward children with disabilities by comparing attitudes toward children in three groups: those with a physical disability, those with intellectual disability, and those without a disability. The Understanding Disability Scale (UDS) was used to ask the preschool children what they meant by the term disabled. In addition, the Behavioral Intentions Scale (BIS) was used to determine the willingness of the preschool children to interact with a child with a disability. The participants for this study consisted of a total of 56 typically developing children, 24 boys and 32 girls, aged 4 to 6 ($M = 5.8$) from two preschool classes in Macedonia. In this study, the majority of children's (81.1%) did not believe disability was contagious. Also, 50.9% of children believed a child with a disability was not different from themselves. Results have shown that preschool children's more prefer to play with children without disabilities ($M=26.9$). According to the results, we can conclude that preschool children involved in this study did have more positive attitudes toward typically developing peers than toward peers with a disability.

Key words: acceptance, attitudes, kindergarten children, physical disability, intellectual disability

INTRODUCTION

The UN Convention on the Rights of Persons with Disabilities (CRPD) requires nations to accept people with disabilities as part of human diversity, promote equality, and prohibit all discrimination on the basis of disability (UN General Assembly, 2007). Namely, fostering positive attitudes should start early with children at all levels of the education system (Werner, Peretz, & Roth, 2015). This is important because many studies have shown that attitudes learned at early ages are internalized by children and are held throughout their lifetime (Dunham, Chen, & Banaji, 2013).

The results of work of other researchers have reinforced the idea that an understanding of kindergarten children's attitudes toward peers with disabilities is essential because positive attitudes promote acceptance and inclusion of the child with a disability within the classroom and in society (de Boer, Pijl, Post, & Minnaert, 2013). According to Dyson (2005), these attitudes frequently emerge in the preschool years and intensify throughout childhood, with the kindergarten years being a critical point at which a child's sensitivity and negative attitudes toward disabilities become more apparent. Studies about preschool children's attitudes toward children with disabilities are limited. Several variables are cited in the literature as being related to formation of attitudes toward children with disabilities. One of them is the role of the type of disability in the formation of these attitudes. The purpose of this study is to assess preschool children's attitudes toward children with disabilities by comparing attitudes toward children in three groups: those with a physical disability, those with an intellectual disability, and those without a disability.

METHODOLOGY

Participants

The participants for this study consisted of a total of 53 typically developing children, 21 boys and 32 girls, aged 4 to 6 ($M = 5.8$) from two preschool classes in Macedonia. One of the classes had a child who had been diagnosed as having a disability (autism). Namely, half of the children had a previous experience with a child with the disability (50,9%). Permission was obtained from the managers of the preschools and all of the parents to administer a questionnaire to the preschool classes.

Instruments

The instruments used for the study were an Understanding Disability Scale (UDS; Esposito & Peach, 1983) and Behavioral Intentions Scale (Roberts & Lindsell, 1997). Original scales were translated into the Macedonian language by the researchers.

Procedure

The Understanding Disability Scale (UDS) was used to ask the preschool children what was meant by the term disabled and to discuss it. Then, they were asked to draw a picture of a child with disabilities. Part two of this scale involves a set of open-ended questions designed to elicit what the child understands about the nature of the disability.

The Behavioral Intentions Scale (BIS) was used to determine willingness to interact with a child with a disability. This scale is based on the Behavioral Intentions Scale (Roberts & Lindsell, 1997) and the Friendship Activity Scale (Siperstein, 1980). Developmentally inappropriate items were eliminated to create a list of 14 activities typical for young children. The child is presented with three pictures (child with a physical disability, a child with an intellectual disability, a child with no disability) and a description is read for each of the pictures (Fig. 1).

Furthermore, it was emphasized that the questionnaire was not a test - there were not any wrong answers; one should answer as they honestly feel at that time. The interviewer then asks, "Would you do _____ with this child?" inserting an activity typical of a preschool-aged child's day. These activities fall into 5 categories: helping behaviors, sharing behaviors, physical proximity, common activities, and intimacy level. The child responds by saying "yes," "no," or "maybe," or by pointing to a corresponding smiley face (Fig.2). This scale is scored by assigning point values of 0 (no), 1 (maybe), or 2 (yes).




Picture of child	Descriptions
Child with a physical disability 	This child uses a wheelchair to get around. He learns new things easily. He is learning to count to 10 and knows some of his ABCs. He can also understand a story that was read to him and tell the story to someone else.
Child with an intellectual disability 	This child finds learning new things hard. He cannot do some of the things that preschoolers can do, like counting to 10 and saying his ABCs. He has a hard time understanding stories that are read to him and telling the story to someone else.
Child without a disability 	This child learns new things easily. He knows how to do the things that preschoolers can do. He is learning to count to 10 and knows some of his ABCs. He can also understand a story that was read to him and tell the story to someone else.

Figure 1. Verbal description of target children (Adapted from Nowicki, 2006)




YES	MAYBE	NO
		
2	1	0

Figure 2. Pictures of happy, maybe and sad faces

Statistical analyses

A SPSS 18.0 package programme was used to analyze data obtained from the research. Differences in attitudes toward the three target children were examined via a oneway ANOVA.

RESULTS

Understanding Disability Scale

Children were given an A4 sheet of paper and a pencil and were instructed to draw a child with a disability. The advantage of using drawings is not only that they are fun and creative, but also that children have the necessary time to think about the theme that they want to portray. It was found that most of the children drawing the child with disabilities as a child with physical disabilities. Two representative drawings are shown in Fig. 3 A and B.



Figure 3. A-“Blind girl” and B-“Child with a wheelchair and blind child with a dog”

The second part of UDS consist of three questions pertaining to knowledge about the meaning of disabilities, the “contagiousness” of disabilities, and the similarities and differences between persons with and without disabilities. Preschool children’s responses to the first question “Tell me everything you know about children with disabilities” are presented in Table 1. A substantial proportion of the children (56.6%) responded with “I don’t know”. 43.4% of children responded that the child with a disability had a blindness, hearing loss, and physical disability (e.g. “child that can’t see”, “child that can’t hear” or “child that can’t walk”).

Table 1. Understanding of disability

Responses	Frequency	%
physical impairments	23	43.4
don’t know	30	56.6
Total	53	100

On the second question, children were asked: “Can you get sick from playing with a child who has disabilities?” They were also asked to give the reason for their answers. In Table 2 are presented their response. The majority of preschool children (81.1%) understood that a disability wasn’t contagious.

Table 2. Understanding of whether a disability is contagious and the reasons

Responses	Frequency	%
Yes “Gala doesn't want to play with me, she always plays alone so I might become like her.” “When someone is ill, if you sitting next to him and if you hug him, you may get sick.”	10	18.9
No No (only response) “Disability is not an illness”	43	81.1
Total	53	100

On the third question, the children were asked, “Do children who have disabilities seem a lot like you, or do they seem different from you? Why or why not?” Table 3 presents the results of themes of this area, with frequencies and percentages of response.

Table 3. Responses on liking children with disabilities and reasons

Responses	Frequency	%
Yes “Because we talk, and they do not know how to talk.” “Because we walk, and some of them cannot walk.” “I'm not sick like them.”	27	50.9
No “They have hair like me” “We dress the same.” “We eat the same food.”	14	26.5
don't know	12	22.6
Total	53	100

Half of the preschool children (50.9%) responds that the children with and without disabilities are similar.

Behavioral Intentions Scale

The Behavioral Intentions Scale (BIS) was used to investigate children's reported interactions with children with a disability. Table 4 shows the answers of the participants for each item. Higher scores indicate more positive behavioral intentions toward the target children: those with a physical disability (PD), those with an intellectual disability (ID), and those without a disability.

Table 4. Interaction with children with a disability

“Would you...”	PD Mean (SD)	ID Mean (SD)	No disability Mean (SD)	ANOVA
stand next to him/her while waiting in line?	1.66 (0.73)	1.90 (0.29)	2 (0)	F=7.83*
lend him/her your crayons?	1.62 (0.79)	1.69 (0.72)	1.75 (0.61)	F=0.45
help him/her put on his/her winter coat for recess?	1.94 (0.23)	1.94 (0.23)	2 (0)	F=1.56
talk to him/her during center time?	1.88 (0.31)	1.90 (0.29)	2 (0)	F=3.30*
play with him/her during recess?	1.66 (0.75)	2 (0)	2 (0)	F=10.63*
go up to him/her and say hello?	1.84 (0.53)	2 (0)	2 (0)	F=4.24*
share my toys with him/her?	1.84 (0.45)	1.69 (0.66)	1.90 (0.29)	F=2.47
tell him/her about my family?	1.47 (0.77)	1.54 (0.84)	1.50 (0.86)	F=0.10
help him/her clean up toys?	1.84 (0.53)	1.84 (0.53)	2 (0)	F=2.12
invite him/her over to my house?	1.58 (0.81)	1.73 (0.68)	2 (0)	F=6.16*
choose him/her as a partner in a game?	1.66 (0.75)	1.54 (0.84)	1.96 (0.27)	F=5.36*
help him/her finish a puzzle?	2 (0)	2 (0)	2 (0)	/
share a snack with him/her?	1.92 (0.38)	1.96 (0.19)	1.83 (0.37)	F=2.23
sit next to him/her at lunch?	1.66 (0.75)	1.66 (0.75)	2 (0)	F=5.31*

*p<.05

The scores of the test range from 0 to 28, with high scores reflecting accepting attitudes and low scores reflecting non-accepting attitudes (Table 5). No significant differences were found between the three target children.

Table 5. Interaction with children with a disability

	Min	Max	Mean	SD
physical disability	5	28	24.6	6.54
intellectual disability	11	28	25.4	5.24
no disability	21	28	26.9	2.02

F=3.001 p>.05

DISCUSSION

In the drawing task, the majority of preschool children drew children in wheelchairs, suggesting that children view disability as a physical state. In sum, they are not sufficiently familiar with the other types of disabilities. The majority of children (81.1%) did not believe disability was contagious. The substantial number of them was not able to articulate the reason for their belief about the contagious or noncontagious nature of a disability. Clearly, understanding the meaning of disability and expressing their understanding of it, needs to be promoted at preschools programs.

When questioned about the willingness of the participants to interact with a child with a disability, preschool children responded less positively than when asked the same questions about typically developing peers (Van Hooser, 2009). Namely, there was a significant difference in children's behavioral intentions to stand next to a child with physical disability or with intellectual disability (F=7.83; p<.05). A significant difference was also noted in children's behavioral intentions to talk to a child with physical disability or with intellectual disability during center time (F=3.30; p<.05), play with them during recess (F=10.63; p<.05), go up to them and say hello (F=4.24; p<.05), invite them in their house (F=6.16; p<.05), choose them as a partner in a game (F=5.36; p<.05), and sit next to them at lunch (F=5.31; p<.05).

This finding and the previous study's finding are similar: preschool children have poorer perceptions of and are less willing to interact with children with a disability than they are with typically developing peers. Furthermore, when scores for physical and intellectual disability were compared, participants were more willing to interact with a child with an intellectual disability than with a child with a physical disability. Also, in other study it was found that preschools children tended to prefer befriending a peer who was photographed without a wheelchair rather than a peer in a wheelchair (Huckstadt & Shutts, 2014). A possible explanation for these findings may be that the young children have a limited understanding of physical disability, despite of the fact that most of them view the disability as a physical state.

Limitations

Some limitations of this research study include:

- preschool children's answers may not be honest;
- more research is necessary to generalize attitudes toward children with disability;
- time span of the study may have been too short;
- further research is necessary;
- examiner (or other external factors) may have influenced preschool children' answers to questions.

CONCLUSION

Despite these limitations, the current study is the first one in our country which compares the attitudes of preschool children toward a child with a physical disability, a child with intellectual disability, and a child without a disability.

The kindergarten years may thus be the critical point at which a child's sensitivity and negative attitudes toward disabilities become more apparent (Dyson, 2005). The results of work of other researchers have reinforced the idea that an understanding of children's knowledge and attitudes toward disabilities is essential not only to the enhancement of relationships between children with and

without disabilities (Hazzard, 1983) but also to the design of educational interventions that will effectively cultivate positive attitudes toward children with disabilities (Diamond, 1993).

Interventions for preschool children should expose them to other children with a wide range of disabilities. It is important to arrange many meetings between diverse groups of children and to provide opportunities for a contact between children with and without disabilities. Moreover, children's attitudes are also known to be impacted by the attitudes of significant others such as their parents and/or teachers. Thus, teachers must have the requisite knowledge on disabilities and on inclusion so that they can properly integrate children with disabilities into their classes (Werner, Peretz, & Roth, 2015).

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