

ORIGINAL RESEARCH

Attitude of Healthcare Providers Towards Care of People with Disabilities, in Hail Region, Saudi Arabia

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Background: Disability, whether congenital or acquired, poses significant challenges that affect individuals' physical, mental, psychological, and social functioning. This study aimed to examine the attitudes of healthcare providers in Hai'l City towards people with disabilities.

Methods: A cross-sectional design was used, involving 321 healthcare providers from the Hai'l region, employing the Scale of Attitudes towards Disabled Persons (SADP) for data collection. The data were collected through an online survey and analyzed using SPSS 26

Results: The results indicated a generally positive attitude of healthcare providers towards people with disabilities, with mean scores exceeding 89 across various groups. Older providers (over 35 years old) exhibited the highest positivity rate (92.57), although differences in age, sex, educational level, years of experience, and professional role were not statistically significant. Master's degree holders had the highest average score (93.52), but the differences remained statistically insignificant.

Conclusion: The study concludes that while healthcare providers generally have positive attitudes towards people with disabilities, there is a critical need for comprehensive training programs to enhance the quality of care provided. Future research should extend to other regions and employ qualitative methods to gain deeper insights into healthcare providers' attitudes toward and experiences with people with disabilities.

Keywords: attitudes, healthcare providers, people with disabilities, Saudi Arabia

Introduction

Disability, whether congenital or acquired, is a condition that may considerably impact people's life functions and influences the physical, mental, psychological, and social aspects of their lives. People with disabilities encounter many obstacles in their daily lives, including poor health, low educational levels, and unemployment, which can lead to high poverty rates. People with disabilities experience a lack of social support, discrimination, and acts of violence.

Disability is one of the main social and economic barriers.³ Owing to a shortage of relevant research, it is difficult to compare the incidence and prevalence of impairments, disabilities, and sociodemographic characteristics with those of other countries.⁴ The people with disabilities have special situation and care in Saudi Arabia.^{5,6} So, it is crucial to examine the attitudes towards patients with disabilities to ensure that they receive appropriate care and support. According to the World Health Organization's Global Report on Health Equity for Persons with Disabilities to improve

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disability competence training among healthcare providers globally to better equip them with the knowledge, attitudes, and skills to competently work with people with disabilities.⁷

The attitudes of healthcare providers (HCP) play a crucial role in the rehabilitation process of people with disabilities, as positive attitudes increase enthusiasm and help in accepting disabilities.8 Furthermore, HCP are often not well prepared to address the complex medical and psychosocial needs of people. The attitudes of HCP towards people with disabilities are influenced by traditional values, educational environment, and religion, 10 so it is essential to understand their attitudes towards people with disabilities in order to improve the quality of the healthcare services provided to this group of people. 11 The attitudes of HCP, particularly nurses, towards people with disabilities play a crucial role in promoting the quality of care and overall patient satisfaction. ¹² Investigating HCP attitudes is crucial for recognizing potential gaps in the healthcare provided and applying appropriate interventions to improve healthcare services.

While some research has been conducted on the attitudes of HCP towards people with disabilities in several countries, there is a lack of specific studies focusing on the attitudes of HCP. The study conducted by Laura et al explicated that the attitudes of HCPs towards disabilities, it showed that the majority of HCPs were biased in providing care for people with disabilities, 13 while a study conducted by Lisa et al reported that 40.7% of the physicians were very confident about their abilities to provide care to people with disabilities¹⁴ and a study by DeJong (2022) recommended a need to improve physicians' skills to provide care for people with disabilities. 15 Understanding the attitudes of HCP towards people with disabilities is crucial for identifying potential gaps and challenges in the healthcare system that may hinder the provision of inclusive and patient-centered care.¹⁶

There is limited research exploring the attitudes of HCP towards people with disabilities. One study was conducted in Saudi Arabia by Al-Abdulwahab SS, and Al-Gain SI, which investigated the attitudes of HCPs towards people with physical disabilities. It showed that they have positive attitudes towards people with physical disabilities and poor relationship with age and experiences of HCPs, 17 another study conducted recently by Woodman A et alassessing attitudes of HCPs in relation to disabilities, it revealed that HCP have slightly negative attitudes towards people with disabilities, while younger HCPs and those without children have positive attitudes. 18 Therefore, the current study aimed to investigate the attitudes of HCP towards people with disabilities in Saudi Arabia.

Methods

Research Design

A cross-sectional study design was adopted to assess the attitudes of HCP towards people with disabilities in Hai'l, Saudi Arabia.

Study Population

The study primarily targeted HCPs working in healthcare facilities in Hai'l, Saudi Arabia. The study was conducted with participants who had direct responsibility for the care of patients. The included participants included physicians, nurses, administrative staff, and other healthcare professionals. According to Statistical Yearbook 2022, the number of doctors are 1607, and the number of nurses 2857 in Hail governmental hospitals and the total number of HCPs in Hail are 6742. 19

Sampling and Sample Size

A convenience sampling technique was used to select the participants. The following criteria were used to determine the sample size of 364 hCPs using the OpenEpi web-based calculator, Version 3.01 (www.openepi.com): A population size of 6742, a 95% confidence level, and a 5% absolute precision. The survey was given to 365 hCPs, though, and 321 of them finished it, yielding a 87.9% response rate. They distributed the link through nursing administrators to avoid contact with respondents to mitigate the chance of response bias.

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Data Collection Technique

Data were collected using an online survey (Google Forms). It was distributed electronically to the HCP in Hai'l, Saudi Arabia and was accompanied by information on the study's objectives, privacy measures, and voluntary withdrawal from the study at any time. Before completing the survey, participants were asked to provide informed consent.

Instruments of Data Collection

Data was collected using an online questionnaire consisting of two parts.

The first part included demographic information, such as gender, age, educational level, years of experience, profession, previous training programs regarding needs and caring for people with disabilities and previous experience in working with people with disabilities.

The second part was for the scale of Attitudes towards Disabled Persons (SADP), which was developed by Antonak and Livneh²⁰ and has been implemented in several studies, including those by Ismail et al²¹ and Dorji and Solomon.²² It consists of 24 items rated on a 6-point Likert scale, with participants selecting one option ranging from –3 ("I disagree very much") to +3 ("I agree very much"). After calculating the scores for all 24 items, a value of 72 was added to eliminate negative scores, resulting in total scores ranging from 0 to 144. This tool evaluates the overall HCP attitudes among people with disabilities. It has undergone thorough psychometric testing and is deemed a reliable measure, with a Cronbach's alpha coefficient of 0.88.²² The use of this tool was justified because it is validated, reliable, comprehensive, and adaptable in addition to its wide utilization.

Data Analysis

The collected data were analyzed using SPSS version 26. Descriptive statistics such as frequencies, percentages, means, and standard deviations were used to show the participants' demographic characteristics. In addition, inferential statistics such as cross-tabulation were employed to compare the attitudes of different demographic variables.

Results

Demographic Profile of Healthcare Providers

Table 1 shows the demographic characteristics of HCP participated in this study, it presents both male 61.4% and females 38.6%, their ages were distributed into four groups, most of them (40.8) aged 35 years or more (35.5%) of them aged 30 -<35 years, followed by 25-<30 years (17.4%) and only (6.2%) of them were less than 25 years and their educational levels show that more than half of them had a bachelor's degree (54.2%), followed by diplomas (25.5%) and master's degrees (20.2%). They had ten years or more experiences (54.2%), followed by 1–3 years (18.7%), 4–6 years (14.3%) and 7–9 years (12.8%). Most participants worked as nurses (56.7%), followed by those working in medicine (13.4%), administrative workers (12.1%), and other HCP (17.8%). Most HCP had experience in caring for patients with different types of disabilities (88.5%) and had completed a training course in the area of caring for such conditions (47.4%).

Table 1 Demographic Gharacteristics of Frei, Saddi Arabia							
Variables	Frequency	Percentage					
Gender	nder Male		61.4				
	Female	124	38.6				
Age	< 25 years		6.2				
	25-<30 years	56	17.4				
	30-<35 years	114	35.5				
	> or = 35 years	131	40.8				

Table I Demographic Characteristics of HCP, Saudi Arabia

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Table I (Continued).

Variables	Frequency	Percentage		
Level of Education	Diploma	82	25.5	
	Bachelor's degree	174	54.2	
	Master's degree	65	20.2	
Years of Experience	I-3 years	60	18.7	
	4-6 years	46	14.3	
	7-9 years	41	12.8	
	> or = 10 years	174	54.2	
Profession	Physicians	43	13.4	
	Nurses	182	56.7	
	Administrative staff	39	12.1	
	Other healthcare professionals	57	17.8	
Have you completed a training course on special	Yes	284	88.5	
needs and caring for people with disabilities?	No	37	11.5	
Have you worked with people with special disabilities before?	Yes	152	47.4	
	No	169	52.6	

Attitudes Towards Care of People with Disabilities

Table 2 presents the attitudes of the HCP towards the care of people with disabilities. The overall calculated attitude score was 1.8 (SD = ± 0.5). Several variables suggest strong support for people with disabilities.

Figure 1 presents the overall attitudes of the HCP towards the care of people with disabilities. It shows that 71.7% of participants had a positive attitude towards the care of people with disabilities, and only 28.3% of them had a negative attitude towards the care of individuals with disabilities.

Table 2 Attitude of HCP Towards Care of People with Disabilities in Saudi Arabia

Items of attitudes	Mean	Std. deviation	Minimum	Maximum
I. People with disabilities get unfair advantages	1.7	1.7	-3.0	3.0
2. People with disabilities can increase their job skills through training	1.5	1.3	-3.0	3.0
3. Mental retardation and mental illness are similar.	-0.9	1.5	-3.0	3.0
4. Adults with developmental disabilities are in many ways like children	2.0	1.5	-3.0	3.0
5. People with disabilities should be encouraged to mainstream (engage in activities with non- people with disabilities)	2.6	1.4	-3.0	3.0

(Continued)

Table 2 (Continued).

Items of attitudes	Mean	Std. deviation	Minimum	Maximum
6. I agree with the statement. "People with disabilities should be given more control in making decisions that affect their lives"	2.2	1.5	-3.0	3.0
7. People with disabilities should live with others with similar disabilities	-0.3	1.7	-3.0	3.0
8. I generally feel sorry for people with disabilities.	2.2	1.8	-3.0	3.0
9. Adults with disabilities should not engage in sexual activities	-0.8	1.6	-3.0	3.0
10. People with disabilities are not capable of making moral decisions	1.9	1.6	-3.0	3.0
11. Most people with disabilities are willing to work.	1.3	1.3	-3.0	3.0
12. People with disabilities can be expected to fit into competitive society	2.3	1.2	-3.0	3.0
13. People with disabilities should be allowed to live where and how they choose	1.3	1.4	-3.0	3.0
14. People with disabilities are more emotionally maladjusted than the general public	1.8	1.5	-3.0	3.0
15. People with disabilities are able to adjust to life outside of an institutional setting	1.9	1.3	-3.0	3.0
16. Laws to prevent employers from discriminating against people with disabilities should be passed	2.2	1.5	-3.0	3.0
17. Simple and repetitive work is appropriate for people with disabilities	2.0	1.3	-3.0	3.0
18. The presence of a disabled in a social gathering makes people uncomfortable	-1.4	1.6	-3.0	3.0
19. Disabled children in regular classroom have an adverse effect on other children	-1.0	1.6	-3.0	3.0
20. The opportunity for gainful employment should be provided to people with disabilities	2.5	1.2	-3.0	3.0
21. People with disabilities can have active an active social life	1.6	1.1	-3.0	3.0
22. People with disabilities are a financial drain and give little back to the community	-1.4	1.6	-3.0	3.0
23. People with disabilities experience the same range of emotions as non- people with disabilities	1.6	1.6	-3.0	3.0
24. Some people with disabilities are physically indistinguishable from the general population	1.1	1.7	-3.0	3.0
Total score of attitudes	1.8	0.5	0.0	3.0

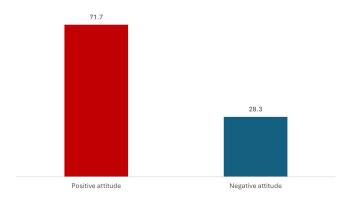


Figure 1 Overall attitude of HCP towards care of people with disabilities in Saudi Arabia presents the overall attitudes of the HCP towards the care of people with disabilities. It shows that 71.7% of participants had a positive attitude towards the care of people with disabilities, and only 28.3% of them had a negative attitude towards the care of individuals with disabilities.

Association Between Demographic Features and Attitudes of HCP

Table 3 shows the association between the demographic variables of participants and their attitudes towards the care of people with disabilities. Independent t-tests were used to identify any significant associations between demographic variables (gender, age, education, education, occupation, experiences, previous experiences in caring for people with disabilities, and previous courses in the care of people with needs) and the level of attitudes toward HCP. There were no significant associations between these variables and an overall attitude p-value of >0.05.

Table 3 Association Between Demographic Characteristics and Attitudes of HCP Towards People with Disabilities

Variables			Positive attitude		Negative attitude		P-value
		Fre	1	%	Freq	%	
Gender	Male	13	5 (68.5%	62	31.5%	0.074
	Female	9	5	76.6%	29	23.4%	
Age	< 25 years	1	4	70.0%	6	30.0%	0.779
	25-<30 years	4	2	75.0%	14	25.0%	
	30-<35 years	7	3 (68.4%	36	31.6%	
	> or = 35 years	9	5	73.3%	35	26.7%	
Level of Education	Diploma	5	7 (69.5%	25	30.5%	0.562
	Bachelor's degree	12	3	70.7%	51	29.3%	
	Master's degree	5)	76.9%	15	23.1%	
Years of Experience	I-3 years	4	7 :	78.3%	13	21.7%	0.394
	4–6 years	3) (65.2%	16	34.8%	
	7-9 years	2	7 (65.9%	14	34.1%	
	> or = 10 years	12	5	72.4%	48	27.6%	

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Table 3 (Continued).

Variables		Positive attitude		Negative attitude		P-value
		Freq	%	Freq	%	
Profession	Physicians	34	79.1%	9	20.9%	0.177
	Nurses	127	69.8%	55	30.2%	
	Administrative staff	24	61.5%	15	38.5%	
	Other healthcare professionals	45	78.9%	12	21.1%	
Have you completed a	Yes	208	73.2%	76	26.8%	0.085
training course on special needs and caring for people with disabilities?	No	22	59.5%	15	40.5%	
Have you worked with people	Yes	106	69.7%	46	30.3%	0.535
with special disabilities before?	No	124	73.4%	45	26.6%	

Discussion

The findings of the demographic characteristics related to HCP in this study showed positive attitudes towards people with disabilities in Hai'l, Saudi Arabia. The sample consisted of 321 healthcare providers, mainly male, with a considerable proportion of those aged 30 years and above. Most had a bachelor's degree in nursing and over ten years of experience. This demographic distribution aligns with previous studies indicating age, sex, and professional experience of HCP in several studies.^{21–27}

The findings show a generally positive attitude towards HCP among people with disabilities. The majority agreed that individuals with disabilities should be encouraged to become mainstream and have more control over decisions that affect their lives. These positive attitudes are critical, as they can positively influence the quality of care and compliance of HCP to engage with people with disabilities.

The findings of this study are in the same line with previous studies concerning HCP attitudes towards people with disabilities, one previous study by Sari et al (2016) showed that nursing students have positive attitudes,²⁸ another study by Vincent-Onabajo et al (2015) showed that physiotherapy students have also a positive attitude towards people with disabilities,²⁹ another study by Desroches et al, showed that nurses have a more positive attitude towards people with intellectual disabilities,^{23,26} and a study by Devkota et al (2017) showed that HCP have low level of attitudes compared to the normative levels, while nurses and nurse midwives have higher positive attitudes towards people with disabilities.²⁷

The attitudes of nursing students, physiotherapy students, nurses, and HCP were positive towards the care of people with disabilities which is in the same line with our findings were all categories of HCP provided a positive attitude as indicated by this study finding. However, the reported previous studies have shown that HCPs have positive attitudes towards people with disabilities, this could be justified because the researchers used HCPs who are altruistic individuals to understand that they should have positive attitudes towards this patient population but are often unaware of their biases and ableism in their clinical behaviours.

On the other hand, some previous studies have shown that students in medical professions have poor attitudes, such as those reported by nursing students in Greece,³⁰ and a systematic review by Ee et al (2022) showed that health and social care professionals have negative attitudes towards people with disabilities.³¹ Interestingly, a study by Zheng et al (2016) showed that HCP have lower attitudes towards people with disabilities than the public.³² The findings of our study revealed a positive attitude among HCP towards people with disabilities, this may be due to the fact that the method of

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measurement was an explicit self-report on attitudes about disability. This is quite different than implicit attitudes, which have been found across the literature to be negative among healthcare professionals towards disability and impact providers' clinical decision-making. 18,30–32

Nonetheless, certain unfavourable attitudes were clarified, including the perception that adults with developmental disabilities are similar to children and that individuals with disabilities are incapable of moral decision-making. These false beliefs can result in paternalistic attitudes and impede the agency and power of people with disabilities.

The age of HCP was not significantly associated with the level of attitudes, which is consistent with a study conducted by Devkota et al (2017), who reported that younger HCP tended to have more positive attitudes towards people with disabilities. This finding is consistent with our study, where providers aged 25–30 years showed more positive attitudes compared to older age groups. This generational shift may reflect broader societal changes in the perceptions of disability.²⁷ Similarly, a study conducted in Greece showed that age was not significantly associated with attitudes towards people with disabilities.³⁰

Interestingly, the study found no significant difference in attitudes between those who had completed training on special needs and those who had not completed any training on care for special needs. This aligns with findings from similar studies which suggest that while training can improve knowledge, it does not necessarily change deep-seated attitudes. Additionally, those with prior experience working with people with disabilities did not show significantly different attitudes, indicating that mere exposure was not sufficient to alter their perceptions.

In contrast, studies from high-income countries, such as those by Kritsotakis et al (2017) and Breau et al (2019), have found that HCP with more extensive training and previous work or exposure tend to have better attitudes towards people with disabilities. ^{24,30} This discrepancy suggests that the quality and content of training programs may vary significantly across regions and healthcare systems. Furthermore, the profession of HCP has no significant association with HCP attitudes towards people with disabilities; however, a study conducted by Kritsotakis et al (2017) in Greece showed that nursing students have significantly more positive attitudes towards people with disabilities than medical and social students. ³⁰

The findings of this study underscore the need for comprehensive and constant training programs that provide basic care to people with disabilities. It is also necessary to include the care of people with disabilities in the medical education curricula that addresses the relationship between disability and other social determinants of health, in addition to the strategies to enhance the healthcare system services provided to those people.

Conclusion

In conclusion, this study showed positive attitudes towards people with disabilities among HCP in Hai'l, Saudi Arabia. It is necessary to establish programs to strengthen the attitudes of HCP towards the care of people with disabilities in different hospital settings. Further studies should be conducted with larger sample sizes and interventional approaches to investigate HCP attitudes towards people with disabilities. It is also essential to implicit attitudes of HCPs as well as their knowledge, comfort, and preparedness to work with patients with disabilities in Saudi Arabia.

Data Sharing Statement

Data is available upon request from the corresponding author (Khalil A Saleh).

Ethical Approval

Ethical approval was obtained from the Deanship of Scientific Research at the University of Hai'l (Approval No.) on 00/12/2023 and from the Deanship of Scientific Research at Al-Baha University (approval No. 45119146) on 08/02/2024. Informed consent was obtained from all study participants, indicating their right to decline participation or withdraw from the study at any time before completing the online survey. Confidentiality and anonymity of the participants were ensured throughout the study. This study complied with the principles of the Declaration of Helsinki.

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Disclosure

The authors declared that there was no potential conflict of interest in this work.

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