Exploring the understanding of entry-level graduate OT students’ perceptions of disability

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Background

• Occupational therapy students informed by their own cultural backgrounds
• Attitudes toward and beliefs toward disability
• Explicit and implicit attitudes/prejudice
• Previous research exploring OT students’ attitudes of clients with disabilities
• This study explores incoming OT graduate students’ understandings of disability and their implicit attitudes towards it
Methods

• Mixed methodologies
• Qualitative analysis of students’ definitions of disability
• Quantitative - Disability Attitudes Implicit Association Test (DA-IAT) (Pruett, 2004; Pruett & Chan, 2006)
• Relationships between students’ understandings of disability and their unconscious attitudes
Demographics

- Total participants = 67 mean age was 24.8
- Three graduate level OT programs in Chicago with different curricula
- 89.6% Female
- 83.6% Caucasian
- No one identified as disabled but 2 participants preferred not to say
- Majority were from middle socio-economic class
- 52.2% identified as having a close relationship with someone with disability
- 70.1% had taken at least one undergraduate class on disability
Qualitative analysis

• Data analysis - constant comparative grounded theory (Glaser & Strauss 1967)
• Use of a dialogical intersubjective approach (Saldaña, 2016) in analysis
• Aligned epitomizing quotes for each identified theme
• Attending to qualitative rigor in research
Quantitative Measure

• The DA-IAT – the most commonly used disability implicit measure test
• Presents participants with ‘disabled persons’ & ‘abled persons’ categories
• In conjunction with ‘bad’ and ‘good’
• DA-IAT - high construct & discriminant validity and reliability with built in safeguards against participants faking results
Results – 4 Qualitative themes

**Individualization** – An overarching theme

• Disability defined strictly from a biomechanical stance

  “[Disability is] an impairment either physically, cognitively, or both. It affects your body or mind.”

• Mirrors the medical model of disability frames of disability as a problem

**Dependence equates Disability**

• Students saw dependency as a burden to others – overcoming narrative

  “A physical or mental handicap that must be overcome to live a satisfying life as they see fit.”
Themes continued

Disability constructed – Some students defined disability as located outside the person – a more social model perspective

“I believe disability is often the result of physical or attitudinal barriers in society.”

• Definitions linked disability as hindering participation & exclusion from society

Concepts of Normal – Defining disability as abnormality (“abnormalities of the body or brain”), or in relation to ‘norms’ (“hinders doing things as the norm”), or a just a general difference (“a difference and an aspect of living”)
Analysis – relationship between understandings and implicit attitudes

• Quantitatively coded participants’ qualitative responses to question asking them to define disability
  • Using binary coding – received a 1 when response was reflected and 0 when not - able to receive 1 for multiple themes

• DA-IAT scores were also calculated
  • For example: a score of .35 - .64 was a moderate preference for nondisabled

• We then explored the relationships between participants definitions and their disability attitude scores
Relationships between Disability Definitions and Attitudes

• Average Implicit prejudice score was .49 or Moderately prejudice
• 83.6% of participants preferred nondisabled people implicitly
• 7.5% preferred PWD and 9.0% had no preference
• Controlling for significant disability relationships - Those with no close relationships:
  • If definitions included impairment, individualization or inability = high implicit bias score
  • If defined disability relating to environment and social norms = no implicit bias
Relationships between Disability Definitions and Attitudes

• Participants who had significant relationships with PWD had lower implicit disability prejudice scores across all definition types.

• For example:
  • No disability relationship defining disability as a limitation typically scored with high implicit bias
  • Someone who defines disability the same way but has a disability relationship typically scored only slightly prejudiced
Implications

• Most commonly participants expressed individualized views of disability

• Individualizing disability depoliticizes

• Past research shows having a close social relationship with a PWD increases attitudes towards PWD (Stachura & Garven, 2007) – our findings support this

• How might curriculum design attend to these issues?
Implications for Occupational Therapy Curriculum

• Society conceptualizes disability located in the individual
• Encourage intentional critical reflection with and by students

QUESTIONS FOR YOU

• How might a OT program that is more bio-mechanical, using occupation based interventions at the individual level reinforce the negative bias?
• How are OT students currently encouraged to engage with clients with disabilities outside of the clinical setting to expose ‘living life with disability’?
Conclusion

• Discourse continues -- impairment instead of occupation and participation (Fisher & Jones, 2009).

• Occupational therapy graduate programs (in US) still largely guided by impairment focusing educational standards (American Occupation Therapy Association, 2016).

• How does a program’s curriculum influence beliefs and attitudes toward disability?

• Does reductionist based curriculum increase negative prejudice?

• What impact does a more social model curriculum have?
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References


