



Attitudinal barrier experienced by people with disabilities

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ABSTRACT

Attitudinal barriers are the most basic and contribute to other barriers. People with disabilities encounter many different forms of attitudinal barriers: inferiority, pity, charity, hero worship, ignorance, the spread effect, stereotypes, backlash, denial, and fear. Unlike physical and systematic barriers, attitudinal barriers often lead to illegal discrimination cannot be overcome simply by laws. The best remedy is acquaintance

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One day when I was returning from my work I witnessed a very pleasant surprise, an adolescent boy was playing as a wicket keeper in the 'galli cricket'¹ match in a para next to ours. I remembered I have seen him working hand in hand with other Clay workers artisans² during Durga Puja³ even I have seen him riding a bicycle. Definitely, you are thinking what is the surprise in these common daily activities of an adolescent. But wait, you might not believe that the boy has only one leg and he is not using any assistive device except a bamboo stick of three fourth height of him. He appears to be happy and well functional communicating friendly to all, very often smiling and even teasing other children. I have not observed any one around him restricting him for anything he does or showing any sign of pity or kindness towards him also not offering anything to him with the same attitude.

One another observation I would like to share, there is an electronic shop on the way to my home and very often I have noticed an adolescent boy seating ideally in front of that shop possibly which is his parent's. he was not allowed to work or touch anything and I have also noticed he tries to interact with people passing by or sometimes children playing or roaming around but no one seems to have interest in him even they try to avoid him. A couple of time I tried to understand but failed what he talks. His appearance is also not very pleasing like the

first boy. He is bit fat and not neatly dressed. I show people has a very sarcastic attitude towards him.

I assumed that the first boy was given enough opportunity to participate so he grown up in various areas and his physical impairment could impose less disability on his life on a contrary the second boy was not allowed even for basic activities even though opportunities were around, which leads worsen his communication or developmental disabilities. People might be having a impairment, disease or disorder causing disability which is a barrier to them but it gets worsen if accumulated with attitudinal barriers.

Human life is full of barriers every individual has to face some of the other barriers in their life course but people with disabilities, experience barriers more frequently and severely which have a greater impact on their life.

A barrier is anything that blocks equitable access to goods, services, or information of a person or group of people. WHO define barriers as, "Factors in a person's environment that, through their absence or presence, limit functioning and create disability. These include aspects such as: a physical environment that is not accessible, lack of relevant assistive technology (assistive, adaptive, and rehabilitative devices), negative attitudes of people towards disability, services, systems and policies that are either non-existent or that hinder the involvement of all people with a health condition in all areas of life."⁴

Often there are multiple barriers that can make it extremely difficult or even impossible for people with disabilities to function. There are the seven most common barriers. Often, more than one barrier occurs at a time: attitudinal, communication, physical, policy, programmatic, social, transportation.⁴

Attitudinal barriers are the most basic and contribute to other barriers. Since physical and other barriers are not due to the

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characteristics of the person or group of people but rather to the attitudes held by others towards that individual or group. Negative attitudes often result in denying basic human and civil rights afforded to other members of their community.⁵

Attitudes are individually attributed emotions, beliefs, and behavioural tendencies an individual has towards a specific abstract or concrete objects such as a person, place, thing, or event.⁶ An attitude can be positive or negative and expression of attitude can be in favour or disfavour which are composed of three interrelated dimensions of personality: affective cognition and behavior. Each dimension is a complex interplay of several factors. Affective (assessing feelings as pleasant or unpleasant), cognitive (concerning beliefs, opinions, and ideas about the attitude object) and behavioural (concerning behavioural intentions or action predispositions) component leads to a *three-component attitude model* also known as *ABC model of attitude*, in which attitudes constitute a hypothetical construct mediating between the observable preceding stimulus and the subsequent behaviour.⁶ In the disability field the first, affective component refers to the emotional reaction one has toward a person with disability. The next component of an attitude is the behavioral. The third and final component of an attitude is the component, and it refers to the way one behaves when exposed to them. Cognitive component refers to the thoughts and beliefs one has about a person with disability. People believe that persons having disability due to mental illness are dangerous and gross so they avoid them.

The term attitudinal barriers is used primarily to explore what happens to individuals with disabilities in the workforce, but these behaviors and beliefs may be present in other areas of the life of people with disabilities. People with disabilities encounter many different forms of attitudinal barriers: inferiority, pity, charity, hero worship, ignorance, the spread effect, stereotypes, backlash, denial, and fear.

Attitudinal barriers may take the form of imposing *inferiority* upon people with disability. Sometimes people with disabilities are thought of as “second class citizens” because a person may be impaired in one of the major function of life. However, the most people with disabilities have some skills that make the impairment questionable in the workplace or in the life. People with disabilities want an equal opportunity to earn a living, attain independence, and compete in the job market; *pity*, feeling sorry for people with disabilities and inclinations towards *charity*, can make a disabled person feel uncomfortable and deprived of the chance to live and work independently. This can also take the form of a *hero worship* when a non-disabled person view to a coworker with disability who lives independently or pursues a profession to be brave or “special” they believe he has overcome all odds to come to work and do their job. Many people with disability feel disability is just an aspect of their personality they have adjusted to and would prefer equal ground with all other employees. People with disabilities are often dismissed as incapable of accomplishing tasks and not given the opportunity to display their skills. The assumption is that the person with the disability simply can't

perform the job but fact is that, people with disabilities really have many abilities too which is *ignored!* One form of this prejudice is known as the Spread Effect, where people treat a disabled person as if their disability has spread to other senses or abilities. For example, many people don't expect people using wheelchairs to have the intelligence to speak for themselves. The other side of the spread effect is stereotypes, which include the positive or negative generalizations people form about disabilities. For example, many people believe that all people who are blind have a keener sense of smell and hearing, or that all people with disabilities are sad and bitter. Aside from diminishing the individual and his or her abilities, such prejudice can set too high or too low a standard for individuals who are merely human. Backlash is another attitudinal barriers in which people believe individuals with disabilities are given unfair advantages, such as easier work requirements. They must do the same job as anyone else hired for that position; however, they may simply do the job in a different way. Many people avoid contact with people with disability because they are *afraid* that they will do something to offend them. They therefore avert their own discomfort by avoiding the individual with a disability. Many disabilities are “hidden” such as learning disabilities, psychiatric disabilities, epilepsy, cancer, arthritis and heart conditions. People tend to believe these are not true disabilities, people reject the need for accommodation by saying that these disabilities are not true disabilities. However, disability is an impairment that “substantially limits one or more of the major life activities.”⁷

Unlike physical and systematic barriers, attitudinal barriers often lead to illegal discrimination cannot be overcome simply by laws. The best remedy is familiarity - getting people with and without disabilities to mingle as coworkers, associates and social acquaintances. In time, most of the attitudes will give way to comfort, respect and friendship.

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