Perception of people with intellectual disabilities by residents of the Tarnów region, Poland

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Abstract

Introduction: Social perception of disability is often a more serious problem than the disability itself. Acceptance of people with disabilities by the social environment is crucial, as it promotes their all-round development better than measures taken in individual rehabilitation. The aim of the study was to analyze the perception of people with intellectual disabilities by residents of the Tarnów region.

Material and methods: The study was conducted by a diagnostic survey method using the author's survey questionnaire in March-May 2023. 314 correctly completed questionnaires were included in the study, completed by people between 18 and 67 years of age (mean 25.97 ± 7.97 years). A significance level of p < 0.05 was adopted.

Results: As many as 32.48% (n = 102) of the respondents admit that they have a person with intellectual disabilities in their family or neighborhood. Among the respondents, 54.14% are familiar with local organizations for people with intellectual disabilities and their families, where 17.20% of people admitted that they have done volunteer work for such an organization. A willingness to become a volunteer for such an organization was expressed by 44.90% of people. Respondents overwhelmingly agreed that people with intellectual disabilities should participate in the life of the local community (91.40%). The majority of respondents (79.62%) believe that intellectually disabled people have the same sexual needs as the rest of society, followed by 15.61% who say they have no sexual needs, and 2.87% associate the sexual needs of intellectually disabled people with their degree and type of disability.

Conclusions: Society shows signs of effortless tolerance – it does not want to have closer relations with people with intellectual disabilities, but at the same time does not mind that such people participate in society. Respondents show insufficient knowledge of the sexuality of people with intellectual disabilities.

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- society

Contribution

- A the preparation of the research project
- B the assembly of data for the research undertaken
- C the conducting of statistical analysis
- D interpretation of results
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Introduction

The terms 'intellectual disability' and 'mental retardation' are used as substitutes in Poland. Nowadays, more attention is being paid to the correctness of the terms used, as some of those used colloquially can have pejorative overtones. Nowadays, there is a trend to say instead of 'person with mental retardation', 'person with intellectual disability' or 'person with mental disability'.¹

According to the DSM–5 (Diagnostic and Statistical Manual of Mental Disorders) classification, intellectual disability is classified under the category of neurode-velopmental disorders. The definition of intellectual disability varies in the literature. In Poland, the definition adopted is: 'a significantly lower than average (IQ 70 and below) general level of intellectual functioning accompanied by a significant limitation of adaptive functioning, at least in two, of the following types of abilities: communication, care for oneself, mode of home life, social-interpersonal skills, use of means of securing work, ways of organizing leisure time, and care for health and safety. The onset of this condition must occur before the age of 18.' ^{2,3,4}

According to estimates, about 1% of the population lives with intellectual disabilities, where the highest percentage occurs between the ages of 10 and 14 and reaches 23%. This is because people with mild intellectual disabilities, once they reach adulthood, can function in a way that does not distinguish them from the rest of the population. People with intellectual disabilities are divided according to the degree of mental retardation: mild occurs in 80%, moderate in 12%, severe in 7%, and profound in 1% of cases.⁵

In the social life of people with disabilities, the opinion and tolerance of people is very important. Awareness of the fact that people with disabilities can also take an active part in public life can make it possible for them to work in dignified positions, earning their own living and in some way take care of themselves without third parties. As Kazanowski notes, social perception of disability is often a more serious problem than disability itself. It is necessary to form the right social attitudes that will foster inclusion, understood as educating for diversity without prejudice, and therefore eradicating stereotypes and discriminatory practices. Acceptance of people with disabilities by the social environment is crucial, as it promotes their all-round development better than measures taken as part of individual rehabilitation.6

The purpose of this study was to assess the level of knowledge about intellectual disabilities and to examine the perception of people with intellectual disabilities by residents of the Tarnów region.

Material and methods

The study was conducted by a diagnostic survey method using the author's survey questionnaire in March--May 2023. The authors' own experience as volunteers for people with intellectual disabilities inspired the topic. The final version of the tool was created after analysing the responses in the pilot study and rewriting unclear questions. The questionnaire in electronic form was posted on websites and online forums for residents of Tarnów and the region. The minimum representative group size was set at 383 questionnaires. However, interest in completing the questionnaire was low, despite the extension of the data collection period from the expected one month to three months. A total of 319 people participated in the voluntary and anonymous survey, of which 314 correctly completed questionnaires were included in the analysis (except for incomplete questionnaires, questionnaires completed by minors were excluded).

It was assumed that the inhabitants of the Tarnów region show considerable tolerance towards people with intellectual disabilities, but without a willingness to integrate with such people, which would result in a low level of knowledge about intellectual disabilities.

The questionnaire consisted of 20 closed questions. The first section of the questionnaire was a metric that collected basic data about the respondent (5 questions). Other questions were designed to determine, among others, how respondents perceive people with disabilities. These included both single and multiple-choice questions. A 4-point variant of the Likert scale without a neutral point (the so-called forced-choice scale) was used in the question exploring respondents' opinions on the equality of people with intellectual disabilities in selected areas.

The data obtained were statistically analyzed using Microsoft Excel of Office 2016 and R software (v. 3.4.0). Quantitative variables were analyzed by counting the arithmetic mean and standard deviation (SD), while qualitative variables were analyzed by presenting the number and percentage of occurrences of each value. Linkage analysis for quantitative variables was performed using *T*-test. *T*-test is a statistical method used to compare two means when the number of respondents, the arithmetic mean, and the standard deviation are known.⁷ A significance level of *p* < 0.05 was adopted.

Results

The study group of 314 people consisted of 77.07% women (242 people) and 22.93% men (72 people). The

3

age of the respondents varied and ranged between 18 and 67 years (mean 25.97 ± 7.97 years). Most of the respondents provided a city as their place of residence (n = 197; 62.74%). Respondents most often had a university degree (n = 110; 35.03%) or were in the process of studying (n=106; 33.76%), with the rest having obtained secondary education (n = 63; 20.06%), vocational education (n = 25; 7.96%) and primary education (n = 10; 3.18%). The largest number among the respondents were those studying (n = 132; 42.04%), followed by those who were economically active (n = 89; 28.34%) and those studying and working at the same time (n = 74; 23.57%). Professionally inactive people were a small group: those who were unemployed (n = 14; 4.46%) and those on pension (n = 5; 1.59%).

To the question 'What does intellectual disability mean to you?' respondents most often answered 'failure to develop fully' (n = 103; 33.12%) and 'inability to cope with daily life' (n = 103; 32.80%), followed by 'inability to live independently' (n = 69; 21.97%) and 'low IQ' (n = 38; 12.10%).

As many as 32.48% (n = 102) of the respondents admit that they have a person with intellectual disabilities in their family or neighborhood. Among the respondents, 54.14% (n = 170) know of any local organizations for people with intellectual disabilities and their families, where 17.20% of people admitted that they have done volunteer work for such an organization. Willingness to become a volunteer for such an organization was expressed by 44.90% (n = 141) of people.

Knowledge about disability was most often drawn by respondents from the Internet/TV (n = 87; 27.71%), from their own experience of close contacts with people with intellectual disabilities (n = 73; 23.25%) and from school (n = 43; 13.69%). Less frequently, information was obtained from relatives of people with intellectual disabilities (n = 27; 8.60%), from special training/ conferences/books (n = 25; 7.96%) and from friends (n = 17; 5.41%). Of those surveyed, 13.38% (n = 42) said they had no knowledge on the subject.

Respondents were then asked what feelings accompany you when you meet a person with an intellectual disability. The most frequently marked responses included compassion (n = 177; 56.37%), kindness (n = 158; 50.32%) and a desire to help (n = 136; 43.31%) – Table 1.

The vast majority of respondents (n = 251; 79.94%) would have no objection to a child with mild disabilities going to kindergarten with their child; the remainder (n = 63; 20.06%) believe that such children should go to special centers.

The most common response to the question 'How do you think people with intellectual disabilities experience the world?' was 'in their own specific way' (n = 221; 70.38%), with much less frequent responses of 'like children' (n = 53; 16.88%), 'the same as healthy people' (n = 35; 11.15%) and 'depends on the degree and type of disability (n = 5; 1.59%).

Table 1. Feelings accompanying respondents in contact with
a person with intellectual disabilities (percentages do not
add up to 100% – multiple choice question)

Emotion	Ν	%
Shame	13	4.14%
Compassion	177	56.37%
Annoyance	26	8.28%
Grief	57	18.15%
Willingness to help	136	43.31%
Reluctance	20	6.37%
Kindness	158	50.32%
Curiosity	50	15.92%
Anxiety	35	11.15%
Sadness	65	20.70%

Source: own materials prepared on the basis of research results.

The majority of respondents (n = 250; 79.62%) believe that people with intellectual disabilities have the same sexual needs as the rest of society, followed by 15.61% (n = 49) who say they do not have sexual needs, and 2.87% (n = 9) associate the sexual needs of people with intellectual disabilities with their degree and type of disability. The remainder answered 'don't know' (n = 6; 1.91%) and one person did not feel comfortable to answer the question (0.32%). Respondents overwhelmingly agreed that people with intellectual disabilities should participate in the life of the local community (n = 287; 91.40%).

Respondents were asked to indicate the extent to which they agree that people with intellectual disabilities should have equal rights with the rest of society in selected areas. The detailed results are shown in Table 2. It was shown that people who are in contact with a person with intellectual disabilities in their close environment to a greater extent believe that people with intellectual disabilities should have equal rights to have a paid job (mean 3.67 ± 0.53 vs. 3.44 ± 0.80 ; p < 0.01). In other areas, there was no significant relationship between having a person with intellectual disabilities in close proximity and opinion on equal rights (p > 0.05).

According to 88.54% (n = 278) of respondents, people with disabilities definitely need the acceptance of the rest of society. The rest (n = 36; 11.46%) believe that

Equality area	Definitely agree	Rather agree	Don't agree	Definitely disagree	MEAN + SD
Having a job (paid)	197	90	20	8	3.51 ± 0.73
Completion of high school	192	93	20	10	3.48 ± 0.75
Playing sports as a team with people without intellectual disabilities	165	97	38	15	3.31 ± 0.86
Raising children	44	90	97	84	2.30 ± 1.01
Being a community leader	64	75	123	53	2.48 ± 1.00
Company management	46	76	109	84	2.27 ± 1.01
Making own decisions	156	112	31	16	3.30 ± 0.84
Voting in elections	106	107	65	37	2.90 ± 1.00
Describing health symptoms to the doctor	185	78	36	16	3.37 ± 0.88
Friendship with people without intellectual disabilities	239	42	19	15	3.60 ± 0.80

Table 2. Respondents' opinions on having equal rights for people with intellectual disabilities in selected areas

Source: own materials prepared on the basis of research results.

such people are indifferent, as they do not understand what is going on around them anyway. To the question 'How would you react if someone insulted an intellectually disabled person in your presence?' respondents most often answered 'I would try to defend him/her' (n = 234; 74.52%), 'I would ignore the situation' (n = 50; 15.92%), 'I would report to the police/ relevant services' (n = 21; 6.69%) and 'I would join in' (n = 9; 2.87%).

Respondents encountered various forms of aggression against people with intellectual disabilities, responses are shown in Table 3. The most common forms of aggression included ridicule (n = 159; 50.64%) and unkind comments (n = 157; 50.00%).

 Table 3. Forms of aggression against people with intellectual disabilities that respondents encountered (percentages do not add up to 100% – multiple choice question)

Forms of aggression	Ν	%
None	13	27.71%
Verbal, e.g. unkind comments	177	50.00%
Physical aggression, e.g. pushing	26	21.97%
Abuse	57	39.49%
Ridicule	136	50.64%

Forms of aggression	Ν	%		
Harassment	20	16.88%		
Sexual violence	158	0.32%		

Source: own materials prepared on the basis of research results.

Discussion

Any disability is a disadvantageous condition for a person. Negative pronouncements about it can contribute to its stigmatizing status, but are not the only reason for this. The vast majority, 91.40% (n = 287) of those surveyed believe that people with intellectual disabilities should participate in the life of the local community, while only 44.90% (n = 141) of people show a willingness to become volunteers in an organization for people with intellectual disabilities and their families. Respondents accept people with disabilities, but do not want to establish a closer relationship with them, which is a sign of effortless tolerance.⁶ The probable reason for this behavior is that contact with people with disabilities of non-disabled people begins not in childhood, where for the child new situations are interesting rather than difficult, and in addition, the meeting is supervised by a parent or educator, but quite accidentally later in life, when such contact usually shocks.8 In addition, non-acceptance and prejudice are more often associated with intellectual disabilities

than with physical disabilities. The manifestation of these negative attitudes leads to the social exclusion of people with intellectual disabilities, which has a number of consequences.⁹

The topic of sexuality of people with intellectual disabilities in society is a taboo subject. Despite the sexual liberation that has taken place in the 21st century, it is possible to encounter many issues that are raised too rarely. According to studies conducted on the biological development of people with disabilities compared to people without disabilities show small disparities. In women with disabilities, the average age for the onset of first menstruation is 12 years, which is normal. It appears that medical personnel working in Primary Health Care Centers do not have sufficient knowledge regarding the sexuality of people with disabilities, which is important in terms of gynecological care. Prevention of cervical and breast cancer in women and testicular cancer in men is often neglected. Sexual and health education for people with intellectual disabilities on, for example, breast and testicular self-examination, as well as sexually transmitted diseases, would be an important issue. People with intellectual disabilities are less likely to engage in sexual intercourse, due to a number of factors, such as overprotective parents and more frequent hormonal problems than in non-disabled people.¹⁰

According to the survey, there is an acceptance in society of hiring people with disabilities. According to our research, 91.39% of respondents believe that people with intellectual disabilities should have the right to have a paid job. The Polish Association for People with Mental Retardation supports the employment of people with disabilities. People with intellectual disabilities most often take jobs in industries such as catering, manufacturing, trade and services.¹¹

A study of Kanar concerning students' attitudes shows that they use terms that are inadequate or refer only to a particular type of disability when defining who a person with a disability is. The study also found that students used colloquial terms and terms of a pejorative nature, such as 'mental' when describing a person with intellectual disabilities. This may indicate a low level of knowledge among students.⁶ Our research shows that as many as 13.38% recognize that they have no knowledge regarding disability.

Conclusions

Society shows signs of effortless tolerance. It does not want to have closer relations with people with intellectual disabilities, but at the same time does not mind that such people participate in society. There is widespread acceptance of employing people with intellectual disabilities so that they can take up gainful employment and develop their careers. Society manifests inadequate knowledge of the sexuality of people with intellectual disabilities, which is also the reason for the neglect of prevention and education of people with intellectual disabilities. Inadequate vocabulary and vocabulary with pejorative overtones used in describing people with intellectual disabilities can function in society due to insufficient knowledge.

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