Tolerance and social inclusion as a condition for successful rehabilitation of persons with disabilities

Tolerantnost’ ta Sotsialna Inkliuziia ye Umovy Uspishnoi Reabiliatsii Osib z Invalidnistyu

Received: April 22, 2022  Accepted: May 30, 2022

Written by:
Kateryna Miliutina
https://orcid.org/0000-0003-0013-2989
Olena Chuiko
https://orcid.org/0000-0001-7088-0961
Viktoria Legka
https://orcid.org/0000-0003-4896-4442
Valentyna Shkuro
https://orcid.org/0000-0001-5893-1260

Abstract

The academic paper is devoted to studying the features of the attitude of teachers, parents, employers towards people from different social groups in need of social inclusion and rehabilitation. A survey of 120 people (40 primary school teachers, 40 parents of healthy children, 40 employees of the State Employment Service of Ukraine) was conducted on their attitude to people in need of social-psychological and social-labour rehabilitation. The survey was conducted in 2 stages. At the first stage, it has been found out whom exactly the respondents consider to be those who require social and psychological assistance and rehabilitation. In the second stage, a modification of the method of E. S. Bogardus has been applied in order to determine social distance. Teachers and parents believe that children with disabilities need rehabilitation, involvement in an inclusive school community and increased attention. Regarding the categories with other health disorders (ADHD and dysgraphia), the viewpoint of teachers is quite unanimous – they know about these students and believe that they need above average teachers’ attention. However, while parents are aware of the presence of children with ADHD, they are almost unfamiliar with children with reading and writing disorders. Children with mental disorders, autism and ADHD have the greatest problems with integration into inclusive communities. They are

Anotatsiya

Стаття присвячена вивченню особливостей ставлення вчителів, батьків, роботодавців до осіб з різних соціальних груп, які потребують соціальної інклюзії та реабілітації. Було проведено опитування 120 осіб (40 вчителів основних класів, 40 батьків здорових дітей, 40 працівників Державної служби зайнятості України) щодо їхнього ставлення до осіб, які потребують соціально-психологічної та соціально-трудової реабілітації. Опитування було проведено у 2 етапи. На першому етапі було з’ясовано, кого саме респонденти вважають тими особами, хто потребує соціально-психологічної допомоги та реабілітації. На другому етапі було застосовано модифікацію методики Е. С. Богардуза з метою визначення соціальної дистанції. Вчителі та батьки вважають, що діти з інвалідністю потребують реабілітації, залучення до інклюзивної спільноти школи та підвищеної уваги. Щодо категорій з іншими порушеннями здоров’я (СДУГ та дизграфія) позиція вчителів є достатньо однотонною – вони знають про їх учинки та вважають, що вони потребують вищої рівень уваги вчителів. Тоді ж батьки знають про наявність дітей із СДУГ, і майже не знатимуть з дітьми, в яких є порушення навичок читання та письма. Найбільші проблеми з інтеграцією до інклюзивних спільнот виникають в дітей з ментальними порушеннями, аутизмом та СДУГ.

85 Doctor of Psychology, Professor of the Department of Developmental Psychology, Taras Shevchenko National University, Kyiv, Ukraine.
86 Doctor of Psychology, Professor of the Department of Social Rehabilitation and Social Pedagogy, Taras Shevchenko National University, Kyiv, Ukraine.
87 Master of Science in Occupational Therapy, Occupational Therapist at Alberta Health Services, Canada, Alberta, Canada.
88 Candidate of Psychological Sciences, Assistant of the Department of Social Rehabilitation and Social Pedagogy, Taras Shevchenko National University, Kyiv, Ukraine.
Introduction

UNICEF identifies inclusive education as the most effective way to give all children a fair chance to go to school, learn and develop the skills they need. Inclusive education means learning possibilities for groups who have traditionally been excluded, like children with disabilities, or speakers of minority languages. Inclusive systems can give unique opportunities for people of all backgrounds to learn together and allow diverse groups to grow side by side, to the benefit of all (UNICEF, n.d.).

The process of implementing inclusive education in Ukraine now covers all components and levels of the education system, as well as intensified researchers to find effective ways to attract people with special needs to the educational and social space. In recent years, inclusive communities have been created in Ukraine, primarily in the educational environment as provided by the Procedure for the organization of inclusive education in general secondary education (Decree, No. 957, 2021), but gradually this process has been covering enterprises, recreational institutions, etc. However, the pace of this process in Ukraine is not as fast as in developed countries. Participants of the educational process unknowingly hinder the adequate implementation of the principles of inclusive education not only due to lack of funds for barrier-free equipment, manuals and teaching methods, but also due to doubts about the feasibility of implementing inclusion. Attitude towards adults belonging to other social minorities or with disabilities is also ambiguous; it does not always contribute to the creation of a normal psychological microclimate in work teams and other communities. Therefore, the study of tolerance, attitudes of teachers, parents, employers to people in need of social inclusion and rehabilitation, as well as psychological factors that promote or hinder the development of inclusive communities, is especially relevant for successful rehabilitation of people with disabilities in Ukraine.

Literature Review

In recent years, the term “inclusive communities” has increasingly appeared at the political, practical and theoretical levels, based on various disciplinary positions. An inclusive community values all its members and helps them meet basic needs and provide them with the possibility to live with dignity, actively participate in various activities and contribute to their community. Inclusive education in secondary school is the first step for the development of inclusive communities; this issue has been discussed in detail in our previous study (Miliutina, 2017). The implementation of such training is an essential component of the development of inclusive communities in Ukraine. The basic principles, inherent in inclusive education, have been proposed by G. P. Kaidalova (2015) based on the analysis of foreign experience, namely: the value of a person does not depend on his abilities; everyone can think and experience certain feelings; everyone has the right to communicate and to be heard; all people need each other; real education can only take place in the context of real relationships; all people need support and friendship of peers; for all learners, making progress is what they can do, not what they can’t do; diversity adorns all aspects of human life. The peculiarity of inclusive education lies in its dynamism, forasmuch as there is a constant adaptation of the learning conditions to the individual characteristics of each student. Yu. G. Nosenko and co-authors (2015) have conducted a thorough study, in which the features of inclusive education are proposed, the categories of persons who can receive support within the framework of inclusive education are identified, the main types of psychophysical disorders and the functional
limitations caused by them are indicated, the main conditions for the successful implementation of inclusive education are highlighted. O. Golubovych (2012) believes in tolerance and protects the rights of the individual. Along with this, unfortunately, in practice, the involvement of children with special educational needs in the training process of a general secondary school, according to the viewpoint of O. Ye. Gordichuk (2015), causes complications and even problems affecting the quality of education. A. A. Verbenets (2016) adheres to the position that the inclusiveness of education contributes to the social integration and rehabilitation of adults with disabilities, and the root cause of such situations is usually insufficient development of professional competence of teachers of inclusive classes.

In English-language publications (Johnson, 1982), (Wiggins, 1988), (Andrews, 2000), active attention is drawn up to the problems of tolerance, political correctness and communication in inclusive communities; however, insufficient attention is paid to the psychological factors of the role of tolerance in social-psychological rehabilitation aspects of coexistence within inclusive communities. While analysing publications on inclusive school communities, it has been revealed that most publications focus on addressing the issues of tolerance and inclusion of children. The qualitative study (Hazel, & Allen, 2013) has examined how schools create inclusive communities. From the analysis of open interviews with members of 3 state elementary schools in the United States, 3 topics have emerged, namely:

1) community and culture;
2) structure;
3) responsibility and expectations.

The emphasis on promoting inclusiveness in communities and a conscious focus on culture and school affiliation was universal: members of the school wanted to be in this school; there was a strong faith in pedagogy, and all members of the school community clearly understood that their most important result is the success of students. Each school had three basic principles of pedagogy as follows: academic education, education of the emotional sphere of the personality and individualization of training. Each school expected that adults and students would set and achieve high goals of behaviour and learning. Recommendations have been provided for the application of these findings by practitioners and researchers (van Rhijn et al, 2021). In order to provide information about the development of an inclusive national childcare system for all families and children, we investigate the institutional engagement of 127 Canadian families with children with disabilities. Our analysis has revealed that families had been participating in many services from an early age, however, 79.5% were excluded. Using institutional ethnography, we show that exclusion occurs through the policies and rules that families face in order to gain access, maintain enrolment, and combat professional metatexts. In the scientific work of Gunn, A. C. (2003), key considerations on human rights, economics, and inclusion policy have been represented. Our analysis shows that families participated in many early childhood services, but 79.5% were excluded. From the point of view of institutional ethnography, we show that exclusion occurs within the framework of policies and rules that families should follow in order to be accepted, to maintain enrolment, and to deal with professional metatexts. Key considerations based on economic rights and inclusion policies are given. Our studies and policy considerations recognize not only the importance of inclusion in childcare, but also the role of childcare in creating inclusive communities. These families are involved in a vast amount and variety of services, including services related to their child’s age. Disability status may increase access in some cases; however, this may prevent others from accessing. Nevertheless, child care workers can have an impact on the social rehabilitation of children of early age.

Lundberg, E. (2018) has conducted a study of the role of a positive school context for tolerance among Swedish students aged 14 to 20, while taking into account competing explanations, such as social networks and personal traits. The results show that factors at the school level are related towards tolerance. Herewith, social-economic factors and social networks tend to play a more important role. The study is concluded by drawing attention to the role of schools as inclusive communities for students of different ethnic and social groups.

Francis, G., & Nagro, S. (2017) believe that the education system is the one that almost all families with a child with a mental disability should interact with. For some families, involvement in the rehabilitation system and inclusive education can begin as early as childhood. This section provides an overview of the legal requirements of the Law on Education for Persons with Disabilities (IDEA). Strategies
are provided that educators, families, and others can use in order to effectively communicate and maximize students’ and family’s outcomes. The benefits of family-professional partnership are well documented in the educational literature and extend to students in need of rehabilitation, teachers and families. Families and professionals review the strategies presented in this chapter for developing or rebuilding relationships so that stakeholders can work together to prevent or overcome barriers. Effective communication is the basis for developing positive relationships and working partnerships. Professionals, who maintain a relaxed, friendly nature of communication, feel more partnership between families and can raise family expectations regarding their children.

Watson, K. (2016) has reflected on tolerance within the “inclusive” early period. Tolerance and friendliness towards everybody are narratives that are shared and accepted by children in an “inclusive” classroom. Tolerance is perceived positively as a common and useful course of action when it is implemented, starting from the primary grades of school.

Cole, E., & Siegel, J. A. (2003) have also studied inclusiveness in the classroom. However, under more careful and critical consideration, tolerance can work in many other ways. Tolerance is usually perceived as a personal virtue creating a positive attitude towards the personality of the other person and, conversely, a position of intolerance for violations. Although tolerance has multiple and flexible definitions, however, in the present academic paper, this term means a generous act or the ability to tolerate something or someone. The practice of tolerance combines kindness and generosity with aversion to dangerous and aggressive behaviour. In such conditions, a child in need of social-psychological rehabilitation can form his identity and his otherness, as well as his affiliation and marginality. The school supports the idea of “inclusive learning communities”, where normativeness and disability are perceived as aspects of diversity.

Along with this, the issues of inclusive communities are not only school problems, social inclusion should be developed at the level of the community, neighbours, businesses, etc. Arthurson, K. (2002) has explored particular fundamental assumptions related to public housing strategies with “social cohesion” strategies in contemporary Australian public housing regeneration policy. The empirical analysis is based on six estates, that is, two estates in New South Wales, South Australia and Queensland. Two main ideas emerging from projects in South Australia and Queensland are as follows: firstly, reducing the concentration of public housing and developing mixed-income communities offers a way to reconnect socially disadvantaged tenants with mainstream society; secondly, a balanced social cohesion is a prerequisite for the development of “inclusive”, “sustainable” and “cohesive” communities. Becker, P. E. (1998) considers the problem of inclusiveness in religious communities; the author believes it is an indispensable part of the modern world.

An interpretive study of Trussell, D. E. (2020) examines the complexity of lesbian parents’ experiences in organized youth sports programs. In particular, he seeks to understand youth sports as a potential place for social change, which contributes to a sense of an inclusive community for various family structures. Using thematic analysis, the author examines the viewpoints of nine participants from Australia, Canada and the United States. The emphasis is placed on the fact how lesbian parents influence on the common understanding of inclusive sports culture. The results draw particular attention to the significance of intentional and unintentional actions (by families, as well as sports organizations) creating a sense of community and inclusive organizational culture. The interaction of the experience of lesbian parents with broader concepts such as sexual stigma and transformational services is also explored in the context of youth sports.

Munford, R., Sanders, J., & Maden, B. (2010) draw attention to the fact that in the development of inclusive communities, the interests of persons with social-economic disadvantages should also be taken into account. It has been specified how support services can work more effectively towards developing family and community capacity for children and families living in socially and economically disadvantaged environments. In addition, the article explores new approaches meeting the needs of families, even as they build caring/accepting (careful) and inclusive communities. The issue is discussed in the context of a public agency that uses sensitized practices to change the lives of socially and economically disadvantaged families.

Grassi, R. (2018) provides specific advanced practices to librarians for young adults and adolescents in order to develop positive, effective, and tolerant relationships with young adults with disabilities in the library. Using the
author’s professional library experience and citing other published works, this scientific work represents customer service strategies for librarians and library employees. These strategies are as follows: talk directly to the teenager; consider communication and language; develop mutual understanding; respect their privacy. Along with this, this article offers different methods of working with parents and caregivers, forasmuch as the development of positive relationships with parents is an integral part of the development of positive relationships with adolescents.

Based on a review of previous investigations, it can be assumed that in order to create effective working inclusive communities, people should possess a high level of tolerance towards certain population groups, tolerance towards thoughts and attitudes, as well as tolerance towards uncertainty. In order to conduct a detailed research of tolerance in the context of inclusive communities, it is necessary to identify factors contributing to or hindering the acceptance of people who differ from others.

The purpose of the research lies in studying the attitude of teachers, parents, employers towards people from different social groups in need of social inclusion and rehabilitation.

The Research Methodology

To study the attitude to people in need of socio-psychological and social-labor rehabilitation during 2020-2021, a survey was conducted among 120 people, namely: 40 primary school teachers from different regions of Ukraine; 40 parents of children from different regions of Ukraine attending primary school; 40 employees of the State Employment Service of Ukraine, whose responsibilities include promoting the employment of persons with disabilities and other people in need of social and labour rehabilitation. The survey was conducted voluntarily, anonymously and consisted of 2 stages.

At the first stage, the respondents have mentioned who, in their opinion, requires rehabilitation, and they have assessed this need from 1 to 7 points, the respondents could mention several categories. In the groups of teachers and parents, the survey has concerned children. In the group of employment service workers, the survey has concerned adults.

At the second stage of the research, a modification of the Bogardus social distance research methodology was proposed. Based on the interviews with the respondents, a specific scale of social distance was created, measuring the distance with children and adults in an inclusive community. Regarding children, the following scale has been created:

“I agree that a child from this social group

1. Will make friends with my child, and they will go to each other’s house. 1 p.
2. Will sit at the same desk with my child. 2 p.
3. Will study with my child in the same class. 3 p.
4. Will study with my child in the same circle, section. 4 p.
5. Will sometimes play on our playground. 5 p.
6. Will study at a special school. 6 p.
7. Will study and stay in a special boarding school. 7 p.

Choose one of these statements that best reflects your attitude toward this social group”.

The scale for adults was aimed at assessing social distance in working relationships.

“I agree that a person from this social group

1. Will be my boss. 1 p.
2. Will be my subordinate. 2 p.
3. Will work with me in one department (subdivision). 3 p.
4. Will work in the same organization with me. 4 p.
5. Will work in the same organization with me, but remotely. 5 p.
6. Will be my client, customer, and provide services to me. 6 p.
7. Will no working relationship with me. 7 p.

Choose one of these statements that best reflects your attitude toward this social group”.

The survey revealed the attitudes of teachers, parents, employers towards people from different social groups in need of social inclusion and rehabilitation, as the success of inclusion depends on their attitudes and mediation.

Results

The results of the first phase of the survey among teachers and parents on who they think need rehabilitation are shown in Table 1.
Table 1.
Categories of children in need of rehabilitation and inclusion.

<table>
<thead>
<tr>
<th>Categories of children</th>
<th>The number of teachers who mentioned them</th>
<th>The number of parents who mentioned them</th>
<th>The need for rehabilitation (points) from the position of teachers</th>
<th>The need for rehabilitation (points) from the position of parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children with disabilities</td>
<td>With movement disorders 40</td>
<td>39</td>
<td>6,3</td>
<td>6,9</td>
</tr>
<tr>
<td></td>
<td>With visual impairments 34</td>
<td>27</td>
<td>5,8</td>
<td>6,3</td>
</tr>
<tr>
<td></td>
<td>With hearing impairment 35</td>
<td>33</td>
<td>6,7</td>
<td>5,2</td>
</tr>
<tr>
<td></td>
<td>With mental disability 40</td>
<td>32</td>
<td>5,1</td>
<td>6,9</td>
</tr>
<tr>
<td></td>
<td>With autism spectrum disorders 32</td>
<td>40</td>
<td>6,8</td>
<td>6,8</td>
</tr>
<tr>
<td>Children with ADHD 37</td>
<td>40</td>
<td>5,4</td>
<td>3,2</td>
<td></td>
</tr>
<tr>
<td>Children with dysgraphia 35</td>
<td>15</td>
<td>6,3</td>
<td>2,9</td>
<td></td>
</tr>
<tr>
<td>Children from disadvantaged families 23</td>
<td>38</td>
<td>2,6</td>
<td>5,6</td>
<td></td>
</tr>
<tr>
<td>Children from low-income families 19</td>
<td>37</td>
<td>1,3</td>
<td>4,8</td>
<td></td>
</tr>
</tbody>
</table>

Source: Created by the authors

There were single mentions of other categories of children: children with diabetes, migrants, internally displaced persons, adopted children. However, due to the fact that most of the respondents did not mention them, they were not taken into account in the further research. As it can be seen from Table 1, both parents and teachers believe that children with disabilities need rehabilitation, involvement in an inclusive school community and increased attention. Regarding the categories with other health disorders (ADHD and dysgraphia), the position of teachers is quite unanimous – they know about these students and believe that they need above average teachers’ attention. On the one hand, parents are aware of the presence of children with ADHD, however, on the other hand, they are almost unfamiliar with children with reading and writing disorders. Parents do not think that these children need special attention. Children from disadvantaged and low-income families attract the attention of parents (because parent committees help them), but not teachers.

When interviewing employees of the State Employment Service of Ukraine, the following results have been obtained, reflected in Table 2.

Table 2.
Categories of adults in need of rehabilitation and inclusion.

<table>
<thead>
<tr>
<th>Categories of adults</th>
<th>The number of employees who mentioned them</th>
<th>The need for rehabilitation (points)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons with movement disorders 40</td>
<td>6,8</td>
<td></td>
</tr>
<tr>
<td>Persons with visual impairments 40</td>
<td>6,9</td>
<td></td>
</tr>
<tr>
<td>Persons with hearing impairment 40</td>
<td>6,9</td>
<td></td>
</tr>
<tr>
<td>Persons with mental disability 32</td>
<td>4,7</td>
<td></td>
</tr>
<tr>
<td>Persons with other disorders (cardio, diabetes, etc.) 35</td>
<td>3,6</td>
<td></td>
</tr>
<tr>
<td>Persons with mental disorders 22</td>
<td>4,7</td>
<td></td>
</tr>
<tr>
<td>Persons released from places of imprisonment 38</td>
<td>4,1</td>
<td></td>
</tr>
<tr>
<td>Participants in hostilities 40</td>
<td>3,8</td>
<td></td>
</tr>
<tr>
<td>Forced migrants 25</td>
<td>3,7</td>
<td></td>
</tr>
</tbody>
</table>

Source: Created by the authors
The employees of the State Employment Service of Ukraine clearly identify people with disabilities and believe that they need special assistance in order to integrate into the working community. Workers have explained the lower indicators of the need for intervention in relation to persons with mental disabilities by the fact that they do not believe in the effectiveness of their own efforts. According to experts’ viewpoints, employers do not want to hire people with these disorders. The Employment Service of Ukraine has special programs to help the military, migrants and people who have returned from places of imprisonment. However, employees believe that, unlike people with disabilities, representatives of these categories need much less help and can find a job on their own.

The results of the second stage of the research with the modification of the Bogardus social distance scale between parents and teachers are reflected in Table 3.

**Table 3.**
**Social distance for children in need of social rehabilitation.**

<table>
<thead>
<tr>
<th>Categories of children</th>
<th>Social distance according to teachers’ viewpoints</th>
<th>Social distance according to parents’ viewpoints</th>
</tr>
</thead>
<tbody>
<tr>
<td>With movement disorders</td>
<td>2.8+/−0.71</td>
<td>1.3+/−0.50</td>
</tr>
<tr>
<td>Children with visual impairments</td>
<td>1.7+/−0.83</td>
<td>1.9+/−1.12</td>
</tr>
<tr>
<td>with hearing impairment</td>
<td>3.9+/−0.75</td>
<td>2.6+/−0.85</td>
</tr>
<tr>
<td>disabilities</td>
<td>5.8+/−0.55</td>
<td>6.8+/−0.98</td>
</tr>
<tr>
<td>with autism spectrum disorders</td>
<td>6.1+/−1.17</td>
<td>4.6+/−0.62</td>
</tr>
<tr>
<td>Children with ADHD</td>
<td>4.9+/−0.26</td>
<td>5.9+/−1.78</td>
</tr>
<tr>
<td>Children with dysgraphia</td>
<td>2.6+/−0.54</td>
<td>1.8+/−0.13</td>
</tr>
<tr>
<td>Children from disadvantaged families</td>
<td>5.1+/−0.72</td>
<td>6.2+/−0.66</td>
</tr>
<tr>
<td>Children from low-income families</td>
<td>5.4+/−0.97</td>
<td>4.6+/−0.91</td>
</tr>
</tbody>
</table>

Source: Created by the authors

There is a relatively small social distance for children with disabilities caused by disorders of the musculoskeletal system, hearing and vision. The most tolerant and friendly attitude is towards children with visual impairments; most parents and teachers would not object to friendly and close relationships while studying with these children. The distance with children with motor impairments is somewhat longer and different; teachers have a positive attitude towards these children in the classroom, and parents do not object to friendly relations. As for children with hearing impairments, the situation is somewhat worse: parents and teachers are willing to treat them tolerantly within school and nonformalized education, but not in friendly relations. During the conversation, the respondents have explained their position by the fact that in order to communicate with people with hearing impairments, children should make efforts: master lip-reading, study dactyl. The category of children with dysgraphia also causes a fairly tolerant attitude on the part of adults.

The greatest problems with integration into inclusive communities have been revealed regarding children with mental disabilities, autism and ADHD. They are ready to be perceived at the maximum social distance – in a special school, in a boarding school, except sporadically on the playground. Adults, who have not had experience of communicating with these categories of children in their own childhood, feel anxious about their “unpredictable” behaviour, possible aggression.

Children from disadvantaged and low-income families are also perceived as “undesirable” for secondary school, forasmuch as teachers expect them to misbehave, and parents expect them to be a “bad influence” on their own children.

The social distance regarding adults in the work environment also depends on their physical and mental condition, as shown in Table 4.
Table 4.
Social distance regarding adults in need of social rehabilitation

<table>
<thead>
<tr>
<th>Categories of adults</th>
<th>The number of employees who mentioned them</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons with movement disorders</td>
<td>4.3±1.82</td>
</tr>
<tr>
<td>Persons with visual impairments</td>
<td>2.7±0.56</td>
</tr>
<tr>
<td>Persons with hearing impairments</td>
<td>3.4±1.15</td>
</tr>
<tr>
<td>Persons with mental disability</td>
<td>5.9±0.34</td>
</tr>
<tr>
<td>Persons with other disorders</td>
<td>1.6±0.37</td>
</tr>
<tr>
<td>Persons released from places of imprisonment</td>
<td>6.6±0.93</td>
</tr>
<tr>
<td>Participants in hostilities</td>
<td>5.3±1.28</td>
</tr>
<tr>
<td>Forced migrants</td>
<td>3.3±0.97</td>
</tr>
</tbody>
</table>

Source: Created by the authors

As it can be seen from Table 4, the biggest problems with integration do not arise from the fact of a disability, but from behavioural disorders. Therefore, persons released from places of imprisonment, persons with mental disabilities are perceived as the most unfit to stay in working communities.

Discussion

Bogardus technique, which has been modified by us, attracts the attention of modern scholars and raises particular objections. For instance, O. A. Gorbachyk (2005) draws attention to the fact that for current residents of Ukraine, the scale of social distance differs from that proposed by Bogardus. Rostova, A. V., & Zhelnina, E. V. (2017) have successfully modified this scale in order to study the attitude towards innovations.

Albrecht, G. L., Walker, V. G., & Levy, J. A. (1982), conducting their investigation 40 years ago, tested the relative benefits of theories in explaining conscious social distance to people with disabilities and people with deviant behaviour in the professional environment. Perceived social distance was measured using a modified Bogardus scale. Respondents expressed greater social distancing towards people with deviant behaviours, such as people with alcohol and drug addiction, than towards people with disabilities, such as those with motor and visual impairments. Ruzhenkov, V. A., Ruzhenkova, V. V., & Churnosova, O. I. (2017) also carried out a modification of this technique and revealed, as in our research, an intolerant attitude towards persons with mental disabilities. Students of medical specialties allow persons with suicidal behaviour and marginal mental disorders to a distance farther than “neighbours down the street”, and people with psychiatric disorders (psychosis) – even more remotely than “residents of their city”. Abidin, S. A., & Irwanto, I. (2021) examined the attitudes of students from related academic directions, such as medicine, psychology, and counselling towards people with schizophrenia according to the Bogardus social distance scale. The study was conducted among 230 students. The results show that students of the healthcare sphere have serious stigma problems. Most students do not want to include a person with schizophrenia as a member of their family or caregiver. Students who have previously been in contact with them tend to less stigmatization level. However, students who have family members with schizophrenia have higher stigmatization level.

Ouellette-Kuntz, H., Burge, P., Brown, H. K., & Arsenault, E. (2010) studied a large sample of 625 community members; they used a subscale of social distance attitude towards people with intellectual disabilities. Older and less educated participants had positions reflecting greater social distance. Participants, who had a close family member with intellectual disabilities, and those, who considered the average disability to be “mild”, showed less social distance. The limited variability of scores forces the authors to question our general conclusion about a very favourable attitude to social interaction with people with intellectual disabilities.

The current state of the problem is reflected in the scientific work of Firat, T., & Koyuncu, I. (2021). 1293 students in Turkey were studied. The results showed that the participants indicated the greatest social distance towards people with intellectual disabilities and autism spectrum disorders, and the smallest – towards gifted people (people with genius). It has been revealed that most university students do not prefer to “marry”, “become a close relative through marriage” and “become a colleague (employee)” with people with disabilities. The results have also shown that students’ knowledge of groups
with students with disabilities and the frequency of their contact with persons with disabilities are significant factors influencing their social distance. Thus, the results of our research coincide with those obtained in other scientific investigations on studying tolerance issues and social distance.

Conclusions

As a result of our research, it has been established that people in need of social-psychological rehabilitation include not only people with disabilities, but also children and adults with behavioural and social disorders. For both children and adults with visual and motor impairments, the smallest social distance was observed. The longest distance was observed for people with mental and psychological disorders, as well as deviant behaviour. It did not depend on the disability group. An obstacle to social inclusion is prejudice against these individuals, which (according to the literature findings) has been lasting at least for 40 years.

Directions for further research. A promising direction lies in studying the influence of the communication experience with persons with physical and mental disabilities on the level of tolerance and social distance.

Bibliographic references


