

Investigating the impact of an inclusive teaching session on medical student attitudes towards patients with intellectual disabilities: a mixed methods study

C4ME SUPPLEMENT

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Background

Patients with intellectual disabilities have complex health needs and are a vulnerable population of society. (1) They have a greater risk of physical and mental health problems yet face countless barriers to accessing healthcare. (1-5) Enquiries into the healthcare system have shown patients with intellectual disabilities experience inequalities in healthcare, including access and quality of care received. (2-5) Reports found negative attitudes amongst healthcare professionals, a widespread lack of training and cases of avoidable early mortality. (2-5)

Furthermore, research has shown that undergraduate medical education in intellectual disabilities is inconsistent and inadequate, with students reporting high levels of anxiety about communicating with patients with disabilities. (6-9) The attitudes that medical students hold are critical as they are tomorrow's doctors, and attitudes can have a significant impact on a patient's experience in the health service. (6)

Cardiff University has developed a pioneering partnership with Hijinx, a Welsh theatre company working with professionally trained actors with intellectual disabilities. All fourth-year medical students attend a communication skills teaching session where they role play clinical scenarios with Hijinx actors. This allows inclusive teaching to take place, where individuals with intellectual disabilities have a direct role in the development and delivery of education about them. (9)

This study looked at the effectiveness of this teaching session in changing student attitudes and perceptions about patients with intellectual disabilities.

Methods

A mixed methods approach was chosen for the study. This combination allowed qualitative exploration of quantitative results, so that a greater depth of understanding could be built.

For quantitative data collection, the Attitudes Towards Disabled People questionnaire (ATDP-B) was used to measure student attitudes. (10) This is a validated tool that is in the public domain and was found to be reliable at measuring medical student attitudes in a previous study (Reliability = 0.71). (6) The questionnaire includes thirty statements regarding individuals with disabilities, with a Likert response scale. Higher scores are achieved if the respondent regards someone with a disability as similar to the average person.

66/110 (60%) of year 4 students attending the communication skills session on intellectual disabilities completed the ATDP-B questionnaire, both before and after the teaching. Before and after scores were collated and compared using a paired t-test analysis.

Anonymised ATDP-B questionnaires were used to calculate general student perceptions. For each statement, the overall positive and negative responses were aggregated. This data was used to conduct five semi-structured interviews (1:1) and one focus group with nine students. The common perceptions were discussed, alongside how the teaching session tackled them and suggestions for further improvements.

Ethical approval for this study was granted by the Cardiff University School of Medicine Ethics Committee.

Results

Mean ATDP-B score before the teaching session was 115 (SD = 14.5). Mean ATDP-B score after the teaching session was 122 (SD = 17.2). The teaching session improved scores in the ATDP-B by a mean of 6.92 (4.69, 9.16). A paired t-test found this to be a statistically significant difference, $t(65) = 6.20$, $p < .001$.

Qualitative data was thematically analysed and four main themes were identified: student identity, patient contact, equity in healthcare and curriculum content.

Students discussed the impact of a lack of exposure, and how reluctance to communicate with intellectually disabled patients often stems from feeling unprepared and incompetent rather than prejudice, as without prior experience they do not understand how to communicate. Furthermore, exposure is key for building emotional understanding. A critical outcome of the teaching session was students developing empathy and a new understanding of this vulnerable patient group, which are essential for effective communication. The students also identified communication to be the biggest barrier in delivering healthcare to intellectually disabled patients, and thus the strength of this session stems from its focus on effective communication.

Furthermore, students highlighted the pressure as medical students to have egalitarian attitudes, which contrast the needs of intellectually disabled patients, who require special attention and adjustments to be made.

Discussion

The results identified that the teaching session improved student attitudes towards individuals with intellectual disabilities, which is supported by previous studies. This is a significant finding as the attitudes of healthcare professionals are one of the root causes for the health inequalities seen. (2)

This was the first study to investigate the origin of the negative attitudes of medical students, and found they stem from a lack of confidence in their abilities and failure to develop a professional identity. The impact of the teaching session stems from its focus on meaningful patient contact and identifying and overcoming communication barriers. This is significant as it shows students should not be vilified for their uninformed attitudes, and rather it signifies that meaningful clinical exposure is essential at undergraduate level, to adequately prepare students for their professional role.

A potential limitation is the absence of clinical knowledge due to the singular focus on communication. Integration of communication skills and clinical knowledge, as well as repeated teaching throughout the curriculum could further improve this teaching session.

Lessons Learnt

Conducting this research project was a big challenge for me, as I had no experience in research, but an overall gratifying process. I enjoyed learning about a single topic in great detail, particularly one that is given little focus in the medical curriculum.

It was an eye-opening experience as I had little prior knowledge on intellectual disabilities, particularly on the health inequalities faced. The project helped me gain a patient perspective on how our interactions with patients carry more significance than we realise, and how unconscious bias can have a real impact on patient outcomes.

I found it difficult to be impartial when conducting the project, as it is an emotive topic that has a real impact on people's lives. However, on reflection, I think to negate emotions would take away from the heart of this project, which is how human factors such as communication can have an impact on health.

Furthermore, this project has helped prepare me for my professional practice as I have gained knowledge on the clinical and communication needs of this patient group. Understanding the difficulties and inequalities faced will mean I can have meaningful and informed interactions with these individuals.

References

- Emerson E, Baines S. Health inequalities and people with learning disabilities in the UK. *Learning Disability Review*. 2011;16(1):42-48.
<https://doi.org/10.5042/tldr.2011.0008>
- Michael J. *Healthcare For All: A Report of the Independent Inquiry into Access to Healthcare for People with Learning Disabilities*. Department of Health: London; 2008.
- Mencap. *Death by Indifference: Following up the Treat Me Right report*. London: MENCAP; 2007 [accessed 23 January 2019]. Available from: <https://www.mencap.org.uk/sites/default/files/2016-06/DBIreport.pdf>.
- Disability Rights Commission. *Equal Treatment: Closing the Gap*. London: Disability Rights Commission; 2006 [accessed 23 January 2019]. Available from: <https://disability-studies.leeds.ac.uk/wp-content/uploads/sites/40/library/DRC-Health-FI-main.pdf>.
- Mencap. *Treat Me Right: Better Healthcare for People with Learning Disability*. London: MENCAP; 2004 [accessed 23 January 2019]. Available from: https://www.mencap.org.uk/sites/default/files/2016-08/treat_me_right.pdf.
- Kritsotakis G, Galanis P, Papastefanakis E, Meidani F. Attitudes towards people with physical or intellectual disabilities among nursing, social work and medical students. *Journal of Clinical Nursing*. 2017;26:4951-4963.
<https://doi.org/10.1111/jocn.13988>
PMid:28771877
- Watkins LV, Colgate R. Improving healthcare for people with intellectual disabilities: the development of an evidence-based teaching programme. *Advances in Mental Health and Intellectual Disabilities*. 2016;10(6):333-341.
<https://doi.org/10.1108/AMHID-07-2016-0009>
- Campbell FK. Medical education and disability studies. *Journal of Medical Humanities*. 2009;30(4):221-35.
<https://doi.org/10.1007/s10912-009-9088-2>
PMid:19756985
- Trollor J, Ruffel B, Tracy J, Torr JJ. Intellectual disability health content within medical curriculum: an audit of what our future doctors are taught. *BMC Medical Education*. 2016;16:105.
<https://doi.org/10.1186/s12909-016-0784-0>
<https://doi.org/10.1186/s12909-016-0625-1>
PMid:27066776 PMCID:PMC4827238
- Yuker H. E., Block J. R., Young J. H. *The measurement of attitude toward disabled persons*. Albertson, NY: Human Resources Center; 1996.



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