NIgerians’ Attitudes Toward People with Disabilities

by

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Abstract

The study investigated Nigerians’ overall attitudes toward people with disabilities, attitudes toward employment and people with disabilities, attitudes toward living arrangements and people with disabilities, and attitudes toward people with mental disabilities and other groups. The target population of this study was Nigerians residing in Sacramento and surrounding counties in California. The sample of this study was made up of 100 members of Sacramento Association of Nigerians using the non-probability convenience sampling method with no exclusion criteria. Data were collected through self-administered survey questionnaire, using an adapted version of the Scale of Attitudes toward Disabled Persons (SADP) (Antonak, 1982; 1985) and demographic questionnaire. A synthesis of information collected from the responses of the sample to the SADP and to the demographic questionnaire helped the researcher to draw conclusion, implications, and recommendation. This study found that the majority of Nigerians in the Sacramento area had positive attitudes toward people with disabilities. There were significant differences among the participants based on age. Participants age 46 or more had significantly lower mean attitudes toward disabilities scores compared to participants age 36-46 and those 35 or less. However, there were no significant differences revealed on living arrangements and people with disabilities, people with disabilities in the workforce, and attitudes toward people with mental disabilities and other vulnerable groups by age. Results of the ANOVAs on overall attitudes, attitudes toward people with disabilities in the workforce and attitudes toward people with mental disabilities and other groups were significant, suggesting that participants’ overall attitudes, attitudes toward people with disabilities in the workforce, and attitudes toward
people with mental disabilities and other groups differed by Years of residency in the United States of America. Tukey post hoc tests conducted revealed that participants residing in the United States of America between one to four years had significantly lower Overall attitudes and attitudes toward people with mental disabilities and other groups scores compared to participants residing in the USA between five and 10 years.
Dedication

I dedicate this dissertation to my wife Rosemary for her unwavering support and encouragement during my years of study, and to my parents. I also dedicate this dissertation to my daughters, Onomeasike and Omoye for keeping themselves occupied while I was engaged in this venture.
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CHAPTER 1 INTRODUCTION

A healthy society is one in which an obvious effort is made in order to get people with diverse backgrounds to work together towards the society’s goals (Bruhn, 1996). Although this is a difficult task, some societies have made and continue to make conscious efforts aimed at achieving this purpose through enacting of laws prohibiting discrimination based on race, ethnicity, national origin, gender, marital status, sexual orientation, age, color, and disabilities. They also established governmental agencies to ensure that these anti-discrimination laws are enforced. For example, to ensure inclusivity, the United States government requires all federal government agencies and contractors with over $50,000 or more in annual contracts to conduct workforce utilization analysis and have affirmative action plans to ascertain whether their respective workforce is a reflection of what is attainable in the immediate environment where the agency is situated (EO 11246).

According to the United Nations (2003), Nigeria has roughly 12 million citizens who are disabled. This disabled population includes people with functional limitations such as physical, intellectual, or sensory impairment, medical conditions, or mental illness. The history of this group can be characterized by marginalization, silence, and invisibility. According to the Center for Law Enforcement Education (CLEEN) report (2004), people with disabilities are the least cared for, and they experience widespread discrimination from their families and the Nigerian society in general. Most families in Nigeria who have a disabled family member are afraid of being ridiculed and laughed at
by their neighbors and the public; therefore, they tend to keep the disabled person indoors and in isolation. Okafor (2003) wrote that people with physical disabilities in Nigeria are often seen as a disgrace to their families; therefore, they are often confined to discrete places where people will not readily notice them. By such measures, the disabled person is prevented from participation in normal activities such as educational, economic, political, and social pursuits.

Within most ethnic groups in Nigeria, it is generally believed that the disabled person is either a curse from the gods or has been disabled through an act of witchcraft. In either case, the family with a disabled member is stigmatized. According to Okafor, “some local ancient mythology has it that the disabled are social outcasts serving retribution for offences of their forefathers” (p. 5). Ibiam (2004) stated that the rate of ignorance among the Nigerian populace is high because mental illness is always associated with super-natural causes such as witchcraft or breach of a taboo or customs; therefore, the real causes of mental illness are neglected or disregarded because of such beliefs.

Generally, families bear the brunt of caring for the disabled throughout their lives. Those who cannot stay with their families are usually ostracized and their legal rights, including the right to live peacefully, are threatened because of the general misconception that disabled people are either fiends or witches not worthy of human status. Thus, they often become homeless because of poverty and/or shame. According to Okafor (2003), people with physical disabilities in Nigeria have a heavy psychological burden due to social deprivations coupled with their struggle for economic survival.
Statement of the Problem

This study sought to investigate the general attitudes of Nigerians toward Nigerian people who are believed to be cursed because of their disabilities. In most cases, these persons are perceived as being cursed by the gods or by an act of witchcraft. In either case, families with disabled members are often stigmatized and sometimes even ostracized by their communities.

Background of the Problem

Since Nigeria gained independence in 1960, different ethnic groups at different times have accused the Nigerian Government of marginalization. This perception has resulted in creating tension and civil strife between the ethnic groups to the point that the Igbo ethnic group had threatened to secede from the rest of the country, culminating in a civil war between 1967 and 1970. According to Akinrinde (2003), Nigeria has witnessed the growth and consolidation of the actions of six different ethnic militias executing ethnic nationalist agendas aimed at total independence, by force (if negotiated autonomy failed). On the other hand, Ukiwo (2003) stated that well-known Hausa/Fulanis asserted the current president of Nigeria, Olusegun Obasanjo, discriminated against the North through purges in military service and has marginalized the North in official appointments. Despite the plights of the different ethnic groups protesting about marginalization, the disabled are the least empowered in Nigeria when it comes to advocating for their rights. This is true regardless of the fact that there are approximately 12 million disabled Nigerians representing all ethnic, religious, and linguistic groups.
The disabled have been forgotten by mainstream Nigeria. Their plight with regard to how they have been and continue to be excluded from Nigerian economic, political, religious, educational, and social activities, though not the main focus of this research, will be examined in terms of Nigerians’ attitudes toward the exclusion of the disabled population from mainstream Nigeria. It is vital that diversity and inclusivity provide the ethical foundation for an emerging nation’s efforts to serve the population or the community it seeks to serve. Although diversity and inclusivity are distinct, they are integral and need to be considered as the ethical cornerstone of Nigeria’s public policy toward the disabled. According to the Report on the Implementation of the Convention on the Rights of the Child by Nigeria (2005), people with disabilities are the least cared for, and discrimination against them is widespread both within the family and in society: “They live on the margins of society, often ignored, neglected, and mistreated; they remain targets of abuse and exploitation” (p. 14).

Gilbert and Specht (1974) argued that “The basis for institutional policy change is sometimes an unrecognized otherwise unmet need in the community, a need the originator or policy goal believes the institution is responsible for meeting” (p. 20). It is in the context of this dilemma that prompted the framers of the Nigerian Constitution to include issues of diversity in its current Constitution (1999). This new Constitution (1999) sought to enable all Nigerians and their respective groups to be included in decision-making on issues that affect the citizens individually or otherwise. However, the rights and needs of the 12 million disabled Nigerians were ignored by the framers of the Nigerian Constitution.
Therefore, this study will attempt to examine the attitudes of Nigerians toward people with disabilities in terms of equality.

**Historical Overview and Current Laws**

In Nigerian society, disability has traditionally been viewed as a religious issue. As such, the family’s response to a disabled family member traditionally has been to address the disability and its associated causes by seeking divine intervention through consultations with oracles and sacrificial offerings and prayers to the gods.

Upon sufficient application of prayers and sacrifices to the gods, Nigerian families typically respond to a disability within the family by excluding and/or segregating the affected individual from the rest of the community to avoid stigmatization and ridicule. Although the traditional family response has been based on seeking a balance between the social needs of the family, it does not take into account social and other developmental needs of the disabled person.

The United Nations has a long history of promoting and advocating equal rights for people with disabilities. Between the 1940’s and 1960’s, the United Nations’ primary focus was disability prevention and rehabilitation. During this era, it adopted The Universal Declaration of Human Rights, claiming that all human beings are born free and equal in dignity and that everyone is entitled to all rights and freedoms set out in the Declaration. In the 1970s, the United Nations’ focus changed to that of proposing initiatives that embraced international concepts of human rights of people with disabilities, and the equalization of opportunities for them. The Declaration on the Rights of Mentally Retarded Persons and
Declaration on the Rights of Disabled Persons passed in 1971 and 1975, respectively.

Nigeria is endowed with a wealth of abundant and diverse resources, including different customs and traditions, and the needs of disabled individuals can be identified with the support systems of families, extended families, and non-profit organizations. However, these support systems are mostly available in rural communities while they are in short supply or non-existent in the urban areas. Over the past several years, there has been an increased awareness of the needs of people with disabilities in Nigeria. This raised awareness has prompted the Nigerian with Disability Decree (1993) to be promulgated, but with no policies formulated to enable its implementation to meet the special needs of people with disabilities. According to Garuba (2003), two eras have been identified in the development of provisions for persons with special needs in Nigeria. These include the humanitarian/missionary era of 1945 through 1970, during which private voluntary organizations and private individuals dominated the provision of services. Garuba (2003) identified the second era as the social service era, during which the country witnessed a significant contribution from the government through commitment as well as inputs and regulations.

According to Okeke (2000), the response to the educational needs of people with disabilities in Nigeria may have begun as far back as 1954 when the then Western Region’s Education law stated that special schools should be made available for children with difficulties. In the same period, according to Okeke, similar regulation was enacted in then Northern Nigeria to cater to the needs of
disabled children. In 1974, at the national level the Head of State General
Yakubu Gowon notified Nigerians during a national broadcast that his
government would provide special education for the disabled by making
provisions for the training of Special Education Teachers with emphasis on the
special needs of the Nigerians with disabilities.

The response to the specialized educational and rehabilitation needs of
people with disabilities appears to have been initiated by international
missionaries. According to Ojile (2000), The Sudan United Mission (the
American branch) opened a school for the blind in Faliya, Bauchi State, in 1935,
while the Sudan United Mission (the British branch) opened the Gindiri School
for the Blind, Plateau State, in 1953. Moves toward providing rehabilitation
services were also made in the 1960s. Such moves include, but are not limited to,
the establishment of the Oji River School for the handicapped, which was
established in 1960 by the Anglican Mission to serve as a rehabilitation center. In
1962, the Pacelli School for the Blind and the Wesley School for the Deaf in
Lagos were established by the Roman Catholic and Protestant Church
missionaries, respectively (Ojile, 2000).

According to the CLEEN Foundation report (2004), some causes of
disabilities include birth defects and health issues, oil-pipeline explosions, and
road accidents. In addition, disabled individuals include former soldiers,
industrial workers, and victims of inter-ethnic and religious conflicts. The social
status and protection of disabled Nigerians is regulated directly by one law, the
Nigerians with Disability Decree of 1993.
This law mandates free regular medicine and medical care, as well as other benefits including free education at all levels, availability of subsidized housing, and free transportation for disabled Nigerians. Unfortunately, many provisions stipulated in the Nigerians with Disability Decree to ensure equal opportunities for disabled Nigerians have not been realized. Disabled Nigerians continue to experience problems in obtaining transportation, telephone communication, a lack of assistive devices or money to purchase devices, inadequate housing, medical treatment, accessibility issues, and consequently suffer from inconveniences and discomfort every day.

From a historical perspective, there is an occasional dawn of awareness of a set of moral guidelines regarding issues of human rights. Although some of these guidelines are in print, others are transmitted from one generation to another by way of oral history. Some of these moral doctrines are stipulated in international documents such as the Universal Declaration of Human Rights (1948), International Convention on Civil and Political Rights (1966), Declaration on the Granting of Independence to Colonial Countries and People (1961), Declaration on the Rights of Disabled Persons (1975), Standard Rules on the Equalization of Opportunities for Persons with Disabilities (1993), and the Inter-American Convention on the Elimination of All Forms of Discrimination Against Persons With Disabilities (1999). In Nigeria, the rights of people with disabilities are also encoded in the Nigerians with Disability Decree of 1993 and the constitution that is supposed to guide law enactment. These moral guidelines are philosophical concepts, doctrines, and an extrapolation from more or less distant
historical experiences and events. In the current political dispensation, human
equality, the ability to live with diversity and inclusivity, and the right to be free
from marginalization because of disability status are among contemporary global
benchmarks. Today’s moral guidelines recognize the equal rights of minorities
(including people with disabilities) relative to those of the majority.

There are several avenues available to all nations, Nigeria included, to help
them comply with the United Nations’ resolutions as they relate to the needs of
the disabled. Such avenues include constitutional amendments, enacting new
laws, and applying case law.

During the drafting phase of the current Nigerian Constitution (1999),
Nigerians missed the opportunity to include a specific reference to discrimination
on the grounds of disabilities, which would have guaranteed all disabled
Nigerians the full exercise of their rights. As a result, only those rights
guaranteed to all Nigerians in the Fundamental Rights, coupled with those
enumerated in the Decree of 1993, are applicable to disabled Nigerians. This is
not to imply that constitutional guarantees would have been adequate, as
implementing legislation would be needed to strengthen constitutional guarantees.
The opportunity to guarantee the rights of the disabled may present itself future
constitutional reviews.

While Section 15 of the Nigerian Constitution (1999) prohibits
discrimination based on religion, status, or ethnic or linguistic association, Section
42 sets out the rights and freedom to which every Nigerian is entitled. It also
stipulates what entitles a citizen to these basic rights, irrespective of a list of
enumerated bases (including ethnic origin, place of birth, sex, religion, and political affiliation) that could be used to discriminate or exclude a person’s enjoyment of these rights. Although the Nigerian Constitution (1999) guarantees the rights of every Nigerian against discrimination based on the above-enumerated bases, it failed to include disability as a basis (most likely due to oversight). Thus, the needs of the disabled and the other problems they face on a daily basis could be ameliorated through the inclusion of disability in the list of protected bases in the Nigerian Constitution. This gesture would reinforce to the Nigerian people the government’s commitment to ensuring that disability should not be used to deny a person’s benefits or opportunities.

Another strategy that may bring Nigeria into compliance with United Nations’ mandates as they relate to the rights of the disabled is enacting laws at the federal level. These laws could be enacted to comply with, effect, or even complement the United Nations’ resolutions. They could also be modeled on United Nations’ norms and standards. If enacted, such laws could include laws guaranteeing full participation of the disabled in the political process, laws forbidding discrimination based on disabilities, and requirements that employers, and service and housing providers remove impediments to full participation of disabled individuals in the mainstream.

The Nigerian Government could also use case law to conform to the United Nations’ mandates in terms of disability issues. This objective could be achievable by the courts ruling on disability issues by way of citing precedential decisions in other jurisdictions. In addition, the courts could use United Nations’
resolutions and standards as guidelines in the interpretation of the Nigerian Constitution and applicable laws that relate to the rights of people with disabilities. This approach has been used in the United States, Botswana, New South Wales, and Japan.

Most importantly, Nigerians need to reorient their view so they see disabled people as equals, not as second-class citizens. This goal can only be achieved through education at all levels and through law enforcement. Okunade (1981) assessed the attitude of the Yoruba of Western Nigeria towards children with disabilities and found that while a good number of the Yoruba community showed a positive attitude towards people with disabilities, there were significant differences between the attitudes of the Western-educated elite and their illiterate counterparts living in traditional settings. Enwemeka (1982) reported similar findings in a study conducted in Benin City, Nigeria. However, Enwemeka (1982) noted that a statistically significant proportion of children with disabilities were prevented from going to school because of their disabilities. He also noted that occasional squabbles arose in families because of the presence of a disabled child. Yaksat and Hill (1997) noted that there is no homogenous “Nigerian attitude” toward anything, as Nigeria is a multi-ethnic nation and each tribe has its own culture. This in turn influences the attitude of tribal members to people with disabilities. Yaksat and Hill also noted that while attitudes toward people with disabilities are generally negative, some Nigerian cultures treat their disabled members favorably for variety of reasons.
The rights of all disabled people, including those in Nigeria, were proclaimed in international documents and envisaged by the operative decree of Nigeria. The United Nations General Assembly Standard Rules on the Equalization of Opportunities for Persons with Disabilities of 1993, coupled with the Declaration on the Rights of Disabled Persons proclaimed by the General Assembly in 1975, consider the issue about disabled individuals both from a medical viewpoint and from philosophical concepts of disability in relation to the society at large.

These United Nations’ documents are characterized by their approach to the solution of the disability problem and are mainly focused on ensuring equal opportunities in the life and activities of the disabled. These proclamations require nations to apply their best efforts to furnish persons with disabilities the conditions that are conducive for their active participation in labor and life activities.

The above-mentioned proclamations also require sovereign nation governments to take the issues regarding the rights of people with disabilities into consideration while formulating public policy by ensuring the inclusion of the disabled when considering issues directly affecting them.

According to Center for Personal Assistance Services (2004), there are approximately 39,395,000 (14.8%) people with disabilities in the United States. Of these, 15.1% are White, 16.8% are African-American, 8.3% Asians/Pacific Islander, and 10.4% are Hispanic. The Americans with Disabilities Act (ADA; 1990), Federal Rehabilitation Act (1973), and the United Nations proclamations
protect the rights of disabled people in the United States. The ADA attempts to remove barriers preventing people with disabilities from using public transportation, obtaining jobs, and being served at stores, restaurants, banks, and other private establishments. In the area of employment, the ADA prohibits discrimination against people with disabilities in job applications, hiring, advancement, discharge, compensation, job training, and other terms and conditions of employment. This act also requires employers to furnish reasonable accommodations for known limitations of qualified individuals with a disability, unless to do so would create an undue hardship on the business. This act only covers employers with 15 or more employees. The Federal Equal Employment Opportunity Commission is charged with the lead responsibility of implementing regulations regarding the enforcement of the employment provision of the ADA. Under public accommodations, stores, restaurants, hotels, offices, grocery stores, schools, and other private businesses must remove architectural barriers if such changes are readily achievable without great difficulty or expense. It also requires new businesses or substantially renovated businesses to provide for accessibility. The Department of Justice is responsible for developing regulations enforcing the section of the ADA. To comply with the requirements of ADA, new buses purchased by public transportation agencies must be accessible to people with disabilities, although it is not necessary to retrofit old buses. The ADA also requires that special transportation services be provided if disabled persons are unable to use an existing public system. The Federal Department of Transportation is responsible for enforcing the section of the ADA dealing with
public transportation. Concerning telecommunication, the ADA requires that all telephone companies provide intrastate and interstate relay services for telephone calls made between users of telecommunications devices for the hearing impaired and users of the voice telephone. The Federal Communications Commission has the responsibility for enforcing this section of the ADA. The federal Rehabilitation Act of 1973 prohibits certain employers from employment discrimination based on disability. In particular, this act prohibits certain federal agencies, federal contractors, or recipients of federal financial assistance from discriminating against any qualified disabled person. Both acts also prohibit discrimination or retaliation against anyone who has opposed unlawful act or practices, has filed a discrimination complaint under the acts, or has assisted in the investigation by acting as a witness or aiding in the investigations. The acts described above, in conjunction with the Architectural Barriers Act of 1968 and Executive Orders 11246 and 13217 among others, help protect the rights of the disabled in the United States of America.

Purpose of the Study

The purpose of this study was to investigate the general attitude of Nigerians living in the Sacramento area of California toward individuals believed to be cursed by the gods or from an act of witchcraft because they are disabled. Because disabilities are associated with curses and witchcraft, families with disabled members are often stigmatized and in some cases ostracized within the Nigerian community.
Research Questions

The research questions for this study include the following:

1. What are Nigerians’ overall attitudes toward people with disabilities?
2. What are Nigerians’ attitudes toward employment and people with disabilities?
3. What are Nigerians’ attitudes regarding living arrangements and people with disabilities?
4. What are Nigerians’ attitudes toward people with mental disabilities and other groups?
5. What is the relationship between selected demographic variables (such as gender, religion, ethnicity, and age) and overall attitudes toward people with disabilities, general attitudes toward people with disabilities, attitudes toward employment and people with disabilities, attitudes regarding living arrangements and people with disabilities, and attitudes toward people with mental disabilities and other groups?

Significance of the Study

The significance of this study is multifaceted. First, this study’s results will enable governmental agencies, professional associations, vocational rehabilitation counselors, and employers to design programs affecting people with disabilities. Second, given the paucity of information on the status of people with disabilities in Nigeria, the findings of this study will contribute to the knowledge on the perceptions of people with disabilities in another cultural context--Nigeria. While there is an enormous amount of literature on public attitudes toward people with disabilities in developed countries, very little has been written about attitudes toward people with disabilities in developing countries. Third, the results may
encourage educators, healthcare professionals, services providers, advocates, and
government leaders to develop a coordinated national disability policy that is
driven and consistent with the United Nations’ Resolution regarding the rights of
people with disabilities.

Definition of Terms

The following terms are defined operationally as they are used in the study:

**Age.** The length of time a person has existed since birth.

**Attitudes.** Ideas or beliefs charged with emotion predisposing an individual to act in
particular ways toward persons, things, situations, issues, etc.

**Beliefs.** The summation of an individual’s values, which serves as the informational
base that in the end, determines one’s attitudes, intentions, and behaviors.

**Disability.** Pertains to a person who (a) has a physical or mental impairment, which
limits a major life activity (b) has a record of such an impairment or (c) is regarded as
having such an impairment. Such impairments may be permanent or transitory in nature.

**Educational Level.** The highest level of education obtained by the respondent.

**Ethnicity.** Refers to belonging to a group with unique language, ancestral, and
often, religious, and social/cultural characteristics. The three major ethnic groups in
Nigeria are Hausa, Ibo, and Yoruba. For the purpose of this study, participants were asked
to indicate which of the following ethnic groups they belong to: Hausa, Ibo, Yoruba, or
others.

**Gender.** The conceptions that people have of themselves as being male or female.

**Higher National Diploma (HND).** Equivalent to third year of university education
but below that of a bachelor’s degree.

**Marginalization.** Marginalization refers to the extent to which groups or people are
excluded from useful participation in social life. This may take many forms, ranging from...
material deprivation to exclusion from decision-making, opportunities for development, and a range of life choices.

*Mental Impairment.* A mental or physiological disorder, such as retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

*Negative Attitude.* Refers to an unfavorable attitude and represents rejection of people with disabilities.

*Positive Attitude.* Refers to a favorable attitude and represents acceptance of people with disabilities.

*Physical Impairment.* A physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more parts of the body’s system.

*Religion.* An organized belief system based on certain tenets of faith.

Assumptions and Limitations

The following assumptions and limitations apply to the present research:

1. It is assumed that the instrument designed for this study is valid and dependable.
2. The study sample is not representative of all Nigerians. Therefore, the data that were collected represent the perceptions of Nigerians residing in Sacramento and surrounding counties in California.
3. The data that were gathered represent a reasonably accurate assessment of the population represented by the sample.
4. The study is limited in scope and does not attempt to draw any conclusions about all Nigerians’ attitudes toward people with disabilities.
Organization of the Remainder of the Study

Chapter 1 of this study offered an introduction, statement of the problem, background of the problem, historical overview and current laws, purpose of the study, research questions, significance of the study, definition of terms, and assumptions and limitations. Chapter 2 offers a review of related literature, and theoretical framework. Chapter 3 describes the research design, study environment. The study sample, study instrument, data collection procedures, and analysis of the data in the study are discussed. Chapter 4 describes the results of the study as outlined in chapter 3. Chapter 5 offers conclusions and discussions of the results of the study, implications for research and practice, and recommendations for future studies.
CHAPTER 2. LITERATURE REVIEW

Introduction

A literature reviewed revealed that several studies on public attitudes toward people with disabilities have been conducted but to date, no study has investigated Nigerians’ attitudes toward people with disabilities. Literature that contributes to this study is divided into three categories: (a) recent studies on disability; (b) labeling and stigmatization of the disabled; and (c) theoretical framework. Earlier studies have added some knowledge to this field, but this study aims to extend the knowledge by investigating the stated questions.

Recent Studies on Disability

Earlier studies that have investigated public attitudes toward people with disabilities include “Public Attitudes Toward Disabled people in Hong Kong (2002)”, and “Public Attitudes to Disability in The Republic of Ireland (NDA 2002).”

The Chinese University of Hong Kong investigated public attitudes toward disabled people between 1994 and 2002. The sample size for these surveys was 4,057 respondents. The aim of this study was to examine the public attitudes toward people with disabilities (mainly mental disabilities) in Hong Kong and to explore factors that are associated with these attitudes. The target population for this study was Chinese-speaking male and female adults between 18 to 60 years old, living in Hong Kong. The majority (60%) of the respondents in this study knew there was an anti-discrimination ordinance for disabled people in Hong Kong. However, less than one-fifth of these respondents felt the ordinance was effective. Half of the respondents believed that people with mental
disabilities are violent or capable of disturbing others. Approximately one-third (30% to 40%) of the respondents believed that people with mental disability are likely to have an appearance upsetting to others.

In 2002, a survey was conducted in The Republic of Ireland to learn about Irish attitudes toward people with disability. Researchers interviewed 1,000 Irish adults over 18 years of age. This study focused on respondents’ opinions and views on a wide range of issues ranging from accessibility and treatment to rights. Most (97%) of the respondents believed that people with disabilities should have the same opportunities in life as people without disabilities. In addition, the majority (76%) of the respondents believed that people with disabilities do not have similar opportunities in life as people without disabilities. Over two-thirds (68.0%) of the respondents did not believe that employers do enough to meet the needs of people with disabilities while 59% of the respondents believed that public transportation providers are not doing enough to meet the needs of people with disabilities. Two-thirds (66%) of respondents agreed that disabled children should attend the same schools as children who are not disabled, and 57% felt the government does not provide enough support for people with disabilities.

These studies have common premises about public attitudes toward people with disabilities. Most respondents believed disabled people are subjected to unfair treatment in their respective societies and that significant barriers remain that obstruct people with disabilities when they try to access facilities. Respondents in both surveys displayed limited knowledge about the rights of the disabled population.
Little research has been conducted regarding Nigerians’ attitudes toward people with disabilities, and no research has been conducted on Nigerians’ attitudes in general toward people with disabilities. Several studies have been conducted regarding Nigerians’ attitudes toward people with intellectual disabilities. Most recently, the Special Olympics (2003) reported the results of a multinational study of attitudes toward individuals with intellectual disabilities in ten countries, including Nigeria. This study, which was aimed at understanding the attitudinal barriers to the inclusion of individuals with intellectual disabilities in society, interviewed a sample of roughly 800 people from the public and about 200 people from the Special Olympics. Information extrapolated from this study regarding Nigerians’ perceptions of the abilities of persons with intellectual disabilities (affecting selected capabilities), revealed that 41% of people perceive that people with intellectual disabilities have the ability to sustain friendship. Although 47% of the respondents stated that people with intellectual disabilities can wash and dress themselves and tell time, only 27% stated they are able to understand news/events. The respondents were asked where they felt people with intellectual disabilities should live, and 40% stated that they should live with families, 30% said in institutions, and 20% said they should live in supervised environments. Respondents were asked about their beliefs regarding where people with intellectual disabilities should work, and 76% said they should work in special workshops, while 12% said they should not work, and the same percentage of respondents felt they should have integrated skill jobs.
On the issue of where people with intellectual disabilities should attend school, 80% said they should have special education, while 10% feel they should either be educated at home or attend regular schools. Respondents also were asked about public expectations of the negative consequences of inclusion, specifically with regard to the issues of accidents and discipline problems. The majority (62%) of respondents indicated that people with intellectual disabilities would create accidents at work, while 65% stated that they would cause discipline problems in classrooms.

Several studies concerning attitudes toward people with disabilities have also been conducted in the United States of America (Artale, 2003; Fiske, 1997; Messina, 2003; Siff-Korp, 1998; Trawick, 1990). Fiske (1997) examined the attitudes of California State University at Long Beach undergraduate and graduate social work students toward people with developmental disabilities by having 116 of them complete a self-administered questionnaire (a modified version of Antonak’s Scale of Attitudes Toward Disabled Persons). Fiske (1997) found a significant relationship between ethnicity and attitude, with biracial/multiracial students having more positive attitudes toward disabled individuals when compared to Asian/Pacific Islander students. Graduate students also displayed significantly more positive attitudes than did the undergraduate students. Fiske (1997) felt the study results were not generalizable beyond the sample.

Messina (2003) examined managers’ attitudes toward persons with disabilities and its impact on hiring decisions using an adapted version of Antonak’s Scale of Attitudes Toward Disabled Persons and a researcher-designed
survey. Managers who are familiar with the ADA and those who are familiar with the types of support available for persons with disabilities have a tendency not to have had the experience of hiring persons with disabilities. Similarly, managers who favor stronger laws have a tendency not to have had the experience of hiring persons with disabilities. According to this researcher, the major limitation of this study was that it was based on one company culture in a specific location, rather than at a national level. In addition, the research did not investigate the attitudes of managers from every division or department in the selected company.

Trawick (1990) investigated the attitudes of baccalaureate nursing students (N=251) and faculty (N=34) in five nursing programs toward persons with physical disabilities using the Issues with Disabilities Scale (IDS). The study revealed that attitudes of nursing students (N=251) and faculty (N=34) were less favorable than attitudes of the undergraduate psychology students and “good attitude” samples in the IDS pilot study. Trawick (1990) also found that demographic factors predicting student attitudes were marital status, basic education, registered nurse (R. N.) status, and type of disability in a relative. Further, Trawick (1990) found that the demographic factors predicting the attitudes of faculty were age, basic nursing education, and the presence of a relative with a disability. According to this researcher, the study was limited in scope because it only included baccalaureate nursing students and faculty in five Florida and Georgia schools of nursing.

Artale (2003) examined the attitudes of community college students toward persons with disabilities to see if certain personality characteristics made a
person more or less likely to have a favorable or unfavorable attitude toward a
person with a disability. Artale (2003), using The Situational Scale-Handicapped
(SAS-H) found a significant relationship between gender and attitudes toward
persons with disabilities. This study included a convenience sample of students at
a mid-sized central Florida community college rather than a randomly selected
sample.

In a study on the attitudes of fifth grade students toward people with
disabilities, Siff-Korp (1998), using the Attitude Toward Disabled Persons Scale
and the Friendship Activities Scales, found that a combination of information,
discussion, and structured interactions with students with disabilities appeared to
have a positive effect on fifth graders’ attitudes, behavioral intentions, and
interactions with students with disabilities. Siff-Korpi (1998) cautioned the
findings of this study be viewed with care due to the small sample size and a lack
of control group in the study.

A recent study by Okeke (2000) about barrier factors inhibiting
family/community participation in the education of exceptional Nigerians found
that funds, personnel, societal attitudes, and lack of seriousness by the
governmental agencies were barriers to effective participation of
family/community groups in the education of disabled Nigerians.

In a study on attitudes of medical students and health-care professionals
toward people with disabilities, Paris (1993), using the Attitude Toward Disabled
Persons Scale (ATDP), found that females (compared to males), and Whites
(compared to Asians) held significantly more positive attitudes toward people
with physical disabilities. This study also found that contacts with people with disabilities have positive effects on attitudes towards people with physical disabilities.

Saravanabhavan (1994) conducted a study assessing attitudes toward individuals with disabilities in India using the Scale of Attitudes Toward Disabled Persons (SADP). This study found gender, family disability, contact/experience with individuals with disabilities, educational level, and economic status significantly affected attitudes toward individuals with disabilities. The results of this study might not reflect the attitudes of people living in other parts of India.

Haj-Yahia (1999) examined whether traditional Arab societies tend to reject mentally ill people, where the willingness to employ a mentally ill person was chosen as a specific manifestation of rejection. This researcher sampled 262 potential employers in East Jerusalem, all of whom were Muslim men. As traditionalism increased, there was a concomitant rise in the tendency to view mental illness as the result of an inadequate relationship with God, as a divine punishment, and as an expression of divine will.

Al-Abdulwahab and Al-Gain (2003) examined the attitudes of Saudi Arabian Health Care Professionals toward people with physical disabilities. These researchers asked a sample of 130 Saudi Arabian health care professionals to complete a Scale of Attitudes Toward Disabled Persons (SADP). The findings revealed that educational degrees had no significant effect on participants’ attitudes toward people with disabilities. It also revealed a poor relationship between attitude scores and age and experience. Finally, the research
demonstrated that Saudi Arabian health care professionals display positive attitudes toward people with disability.

In 2000, Elmaleh examined the attitudes of non-disabled employees toward co-workers with disabilities in competitive employment settings using the Attitudes Toward Disabled Persons Scale (ATDP) and the Contact with Disabled Persons Scale (CDP). This study sought to determine if the attitudes of co-workers toward employees with disabilities facilitated their integration into the workplace or posed barriers to their inclusion. Elmaleh (2000) found a statistically significant relationship between employees’ attitudes and the variables of contact, gender, knowledge about disabilities, knowledge about the ADA, and type of employment. The researcher stated that the critical limitations of this study was that its convenience sample was not representative of all employees who work with persons with disabilities in a competitive setting, but rather represented those who work at employment settings chosen due to convenience and accessibility.

Hengst (2003) conducted a study to determine faculty attitudes toward students with disabilities within postsecondary settings using the Interaction with Disabled Persons Scale (IDP). Survey results were compared using the independent variables of faculty rank, college or academic area, gender, age of faculty, years of teaching in higher education, and prior experience accommodating disabled persons in the classroom. No relationship was found between faculty responses on the IDP and faculty rank, school/college of faculty, age, gender, years of experience teaching in higher education, and years
accommodating individuals with disabilities in the classroom. The results of this study need to be considered with care as characteristics of the sample may not be applicable to other institutions of higher education.

Kahikuata-Kariko (2003) conducted a study that examined the attitudes of Namibian primary school principals with regard to the inclusive education practice of placing and educating students with disabilities in regular classrooms, using the Attitude Toward Inclusive Education Scale and Opinion Relative to the Integration of Students with Disabilities Scale. The findings of this study revealed that Namibian primary school principals hold positive attitudes toward students with disabilities in general, though they have preferences of the type of disabilities to be accommodated in regular classrooms. Additionally, students with social difficulties were more favored for inclusion than students with sensory and physical disabilities. The researcher stated that the findings in this study were limited to the respondents in the study, and that cultural beliefs toward persons with disabilities might have overshadowed the participants’ objectiveness in their responses.

Choi and Lam (2001) conducted a study to examine the effects of acculturation on attitudes toward people with disabilities. A total of 359 Korean and Korean-American undergraduates and graduate students participated in this study using SADP. This study found that the graduate students had more favorable attitudes toward people with disabilities than undergraduate students, regardless of their place of birth or the countries where they were raised. This study also found that previous contacts with persons with disabilities were also
found to have more positive attitudes towards the students. This study did not find any gender differences across all groups.

Nishikawa (1988) conducted a study on the identification of Japanese-Americans’ attitudes toward disability and the impact of acculturation on attitude. This study surveyed 45 Japanese-Americans living in the Long Beach/Los Angeles area of California using the Attitudes Toward Disabled Persons Scale. This study found that age and gender influenced attitudes, but the Japanese-Americans participants scored similarly to the standardized population (Caucasian college students).

Arnold and Orozco (1989) conducted a study to identify the relationship between certain cultural factors and the assessment of rehabilitation potential in a Mexican sample of individuals with disabilities. This study surveyed 37 participants from the State Vocational Rehabilitation Commission, using the Acculturation Scale for Mexican Americans. The results of this study suggest that evaluators need to assess the acculturation level of Mexican American clients.

Based on the literature review, there is evidence that various demographic variables influence attitudes toward people with disabilities. However, since very little research exists regarding Nigerians’ attitudes toward people with disabilities, this study will sample Nigerians and measure their attitudes toward people with disabilities.

Labeling and Stigmatization of the Disabled

It is almost impossible to discuss the issues of diversity and inclusivity without discussing labeling, stigmatization, and their resultant impacts. Although there is a
paucity of research in the area of labeling as well as stigmatizing people with disabilities in Nigeria, one cannot ignore the terminologies used by the Nigerian government to describe or identify people with disabilities, thereby continuing the perpetuation of prejudice and stereotypes. According to Okafor (2003), the most difficult challenge and threat to people living with disabilities are social stigma and discrimination, which both seem to pervade all sections of Nigerian society. For instance, the current census information (1991) described the disabled in negative terms such as “mentally retarded/lunatic,” “crippled,” “dumb,” and “deaf and dumb.”

People with disabilities labeled or stigmatized as mentally retarded/lunatic by the Nigerian Government encompass people with mental, intellectual, and psychiatric disabilities. One can attribute this stigmatization by the government as being one of the so many reasons why the public may not be as open-minded toward people with disabilities as one would expect. According to the Daily Champion (2004), prejudice meted out to people with disabilities in Nigeria actually derives its legitimacy from the negligence and the culpable indifference of the larger society.

The use of the “crippled” label in the Nigerian 1991 census data (as reported by the United Nations, 2003) is applied to people with physical disabilities, including muscle, nerve, or bone damage resulting difficulties in moving or performing activities that require movements. These include people with cerebral palsy, quadriplegia, paraplegia, and post-polio paralysis.

Because of the above stigmas and labels of the disabled, coupled with the belief system about disabilities and their causes (e.g., curses, witchcraft, sin), the
negative attitudes of Nigerians toward people with disabilities are somewhat rational. These labels and stigmatization may also account for families keeping disabled family members hidden from public view to save the whole family from shame and ridicule. Okafor (2003) stated that more disturbing is the fact that the physically challenged are often seen as a disgrace to their families, whether they are so from birth or because of an accident. Okafor (2003) also stated that at home or elsewhere, people with physical disabilities are usually confined to discrete places where people will not readily notice them. In addition, the population of people with disabilities in Nigeria may never be known because of the above problems, and the number of Nigerians with disabilities may be higher than reported. According to the CLEEN Foundation report (2004), the population of people with disabilities in Nigeria continues to rise alarmingly.

It is also worth mentioning that based on the Nigerian Constitution (1999), anyone who has been adjudicated a lunatic or otherwise declared to be of unsound mind is disqualified from running for a political office. With approximately 12 million people with disabilities in Nigeria, understanding the magnitude of public attitudes is paramount in finding clues as to the specific areas of ignorance and unfairness, the nature of governmental laws to be enacted and policies to be implemented, and the appropriate ancillary services to be delivered. Information gathered about public attitudes toward people with disabilities would lead lawmakers and service providers to be innovative in designing intervention techniques to ameliorate negative attitudes, promote integration, and possibly eliminate discrimination based on disabilities.
Theoretical Framework

As a basis for a theoretical framework, this study will employ a theory that previously has shown promise in understanding the plights of people with disabilities in other societies. This theory, known as Critical Theory (as articulated by Bereford, 1994; ICIDH 1991, cited in Oliver, 1997; Rioux, 1994; Roeher Institute, 1996; Roth, 1983), is based on the notion that disability has social causes and is a result of how society is organized and the relationship of the individual to society at large. This theory focuses on the factors that keep disabled persons from being included as equals in society. This approach, which draws from other disciplines, frames disability issues from the standpoint of human rights doctrine. It posits that public policy and programs should aim at reducing inequalities by addressing issues that undermine inclusivity.

Critical theorists construct analyses of how society marginalizes people with disabilities and how it can be adjusted to respond more effectively to their presence and needs. This theory makes the exercise of human rights by the disabled person the dependent variable, and makes the social structure the independent variable (Oliver, 1997).

Summary

This chapter presented a review of literature pertinent to the status of attitudes toward people with disabilities in different societies. Based on this review of literature, it is obvious that there are conflicting data on the variables that influence attitudes toward people with disabilities. Because there is a dearth of literature pertaining to the attitudes of Nigerians toward people with
disabilities, this study will sample Nigerians residing in the Sacramento area of California and measure their attitudes toward people with disabilities. Chapter 3 presents the methodology used to investigate the problem and describes the procedures used to accomplish the purpose.
CHAPTER 3 METHODOLOGY

Overview

The main goal of this study is to examine Nigerians’ attitudes toward people with disabilities. A questionnaire was used to collect data for this study, which was guided by the following research questions:

1. What are Nigerians’ overall attitudes toward people with disabilities?
2. What are Nigerians’ attitudes toward employment and people with disabilities?
3. What are Nigerians’ attitudes toward living arrangements and people with disabilities?
4. What are Nigerians’ attitudes toward people with mental disabilities and other groups?
5. What is the relationship between selected demographic variables (such as gender, religion, ethnicity, and age) and overall attitudes toward people with disabilities, attitudes toward employment and people with disabilities, attitudes regarding living arrangements and people with disabilities, and attitudes toward people with mental disabilities and other groups?

Research Design

This study used a quantitative descriptive research design. According to McMillan and Schumacher (2001), when first studying an area, descriptive research provides very valuable data as it is a means to describe the characteristics of an existing phenomenon systematically, factually, and accurately (Isaac & Michael, 1997; cited by Rodriguez, 2004).
Study Environment

The study was conducted during the Sacramento Association of Nigerians’ (SAN) meeting, which was an ideal setting because it has a large Nigerian population. According to Chief Lanre Hassan, SAN President, the group has approximately 500 members representing all Nigerian regional states. SAN was founded in November 1992 as a forum for Nigerians living around Sacramento, California to come together and address social, political, and economic issues facing the Nigerian community. It is dedicated to promoting positive image, family values, and harmonious living between Nigerians, other Africans, and the people of the United States. This association was selected for study because it has a large Nigerian population. As SAN members have been exposed to this culture, it is important to examine their attitudes toward people with disabilities as it relates to inclusivity.

Study Sample

The target population of this study was SAN members. Of the 500 members, a sample of 100 SAN members was selected using a non-probability convenience sampling technique with no exclusion criteria. SAN mailed the recruitment letter (Appendix E), which stated the study title and purpose, rationale, participation criteria, guarantee of confidentiality, and included the researcher’s contact address, to all potential respondents two weeks before the survey was disseminated. This letter notified volunteers who wished to participate in the survey to meet the researcher at a designated location and time.
Convenience sampling was appropriate for this study because, as Zikmund (1989) reported, it is best used when additional research will later be conducted with a probability sample. In addition, Parasuraman (1986) argued that although convenience samples are unlikely to provide perfect representations of the ideal population for a study, they could be used under certain conditions such as a research study to generate some initial insights rather than to make any generalizations.

Study Instrument

An adapted version of the 24-item summated SADP questionnaire (Antonak, 1982; 1985) was used to measure Nigerians’ attitudes toward people with disabilities. The respondents rated statements along a 6-point scale ranging from disagree very much (-3) to agree very much (+3). To break a potential response bias, half of the statements were worded so that an agree response represented a favorable attitude and half were worded so that a disagree response represented a favorable attitude. The item responses were scored in the direction of a positive attitude and then summed. All negatively-worded items were reverse-scored so a higher score represented a positive attitude.

Antonak (1982) stated the SADP was developed because a more contemporary, easy-to-use and psychometrically sound instrument was needed by researchers investigating attitudes toward Disabled persons. Antonak and Livneh (1988) derived the specification of the SADP’s item content from reviews of the research literature on attitudes toward disabled and exceptional people, an
examination of previously published scales, and analyses of open-ended interviews with experts in the fields of special education and rehabilitation.

Validity and Reliability

Validity relates to the accuracy of a measure, or the extent to which an instrument measures what it is intended to measure. Antonak and Livneh (1988) reported a moderate correlation between SADP scores and Attitudes Toward Disabled Persons (ATDP, Form–O) scores. To validate the content conceptualization of SADP subscales, 25 judges categorized the items. Data analysis showed consistency in the judges’ categorization of the 24 items, and homogeneity of items within categories. Based on that analysis, it was determined that the SADP might measure three domains of attitudes toward disabled people: (a) optimism-human rights, (b) behavior misconception, and (c) pessimism-hopelessness. The first domain also contains three dimensions: equality of employment opportunity, community participation, and equity and integration in society. Factorial structure of the SADP has been shown to be compatible across two cultures. Chan, Hua, Ju, and Lam (1984) analyzed SADP data collected from 80 students in Hong Kong, Singapore, and Taiwan and found the SADP was psychometrically sound. According to them, a two-dimensional solution accounting for 88% of the variance was acceptable, with the first dimension labeled Optimism/Human Rights, and the second dimension labeled Pessimism/Behavioral Misperceptions.

An instrument’s reliability refers to the consistency of its application. According to Antonak and Livneh (1988), the reliability analysis of the SADP,
yielded Spearman-Brown corrected reliability coefficients ranging from +.88 to +.85, and alpha coefficients ranging from +.88 to +.91. In addition, the reliability coefficients ranged from +.55 to +.73, and coefficient alpha homogeneity indices ranged from +.77 to +.87.

The SADP has 24 questions, with 12 consistent with positive attitudes and 12 consistent with negative attitudes. “Each of the 24 items is scored on a Likert-type scale ranging from I disagree very much to I agree very much.”

Twelve of the 24 items on the attitude questionnaire measure the respondents’ overall attitudes toward people with disabilities (Numbers 1, 5, 6, 8, 9, 10, 14, 18, 22, 23, and 24). Six of the items on the attitude questionnaire are work-related (Numbers 2, 11, 12, 16, 17, and 20), and measured respondents’ attitudes toward people with disabilities in the workforce. Three of the items on the attitude questionnaire measured the respondents’ attitudes toward the living arrangements of people with disabilities (Numbers 7, 13, and 15), and the remaining items (3, 4, and 19) measured respondents’ attitudes toward people with disabilities and toward other vulnerable groups, such as children with mental disabilities.

Survey Instrument Scoring

Participants indicated their attitudes by responding to items on a scale ranging from -3 to +3. To score the questionnaire, all the items consistent with a negative attitude (Numbers 1, 3, 4, 7, 8, 9, 10, 14, 17, 18, 19, and 22) were reversed-scored. The scores of all 24 items were then summed. The scores will range from one to 72 with the higher score showing a more positive attitude.
Data Collection Procedures

Data were collected through face-to-face contacts. Since the respondents can read and write in English, the questionnaire was self-administered, then collected by the researcher through face-to-face contact during a SAN meeting session. To ensure the research method satisfied Capella University’s Institutional Review Board (IRB) requirements and to ensure a high survey return rate, the SAN President granted permission to conduct this study (Appendix A). The survey was not distributed until the Capella IRB granted approval.

In order to ensure respondents’ privacy, the researcher employed an indirect recruitment process. On behalf of the researcher, SAN mailed the recruitment letter (Appendix E) prepared by the researcher two weeks before the survey was disseminated. Consequently, the researcher had no access to any personal records (such as names, addresses, and telephone numbers) of participants, as only SAN executive members have access to such information.

Although the researcher had no direct access to participants’ personal information, SAN was asked to mail the letter to all members as there were no exclusion criteria. This method allowed the researcher to obtain a reasonable number of respondents. The recruitment letter notified volunteers who wished to participate in the survey to meet the researcher at a designated location and time. While administering the questionnaire (at a meeting), respondents were provided a verbal and written explanation of the study, including the purpose of the study, an assurance of total anonymity and confidentiality, a request for participants to submit informed consent forms before participating in the study, and the a
discussion of the importance of respondents understanding they participated in the study voluntarily. Respondents were counseled that they could opt out or withdraw from the study at any stage of the process, verbally or by writing on the survey.

Respondents were encouraged to answer all questions, but were asked to disregard questions to which they did not feel comfortable responding. After these explanations, respondents signed the informed consent form, which was collected before the questionnaire was distributed. This step ensured that no connection could be made between the informed consent forms and questionnaires, and the collected informed consent forms were kept separately from the questionnaires. The researcher distributed the survey to all participants, who then completed it on their own.

After respondents completed the survey questionnaires, the researcher collected them. All questionnaires were removed from the meeting room immediately to reduce the chance of misplacement or theft. Respondents were verbally informed that all completed questionnaires, informed consent forms, and data would be kept separately in a locked file cabinet, which could only be accessed by the researcher. The researcher expressed the obligation to provide a summary copy of the study results if requested by the respondents.

Data Analysis

Data obtained from the survey questionnaires were marked, coded, and entered into the computer twice for validation. The data were analyzed using Statistical Package for Social Sciences (SPSS). Descriptive and inferential
statistics were used to address the research questions. Each inferential statistic was tested at the .05 level. Specific statistical analyses conducted included the following, based on the research questions asked:

RQ1: What are Nigerians’ overall attitudes toward people with disabilities? Answers to this question were derived from responses to survey items 1, 5, 6, 8, 9, 10, 14, 18, 22, 23, and 24. Descriptive statistics were used to summarize the results of all items.

RQ2: What are Nigerians’ attitudes toward employment and people with disabilities? Answers to this question were derived from responses to survey items 2, 11, 12, 16, 17, and 20. Descriptive statistics were used to summarize the results of all items.

RQ3: What are Nigerians’ attitudes toward living arrangements and people with disabilities? Answers to this question were derived from responses to survey items 7, 13, and 15. Descriptive statistics were used to summarize the results of all items.

RQ4: What are Nigerians’ attitudes toward people with mental disabilities and other groups? Answers to this question were derived from responses to survey items 3, 4, and 19. Descriptive statistics were used to summarize the results of all items.

RQ5: What is the relationship between selected demographic variables (such as gender, religion, ethnicity, age, and length of residency in the United States) and overall attitudes toward people with disabilities, general attitudes toward people with disabilities, attitudes toward employment and people with disabilities, attitudes regarding living
arrangements and people with disabilities, and attitudes toward people with mental disabilities and other groups.

Two main inferential statistics were used to examine the relationships between demographic variables (independent variables) and the attitudes towards people with disabilities (dependent variables). An independent sample *t*-test was used to examine the relationship between gender and the dependent variables. One-way analyses of variance (ANOVA) were used to examine the differences between religion, ethnicity, and age and the dependent variables. Pearson’s R was computed as a measure of the correlation between respondents’ attitudes and age.

Protection of Human Subjects’ Rights

To conform to IRB guidelines, the following procedures were followed for the participants’ protection. The researcher was the only person to administer the survey and analyze the data, and no other person viewed the returned questionnaires. In addition, participants were informed in the cover letter that their responses would be recorded only in the aggregate. They also were informed not to include their names or make identifying marks on either the questionnaires or the return envelopes provided.

To ensure privacy and confidentiality, participants were instructed that the completed questionnaire should be returned in the sealed envelope provided with no identifying marks. Subjects also were notified through the informed consent form that their privacy was assured and that their responses were provided anonymously. The researcher followed the highest professional and ethical
standards to offer participants confidentiality. Responses were catalogued by numbering each page starting at 001 and continuing forward.

Subjects were informed their participation in this research would take about 15 minutes and voluntary. No data for this research were available at this researcher’s place of business, and the researcher will maintain all study documents in a secured file cabinet for a period of five years before destroying the documents through incineration.

Finally, there were no personal benefits of study participation for respondents; however, the study will help to expand the knowledge base about attitudes toward people with disabilities. Furthermore, such information will assist policy makers in the area of disabilities. The risks of participation in the study were minimal and no psychological distress was expected among participants. Overall, the benefits of the research exceeded the risks.
CHAPTER 4. DATA COLLECTION AND ANALYSIS

The purpose of this chapter is to present the findings gathered from this research. These findings represent the scores of the respondents on the Scale of Attitudes Toward Disabled Persons (SADP) questionnaire and responses from the Demographic Form. A summary of the demographic information is presented followed by the results related to each research question.

Research Questions Addressed in the Study

The study focused on the following research questions:

1. What are Nigerians’ overall attitudes toward people with disabilities?
2. What are Nigerians’ attitudes toward employment and people with disabilities?
3. What are Nigerians’ attitudes toward living arrangements and people with disabilities?
4. What are Nigerians’ attitudes toward people with mental disabilities and other groups?
5. What is the relationship between selected demographic variables (such as gender, religion, ethnicity, and age) and overall attitudes toward people with disabilities, attitudes toward employment and people with disabilities, attitudes regarding living arrangements and people with disabilities, and attitudes toward people with mental disabilities and other groups?

Results

The research findings are presented in the following order: (a) Demographic information describing gender, ethnicity, religion, age groupings, level of education, and residency; (b) Means and standard deviations for Research
Question 1, including the frequency and percentages of participants; (c) Means and standard deviations for Research Question 2, including frequency and percentages of participants; (d) Means and standard deviations for Research Question 3, including frequency and percentages of participants; (e) Means and standard deviations for Research Question 4, including frequency and percentages for participants; (f) Five ANOVAs conducted to assess if differences exist on the attitude composite score as a function of the five demographic variables (gender, religion, ethnicity, age, level of education, and years of residency in the United States of America).

Demographic Information

The demographic information of the survey participants is described in the following paragraphs.

Age

Among the 100 participants, 15 did not indicate their age. Of the remainder of the participants ($n=85$), 27 (27.0% of the entire sample) were under 35 years old, 39 (39.0%) were between 36 and 45 years old, and 19 (19.0%) were 46 years and above (Table 1).

Gender

The sample consisted of 65 (65.0%) males and 35 (35.0%) females (Table 1).
Ethnicity

Of the 100 participants, 11 (11.0%) were of the Hausa/Fulani ethnic origin, 22 (22.0%) Igbo, 25 (25.0%) Yoruba, and 41 (41.0%) others (see Table 1). (Please see the definition of Ethnicity located in the definitions section of this document.)

Religion

Eighty (80) (80.0%) of the participants were Christians, 17 (17.0%) Muslims, and 3 (3.0%) were of other religious faiths (Table 1).

Level of Education

Thirty-nine (39) (39.0%) of the people surveyed had Bachelors Degrees, 33 (33.0%) had Masters Degrees and above, and 28 (28.0%) had a Higher National Diploma from Nigerian schools or less (see Table 1).

Residency

Forty-five (45) (45.0%) of the people surveyed resided in the United States between one and four years, 28 (28.0%) from five to 10 years, and 27 (27.0%) over 10 years (Table 1).

Table 1. Frequency and Percentages of Demographic Characteristics

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<th>Demographic Characteristic</th>
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<th>Percent</th>
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<td><strong>Ethnicity</strong></td>
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<tr>
<td><strong>Age Group</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 35 years old or less</td>
<td>27</td>
<td>27.0</td>
</tr>
<tr>
<td>36 to 45 years old</td>
<td>39</td>
<td>39.0</td>
</tr>
</tbody>
</table>
Table 1. (Continued)

<table>
<thead>
<tr>
<th></th>
<th>46 years and above</th>
<th>19</th>
<th>19.0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>65</td>
<td>65.0</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>35</td>
<td>35.0</td>
<td></td>
</tr>
<tr>
<td><strong>Religion</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Christian</td>
<td>80</td>
<td>80.0</td>
<td></td>
</tr>
<tr>
<td>Muslim</td>
<td>17</td>
<td>17.0</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td>3</td>
<td>3.0</td>
<td></td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HND or less</td>
<td>28</td>
<td>28.0</td>
<td></td>
</tr>
<tr>
<td>Bachelors Degree</td>
<td>39</td>
<td>39.0</td>
<td></td>
</tr>
<tr>
<td>Masters Degree and above</td>
<td>33</td>
<td>33.0</td>
<td></td>
</tr>
<tr>
<td><strong>Residency</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-4 years</td>
<td>45</td>
<td>45.0</td>
<td></td>
</tr>
<tr>
<td>5-10 years</td>
<td>28</td>
<td>28.0</td>
<td></td>
</tr>
<tr>
<td>Over 10 years</td>
<td>27</td>
<td>27.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 2 presents the frequency and percentages of participants’ responses to the disability questions. A large percentage of the respondents (76.8%) indicated that they do not have friends who are disabled. Over sixty-eight percent (68.1%) of the sample reported having relatives who are disabled.

Table 2. Frequency and Percentages of Participants’ Responses to Disability Questions

<table>
<thead>
<tr>
<th>Questions</th>
<th>Yes</th>
<th>No</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you disabled?</td>
<td>2</td>
<td>98</td>
<td>100</td>
</tr>
<tr>
<td>Do you have children that are disabled?</td>
<td>0</td>
<td>99</td>
<td>100</td>
</tr>
<tr>
<td>Do you have friends that are disabled?</td>
<td>23</td>
<td>76</td>
<td>99</td>
</tr>
<tr>
<td>Do you have relatives that are disabled?</td>
<td>30</td>
<td>64</td>
<td>94</td>
</tr>
</tbody>
</table>

*Note.* Totals that do not equal 100 participants represent missing data.
Results as Related to the Research Questions for the Study

An Attitude to Disabilities composite score was created by summing the 24 items and dividing by the total number of items (24). The minimum Attitudes score was 3.21 and the maximum Attitudes score was 4.82 ($M = 3.89$, $SD = 0.36$). A higher score represents a positive attitude toward people with disabilities, and a lower score represents a negative attitude toward people with disabilities.

Research Question 1

Eleven (11) of the 24 survey questions on the attitude questionnaire asked the respondents to measure overall attitudes toward people with disabilities. Each individual question has a scoring range from -3, suggesting that the respondent disagrees very much to +3, suggesting that the respondent agrees very much. The mean score of all the respondents on these questions was 3.34, indicating the respondents’ inclination to have positive attitudes on general statements about people with disabilities.

As shown in Table 3, the attitudes of the respondents tended to be positive. The majority of the respondents (92%) agreed that people with disabilities should be encouraged to mainstream. Most of the respondents (89%) also agreed that people with disabilities should be given more control in making decisions that affect their lives. Half of the respondents (50%) disagreed that people with disabilities are a financial drain and give little back to the community. Results are presented in Table 3. Frequency and percentages of participants’ responses to each question are presented in Table 4.
Table 3. Means and Standard Deviations for Research Question 1

<table>
<thead>
<tr>
<th>Survey Items for Research Question 1</th>
<th>N</th>
<th>Min.</th>
<th>Max.</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>People with disabilities get unfair advantages</td>
<td>98</td>
<td>1.00</td>
<td>6.00</td>
<td>2.40</td>
<td>1.58</td>
</tr>
<tr>
<td>People with disabilities should be encouraged to mainstream</td>
<td>99</td>
<td>1.00</td>
<td>6.00</td>
<td>4.25</td>
<td>0.86</td>
</tr>
<tr>
<td>People with disabilities should be given more control in making decisions that affect their lives</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>4.29</td>
<td>1.16</td>
</tr>
<tr>
<td>I generally feel sorry for people with disabilities</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>4.06</td>
<td>1.69</td>
</tr>
<tr>
<td>Adults with disabilities should not engage in sexual activities</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>1.45</td>
<td>0.88</td>
</tr>
<tr>
<td>People with disabilities are not capable of making moral decisions</td>
<td>99</td>
<td>1.00</td>
<td>6.00</td>
<td>1.94</td>
<td>1.60</td>
</tr>
<tr>
<td>People with disabilities are more emotionally maladjusted than the general public</td>
<td>97</td>
<td>1.00</td>
<td>6.00</td>
<td>3.67</td>
<td>1.87</td>
</tr>
<tr>
<td>The presence of a disabled in a social gathering makes people uncomfortable</td>
<td>98</td>
<td>1.00</td>
<td>6.00</td>
<td>3.83</td>
<td>1.87</td>
</tr>
<tr>
<td>People with disabilities are a financial drain and give little back to the community</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>2.41</td>
<td>1.83</td>
</tr>
<tr>
<td>People with disabilities experience the same range of emotions as non-disabled people</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>3.83</td>
<td>1.52</td>
</tr>
<tr>
<td>Some people with disabilities are physically indistinguishable from the general population</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>4.23</td>
<td>1.43</td>
</tr>
</tbody>
</table>

*Note.* Means are based on a Likert scale where 1 = Disagree Very Much, 2 = Disagree Pretty Much, 3 = Disagree A Little, 4 = Agree A Little, 5 = Agree Pretty Much, and 6 = Agree Very Much.
Table 4. Frequency and Percentages of Participants’ Responses for Research

Question 1

<table>
<thead>
<tr>
<th></th>
<th>I Disagree:</th>
<th>I Agree:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very Much</td>
<td>N</td>
</tr>
<tr>
<td>People with disabilities get unfair advantages.</td>
<td></td>
<td>41</td>
</tr>
<tr>
<td>People with disabilities should be encouraged to mainstream.</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>People with disabilities should be given more control in decisions that affect their lives.</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>I generally feel sorry for people with disabilities.</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>Adults with disabilities should not engage in sexual activities.</td>
<td></td>
<td>74</td>
</tr>
<tr>
<td>People with disabilities are not capable of making moral decisions.</td>
<td></td>
<td>66</td>
</tr>
<tr>
<td>People with disabilities are more emotionally maladjusted than the general public.</td>
<td></td>
<td>18</td>
</tr>
<tr>
<td>The presence of a disabled in a social gathering makes people uncomfortable.</td>
<td></td>
<td>14</td>
</tr>
<tr>
<td>People with disabilities are a financial drain and give little back to the community.</td>
<td></td>
<td>50</td>
</tr>
<tr>
<td>People with disabilities experience the same range of emotions as non-disabled people.</td>
<td></td>
<td>11</td>
</tr>
<tr>
<td>Some people with disabilities are physically indistinguishable from the general population</td>
<td></td>
<td>6</td>
</tr>
</tbody>
</table>
Research Question 2

Six (6) of the survey questions on the attitude questionnaire asked the respondents to measure attitudes toward employment and people with disabilities. The mean score of all the respondents on these six questions was 3.96, meaning that the respondents tended to have positive attitudes about employment and people with disabilities.

As presented in Tables 5 and 6, the attitudes of the respondents tended to be positive. Overwhelmingly, the respondents agreed that the opportunity for gainful employment should be provided to people with disabilities (99.9%), that people with disabilities can increase their job skills through training (97%), and that laws to prevent employers from discriminating against people with disabilities should be passed (100%). Results are presented in Table 5. The frequency and percentages of participants’ responses to each question are presented in Table 6.
Table 5. Means and Standard Deviations for Research Question 2

<table>
<thead>
<tr>
<th>Survey Items for Research Question 2</th>
<th>N</th>
<th>Min.</th>
<th>Max.</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>People with disabilities can increase their job skills through training</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>4.20</td>
<td>0.75</td>
</tr>
<tr>
<td>Most people with disabilities are willing to work</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>3.98</td>
<td>1.52</td>
</tr>
<tr>
<td>People with disabilities can be expected to fit into competitive society</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>4.29</td>
<td>1.40</td>
</tr>
<tr>
<td>Laws to prevent employers from discriminating against people with disabilities should be passed</td>
<td>99</td>
<td>4.00</td>
<td>6.00</td>
<td>4.22</td>
<td>0.55</td>
</tr>
<tr>
<td>Simple and repetitive work is appropriate for people with disabilities</td>
<td>99</td>
<td>1.00</td>
<td>6.00</td>
<td>3.36</td>
<td>1.84</td>
</tr>
<tr>
<td>The opportunity for gainful employment should be provided to people with disabilities</td>
<td>98</td>
<td>4.00</td>
<td>6.00</td>
<td>4.30</td>
<td>0.58</td>
</tr>
</tbody>
</table>

*Note.* Means are based on a Likert scale where 1 = Disagree Very Much, 2 = Disagree Pretty Much, 3 = Disagree A Little, 4 = Agree A Little, 5 = Agree Pretty Much, and 6 = Agree Very Much.
Table 6. Frequency and Percentages of Participants’ Responses for Research Question 2

<table>
<thead>
<tr>
<th></th>
<th>I Disagree:</th>
<th>I Agree:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very Much</td>
<td>Pretty Much</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>People with disabilities can increase their job skills through training.</td>
<td>2</td>
<td>2.0</td>
</tr>
<tr>
<td>Most people with disabilities are willing to work.</td>
<td>8</td>
<td>8.0</td>
</tr>
<tr>
<td>People with disabilities can be expected to fit into competitive society.</td>
<td>6</td>
<td>6.0</td>
</tr>
<tr>
<td>Laws to prevent employers from discriminating against people with disabilities should be passed.</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Simple and repetitive work is appropriate for people with disabilities.</td>
<td>21</td>
<td>21.2</td>
</tr>
<tr>
<td>The opportunity for gainful employment should be provided to people with disabilities.</td>
<td>0</td>
<td>0.0</td>
</tr>
</tbody>
</table>

Research Question 3

Three (3) of the questions on the attitude questionnaire asked the respondents to measure attitudes regarding living arrangements and people with disabilities. The mean score of all the respondents on these questions was 3.42, suggesting the respondents’ propensity to have positive attitudes about living arrangements and people with disabilities.

As presented in Tables 7 and 8, the attitudes of the respondents tended to be positive. Most respondents agreed that people with disabilities should be allowed to live where and how they choose (73.8%) and people with disabilities are able to adjust
to life outside of an institution setting (83.8%). Over sixty percent (67.3%) disagreed with the statement that people with disabilities should live with others with similar disabilities. Results are presented in Table 7. Frequency and percentages of participants’ responses to each question are presented in Table 8.

Table 7. Means and Standard Deviations for Research Question 3

<table>
<thead>
<tr>
<th>Survey Items for Research Question 3</th>
<th>N</th>
<th>Min.</th>
<th>Max.</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>People with disabilities should live with others with similar disabilities</td>
<td>98</td>
<td>1.00</td>
<td>6.00</td>
<td>2.66</td>
<td>1.84</td>
</tr>
<tr>
<td>People with disabilities should be allowed to live where and how they choose</td>
<td>99</td>
<td>1.00</td>
<td>6.00</td>
<td>4.04</td>
<td>1.44</td>
</tr>
<tr>
<td>People with disabilities are able to adjust to life outside of an institutional setting</td>
<td>99</td>
<td>1.00</td>
<td>6.00</td>
<td>4.54</td>
<td>1.16</td>
</tr>
</tbody>
</table>

*Note.* Means are based on a Likert scale where 1 = Disagree Very Much, 2 = Disagree Pretty Much, 3 = Disagree A Little, 4 = Agree A Little, 5 = Agree Pretty Much, and 6 = Agree Very Much.

Table 8. Frequency and Percentages of Participants’ Responses for Research Question 3

<table>
<thead>
<tr>
<th></th>
<th>I Disagree:</th>
<th>I Agree:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very Much</td>
<td>Pretty Much</td>
</tr>
<tr>
<td>People with disabilities should live with others with similar disabilities.</td>
<td>41 41.8 17 17.3 8 8.2 10 10.2 10 10.2 12 12.2</td>
<td>41 41.8 17 17.3 8 8.2 10 10.2 10 10.2 12 12.2</td>
</tr>
<tr>
<td>People with disabilities should be allowed to live where and how they choose.</td>
<td>8 8.1 8 8.1 10 10.1 36 36.4 20 20.2 17 17.2</td>
<td>8 8.1 8 8.1 10 10.1 36 36.4 20 20.2 17 17.2</td>
</tr>
<tr>
<td>People with disabilities are able to adjust to life outside of an institutional setting.</td>
<td>3 3.0 3 3.0 10 10.1 22 22.2 44 44.4 17 17.2</td>
<td>3 3.0 3 3.0 10 10.1 22 22.2 44 44.4 17 17.2</td>
</tr>
</tbody>
</table>
Research Question 4

Three (3) of the questions on the attitude questionnaire asked the respondents to measure attitudes toward people with mental disabilities and other groups. The mean score of all the respondents on these three questions was 3.57, suggesting that the respondents tended to have positive attitudes toward persons with mental disabilities and other groups. Over fifty percent (56.8%) disagreed that mental retardation and mental illness are similar. On the statement that disabled children in regular classroom have an adverse effect on other children, sixty-nine percent (69%) disagreed. Results are presented in Table 9. The frequency and percentages of participants’ responses to each question are presented in Table 10.

Table 9. Means and Standard Deviations for Research Question 4

<table>
<thead>
<tr>
<th>Survey Items for Research Question 4</th>
<th>N</th>
<th>Min.</th>
<th>Max.</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental retardation and mental illness are similar</td>
<td>97</td>
<td>1.00</td>
<td>6.00</td>
<td>3.28</td>
<td>1.92</td>
</tr>
<tr>
<td>Adults with developmental disabilities are in many ways like children</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>3.98</td>
<td>1.65</td>
</tr>
<tr>
<td>Disabled children in regular classroom have an adverse effect on other children</td>
<td>100</td>
<td>1.00</td>
<td>6.00</td>
<td>2.98</td>
<td>1.78</td>
</tr>
</tbody>
</table>

*Note.* Means are based on a Likert scale where 1 = Disagree Very Much, 2 = Disagree Pretty Much, 3 = Disagree A Little, 4 = Agree A Little, 5 = Agree Pretty Much, and 6 = Agree Very Much.
Table 10. Frequency and Percentages of Participants’ Responses for Research Question 4

<table>
<thead>
<tr>
<th></th>
<th>I Disagree:</th>
<th>I Agree:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very Much</td>
<td>Pretty</td>
</tr>
<tr>
<td></td>
<td>N %</td>
<td>Much</td>
</tr>
<tr>
<td>Mental retardation and mental illness are similar.</td>
<td>28</td>
<td>28.9</td>
</tr>
<tr>
<td>Adults with developmental disabilities are in many ways like children.</td>
<td>10</td>
<td>10.0</td>
</tr>
<tr>
<td>Disabled children in regular classroom have an adverse effect on other children.</td>
<td>25</td>
<td>25.0</td>
</tr>
</tbody>
</table>

Research Question 5

Twenty-four (24) ANOVAs were conducted to assess if differences exist on the scores for the following composite scales: Overall Attitudes, Attitudes toward People with Disabilities in the Workforce, Attitudes toward the Living Arrangements of People with Disabilities, and Attitudes toward People with Mental Disabilities and Other groups as a function of the six demographic variables (Gender, Religion, Ethnicity, Age, Residency and Education).

Gender

Four ANOVAs were conducted to assess whether differences exist as a function of gender (men versus women) on overall attitudes, attitudes toward people with disabilities in the workforce, attitudes toward the living arrangements of people with disabilities, and attitudes toward people with mental disabilities and other groups. At a significance level of .05, there was no significant difference in mean scores by gender. (See Table 11).
Table 11. ANOVA Results on Overall Attitudes as a Function of Gender

<table>
<thead>
<tr>
<th></th>
<th>Male (n = 56)</th>
<th>Female (n = 29)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>Sig.</td>
</tr>
<tr>
<td>Overall attitudes toward people with disabilities</td>
<td>1.57</td>
<td>.214</td>
</tr>
<tr>
<td>(0.13)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward living arrangements of people with disabilities</td>
<td>0.73</td>
<td>.396</td>
</tr>
<tr>
<td>(0.93)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward people with disabilities in the workforce</td>
<td>1.40</td>
<td>.240</td>
</tr>
<tr>
<td>(0.31)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward people with mental disabilities and other groups</td>
<td>0.12</td>
<td>.734</td>
</tr>
<tr>
<td>(1.11)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. df = 1, 83.

Religion

Four (4) ANOVAs were conducted to assess whether differences exist as a function of Religion (Christian versus Muslim versus Other Religion) on overall attitudes, attitudes toward people with disabilities in the workforce, attitudes toward the living arrangements of people with disabilities, and attitudes toward people with mental disabilities and other groups. At a significance level of .05, there was no significant difference in mean scores by religion suggesting that participants’ attitudes do not differ as a function of Religion (see Table 12).
Table 12. ANOVA on Attitudes as a Function of Religion

<table>
<thead>
<tr>
<th></th>
<th>Christian (n = 69)</th>
<th>Muslim (n = 13)</th>
<th>Other (n = 3)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>F</strong></td>
<td>0.01</td>
<td>0.48</td>
<td>0.57</td>
</tr>
<tr>
<td><strong>Sig.</strong></td>
<td>.986</td>
<td>.621</td>
<td>.569</td>
</tr>
<tr>
<td><strong>M</strong></td>
<td>3.89</td>
<td>3.83</td>
<td>4.81</td>
</tr>
<tr>
<td><strong>SD</strong></td>
<td>0.37</td>
<td>1.00</td>
<td>0.58</td>
</tr>
<tr>
<td><strong>M</strong></td>
<td>3.90</td>
<td>4.08</td>
<td>4.82</td>
</tr>
<tr>
<td><strong>SD</strong></td>
<td>0.33</td>
<td>0.84</td>
<td>0.43</td>
</tr>
<tr>
<td><strong>M</strong></td>
<td>3.88</td>
<td>3.78</td>
<td>5.17</td>
</tr>
<tr>
<td><strong>SD</strong></td>
<td>0.31</td>
<td>0.69</td>
<td>0.60</td>
</tr>
</tbody>
</table>

Note. df = 2, 82.

**Ethnicity**

Four (4) ANOVAs were conducted to assess whether differences exist as a function of Ethnicity (Hausa/Fulani versus Igbo versus Yoruba versus other ethnicities) on overall attitudes, attitudes toward people with disabilities in the workforce, attitudes toward the living arrangements of people with disabilities, and attitudes toward people with mental disabilities and other groups. At a significance level of .05, there was no significant difference in mean scores by ethnicity suggesting that participants’ attitudes do not differ as a function of Ethnicity (see Table 13).
Table 13. ANOVA on Attitudes as a Function of Ethnicity

<table>
<thead>
<tr>
<th></th>
<th>Hausa/ Fulani (n = 8)</th>
<th>Igbo (n = 17)</th>
<th>Yoruba (n = 21)</th>
<th>Other (n = 38)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>F</strong></td>
<td>0.01</td>
<td>.988</td>
<td>3.90</td>
<td>0.41</td>
</tr>
<tr>
<td><strong>Sig.</strong></td>
<td>.988</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>M</strong></td>
<td>3.90</td>
<td>3.88</td>
<td>3.90</td>
<td>3.89</td>
</tr>
<tr>
<td><strong>SD</strong></td>
<td>0.41</td>
<td>0.43</td>
<td>0.31</td>
<td>0.36</td>
</tr>
<tr>
<td>Overall Attitudes toward people with disabilities</td>
<td>(0.13)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>F</strong></td>
<td>0.54</td>
<td>.657</td>
<td>4.10</td>
<td>0.83</td>
</tr>
<tr>
<td><strong>Sig.</strong></td>
<td>.657</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>M</strong></td>
<td>4.10</td>
<td>4.02</td>
<td>3.72</td>
<td>3.87</td>
</tr>
<tr>
<td><strong>SD</strong></td>
<td>0.83</td>
<td>1.05</td>
<td>0.89</td>
<td>0.97</td>
</tr>
<tr>
<td>Attitudes toward living arrangements of people with disabilities</td>
<td>(0.91)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>F</strong></td>
<td>0.13</td>
<td>.943</td>
<td>4.80</td>
<td>0.48</td>
</tr>
<tr>
<td><strong>Sig.</strong></td>
<td>.943</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>M</strong></td>
<td>4.80</td>
<td>4.88</td>
<td>4.78</td>
<td>4.83</td>
</tr>
<tr>
<td><strong>SD</strong></td>
<td>0.48</td>
<td>0.44</td>
<td>0.70</td>
<td>0.56</td>
</tr>
<tr>
<td>Attitudes toward people with disabilities in the workforce</td>
<td>(0.33)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>F</strong></td>
<td>1.01</td>
<td>.392</td>
<td>3.20</td>
<td>1.12</td>
</tr>
<tr>
<td><strong>Sig.</strong></td>
<td>.392</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>M</strong></td>
<td>3.20</td>
<td>2.97</td>
<td>3.51</td>
<td>3.24</td>
</tr>
<tr>
<td><strong>SD</strong></td>
<td>1.12</td>
<td>1.09</td>
<td>0.96</td>
<td>1.07</td>
</tr>
<tr>
<td>Attitudes toward people with mental disabilities and other groups</td>
<td>(1.11)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note.** df = 3, 81.

**Age**

Four (4) ANOVAs were conducted to assess whether differences exist on overall attitudes, attitudes toward people with disabilities in the workforce, attitudes toward the living arrangements of people with disabilities, and attitudes toward people with mental disabilities and other groups as a function of Age (35 or Less versus 36-45 versus 46 or More). ANOVA results were significant on overall attitudes, suggesting that participants’ overall attitudes toward disabilities differ by Age \( F(2, 82) = 4.86, p = .01 \); see Table 14. Tukey post hoc tests reveal
that at a significance level of .05, there was a significant difference between the mean scores of participants age 46 or more and participants age 35-45 and those 35 or less, indicating participants 36-45 and those 35 or less had significantly more positive attitudes on overall attitude score. No significant differences emerged on attitudes toward living arrangements of people with disabilities, attitudes toward people with disabilities in the workforce, and attitudes toward people with mental disabilities and other groups as a function of Age (see Table 14).

Table 14. ANOVA on Attitudes as a Function of Age

<table>
<thead>
<tr>
<th>Attitude</th>
<th>35 or Less (n = 27)</th>
<th>36-45 (n = 39)</th>
<th>46 or More (n = 19)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>Sig.</td>
<td>M</td>
</tr>
<tr>
<td>Overall Attitudes toward people with disabilities</td>
<td>4.86*</td>
<td>.010</td>
<td>3.83</td>
</tr>
<tr>
<td>(0.12)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward living arrangements of people with disabilities</td>
<td>0.68</td>
<td>.512</td>
<td>3.87</td>
</tr>
<tr>
<td>(0.93)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward people with disabilities in the Workforce</td>
<td>0.29</td>
<td>.748</td>
<td>4.78</td>
</tr>
<tr>
<td>(0.32)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward people with mental disabilities and other groups</td>
<td>1.21</td>
<td>.304</td>
<td>3.23</td>
</tr>
<tr>
<td>(1.10)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. df = 2, 82.
*Significant at p<.05.
Years of Residency

Four (4) ANOVAs were conducted to assess whether differences exist on overall attitudes, attitudes toward people with disabilities in the workforce, attitudes toward the living arrangements of people with disabilities, and attitudes toward people with mental disabilities and other groups as a function of years of residency in the United States of America (one to four years versus five to 10 years versus over 10 years). ANOVA results were significant, suggesting that participants’ overall attitudes, attitudes toward people with disabilities in the workforce, and attitudes toward people with mental disabilities and other groups differ as a function of years of residency in the United States of America (see Table 15). Tukey post hoc tests reveal that at a significance level of .05, there was a significant difference between the mean scores of participants residing in the United States of America between one and four years on overall attitudes and attitudes toward people with mental disabilities and other groups scores compared to participants residing in the United States between five and 10 years. Post hoc tests also revealed that participants residing in America over 10 years had more positive attitude score toward people with disabilities in the workforce than participants residing in the United States between one and four years. No significant differences emerged on attitudes toward the living arrangements of people with disabilities scores as a function of years in America (see Table 15).
Table 15. ANOVA on Attitudes as a Function of Years in USA

<table>
<thead>
<tr>
<th></th>
<th>1-4 (n = 42)</th>
<th>5-10 (n = 23)</th>
<th>Over 10 (n = 20)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Attitudes toward people with disabilities</td>
<td>F 4.31*</td>
<td>Sig. .016</td>
<td>M 3.78</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward living arrangements of people with disabilities</td>
<td>2.12</td>
<td>.126</td>
<td>3.67</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward people with disabilities in the Workforce</td>
<td>4.73*</td>
<td>.011</td>
<td>4.70</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitudes toward people with mental disabilities and other groups</td>
<td>5.17*</td>
<td>.007</td>
<td>3.59</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. df = 2, 82.

- Significant at \( p < .05 \).

Level of Education.

Four (4) ANOVAs were conducted to assess whether differences exist on overall attitudes, attitudes toward people with disabilities in the workforce, attitudes toward the living arrangements of people with disabilities, and attitudes toward people with mental disabilities and other groups as a function of Level of Education (HND or Less versus Bachelors Degree versus Masters Degree). At a significance level of .05, there was no significant difference in mean scores suggesting that participants’ attitudes do not differ as a function of Level of Education (see Table 16).
Table 16. ANOVA on Attitudes as a Function of Level of Education

<table>
<thead>
<tr>
<th>Overall Attitudes toward people with disabilities</th>
<th>$F$</th>
<th>Sig.</th>
<th>$M$</th>
<th>$SD$</th>
<th>$M$</th>
<th>$SD$</th>
<th>$M$</th>
<th>$SD$</th>
</tr>
</thead>
<tbody>
<tr>
<td>HND or Less ($n = 23$)</td>
<td>0.06</td>
<td>.945</td>
<td>3.88</td>
<td>0.38</td>
<td>3.88</td>
<td>0.38</td>
<td>3.91</td>
<td>0.32</td>
</tr>
<tr>
<td>Bachelor’s Degree ($n = 34$)</td>
<td>0.22</td>
<td>.805</td>
<td>3.96</td>
<td>1.01</td>
<td>3.86</td>
<td>1.02</td>
<td>3.80</td>
<td>0.86</td>
</tr>
<tr>
<td>Master’s Degree or Above ($n = 28$)</td>
<td>0.57</td>
<td>.567</td>
<td>4.87</td>
<td>0.56</td>
<td>4.87</td>
<td>0.56</td>
<td>4.74</td>
<td>0.56</td>
</tr>
<tr>
<td>Attitudes toward living arrangements of people with disabilities</td>
<td>1.03</td>
<td>.361</td>
<td>3.36</td>
<td>1.03</td>
<td>3.07</td>
<td>0.99</td>
<td>3.40</td>
<td>1.13</td>
</tr>
</tbody>
</table>

Note. df = 2, 82.

Summary

Chapter 4 presented the results of the attitude study conducted among Nigerians residing in the Sacramento area of California in the United States of America. Information gathered from the SADP and the demographic questionnaire were synthesized and presented in this chapter. A majority of the participants showed positive attitudes toward people with disabilities. It was observed that gender, religion, ethnicity, and level of education attained did not influence attitudes of the respondents toward people with disabilities. Statistically significant differences were noted between the attitudes scores of participants’ age 46 or more and those for participants age 36-45 and those 35 or less. Participants
age 46 or more had significantly lower mean attitudes toward people with disabilities scores compared to participants age 36-45 and those 35 or less. This indicates that participants age 36-45 and those 35 or less had more positive attitudes toward people with disabilities. It was also observed that participants residing in the United States between one and four years had significantly lower attitude scores than participants residing in the United States five to 10 years or more suggesting that participants residing in the United States between five to 10 years or more had more positive attitudes toward people with disabilities.

Chapter 5 presents a full summary, conclusions, implications, and recommendations for further research.
CHAPTER 5. SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

This chapter is organized into three main sections. The first section will summarize this research by reviewing the purpose, questions, methods, procedures, and results. The second section of this chapter will present the conclusions, including a report of the important findings. The final section offers implications and recommendations for improvements and further research.

Research Summary

The main purpose of this study is to examine Nigerians’ attitudes toward people with disabilities. The group studied is Nigerians residing in the Sacramento area of California. In addition, the study analyzed the extent to which attitudes are impacted by such factors as years of residency in the United States, gender, age, level of education attained, ethnicity, and religion. A psychometric instrument, the Scale of Attitudes toward Disabled Persons (SADP), was used to assess the attitudes of Nigerians toward people with disabilities.

Data were collected from 100 respondents, who completed the SADP scale that consisted of 24 questions. Of these 24 questions, 12 measured the respondents’ overall attitudes, six measured the respondents’ attitudes toward employment and people with disabilities, three measured the respondents’ attitudes toward living arrangements of people with disabilities, and three measured the respondents’ attitudes toward people with mental disabilities and other vulnerable groups. Respondents also completed a ten-item demographic questionnaire. A synthesis of information collected from the SADP and the
demographic questionnaire helped the researcher to draw the following conclusions and recommendations resulting from this study.

**Review of Research Questions**

There were five questions this research sought to investigate:

1. What are Nigerians’ overall attitudes toward people with disabilities?
2. What are Nigerians’ attitudes toward employment and people with disabilities?
3. What are Nigerians’ attitudes toward living arrangements and people with disabilities?
4. What are Nigerians’ attitudes toward people with mental disabilities and other groups?
5. What is the relationship between selected demographic variables (such as gender, religion, ethnicity, and age) and overall attitudes toward people with disabilities, attitudes toward employment and people with disabilities, attitudes regarding living arrangements and people with disabilities, and attitudes toward people with mental disabilities and other groups?

**Conclusions**

This study found that respondents had very positive overall attitudes toward people with disabilities. More specifically, 73.4% disagreed that people with disabilities get unfair advantages; 91.9% agreed that people with disabilities should be encouraged to mainstream; 89.0% agreed that people with disabilities should be given more control in decisions that affect their lives; 97.0% disagreed that adults with disabilities should not engage in sexual activities; and 84.8% disagreed with the statement that people with disabilities are not capable of making moral decisions.
The second research question sought to measure Nigerians’ attitudes toward people with disabilities in the workforce. The responses to these questions yielded affirmative results. Almost all respondents, (97.0%) agreed that people with disabilities could increase their job skills through training, 99.9% agreed that laws to prevent employers from discriminating against people with disabilities should be passed, and 99.9% agreed that the opportunities for gainful employment should be provided to people with disabilities.

The questions aimed at measuring Nigerians’ attitudes toward living arrangements of people with disabilities produced positive results as well. While 67.3% of the respondents disagreed that people with disabilities should live with others with similar disabilities, 63.8% agreed that people with disabilities should be allowed to live where and how they choose, and 83.8% agreed that people with disabilities are able to adjust to life outside of an institutional setting.

Respondents were asked a set of questions aimed at measuring their attitudes toward people with mental disabilities and other vulnerable groups. Most respondents disagreed with the statement that mental retardation and mental illness are similar. More than two-thirds (69.0%) of respondents disagreed with the statement that having disabled children in regular classrooms has an adverse impact on other children.

Based on this study, there were no differences between males and females regarding attitudes towards people with disabilities. This finding is incongruent with Artale (2003), Paris (1993), Saravanabhavan (1994), Elmaleh (2000), and Nishikawa (1998) who found relationships between gender and attitude.
However, the findings of this study support Hengst (2003), and Choi and Lam (2001), who did not find a significant difference as a function of gender regarding attitudes toward people with disabilities.

Additional analyses were conducted to assess if differences exist regarding attitudes as a function of religion, but none emerged. This finding contradicts a study conducted by Haj-Yahia (1999), who found a relationship between religion and attitudes toward people with disabilities.

Results of analyses to assess whether differences exist based on ethnicity were not significant, suggesting that the participants’ attitudes regarding people with disabilities do not differ by ethnicity. This finding differs from the study conducted by Fiske (1997) in which a relationship was found between ethnicity and attitudes toward people with developmental disabilities. However, it must be noted that Fiske (1997) had a different and broader definition of ethnicity. Fiske’s (1997) definition included bi-racial/multiracial, Caucasian/non-Hispanic, Hispanic/Latino, Asian/Pacific Islander, and African-American.

Results of the analyses to assess whether differences exist based on age were significant. More specifically, participants’ overall attitudes toward disabilities differed by age, such that participants age 35-45 and those 35 or less had significantly more positive attitudes or overall attitudes score compared to participants aged over 46 years. No other significant differences emerged as a function of age. This result is consistent with the findings of Trawick (1990) and Nishikawa (1988), who found a relationship between age and attitudes toward people with disabilities. This result contradicted the studies by Al-Abdulwahab
and Al-Gain (2003) and Hengst (2003), who found little or no relationship between age and attitudes toward people with disabilities.

Analyses were conducted to assess if differences exist by years of residency in the United States. Results were significant, suggesting that participants’ overall attitudes, attitudes toward people with disabilities in the workforce, and attitudes toward people with mental disabilities and other vulnerable groups differed as a function of years of residency. Participants residing in the United States of America over 10 years had more positive attitude score toward people with disabilities in the workforce than participants residing in the United States between one and four years. No other significant differences emerged on this variable. Review of literature did not show that this variable has previously been studied. Therefore, it is difficult to make any comparison.

Differences did not emerge as a function of level of education, suggesting that educational background has no influence on attitudes toward disabled people. These findings support Al-Abdulwahab and Al-Gain (2003) but are incongruent with the findings of Trawick (1990), Saravanabhavan (1994), and Fiske (1997), who found a relationship between level of education and attitudes toward people with disabilities.
Implications

The results of this study have implications for research and practice.

Some of these implications include but are not limited to the following:

Research Area

The Nigerians in the Sacramento area of California appear to have positive attitudes toward people with disabilities. Although most of the demographic variables that were tested did not have significant difference in the Nigerians’ attitudes toward people with disabilities, number of years of residency and age did show some significant relationships. Some of the basic assumptions in this study were that the disability laws as well as the way people with disabilities assert themselves to ensure that their civil rights are protected would influence Nigerians in the Sacramento area of California. The results of this study confirmed this researcher’s basic assumption in that Nigerians residing in the Sacramento area of California have positive attitudes toward people with disabilities. These conditions are most likely unattainable in Nigeria where there are neither laws to protect people with disabilities nor are people with disabilities able to assert themselves to demand equal rights.

Based on the outcome of this study, it is safe to speculate that Nigerians, who currently reside in Sacramento area and in the United States of America by extension, would support and advocate for equal rights for people with disabilities if they were to return to their home country of Nigeria. The positive attitudes of Nigerians residing in the Sacramento area of California towards people with disabilities can be attributable to environmental influence since their home
country does not have laws to protect the disabled nor are the disabled seen or
heard in public.

Practice Area

Results of this study did not lend itself to any implications that could be reflected in practice area. This will be accomplished in the area reserved for recommendations for future research.

Recommendations for Future Research

The mere fact that the sample in the study was drawn from Nigerians residing the Sacramento area of California suggests that caution must be exercised in generalizing the findings beyond the members of the sample. As the data are limited in geographic scope, it is incumbent upon the researcher to make some suggestions for future research.

Future research undertakings on the attitudes of Nigerians toward people with disabilities in the United States and elsewhere should use purposive sampling methods to ensure that the demographic variables are more equally represented. Comparative studies through surveys could be conducted of attitudes of Nigerians in Nigeria and those residing in the United States using purposive sampling methodology. This would provide a better understanding of the effects of residing in the United States on attitudes toward people with disabilities.

Future study should be conducted in Nigeria to examine the Nigerian politicians’ attitudes toward people with disabilities and their impact on legislations that affect this population. Future research undertakings should also
include comparative studies with other races/ethnicities. This would expand the knowledge of different races/ethnicities’ attitudes toward people with disabilities.

This study was limited to Sacramento geographical area of California. Further research should be conducted in other Nigerian communities to ascertain if the findings of this study could be replicated.

This study showed that there is a high level of awareness and positive attitudes among Nigerian natives residing in Sacramento area of California about people with disabilities. The population surveyed showed positive perceptions and an interest in understanding the needs and the problems of people with disabilities. All the participants in the study were literate, which may account for the increased level of awareness and positive attitudes regarding people with disabilities.

Attitudes of the public influence the lifestyles, education, employment, integration, and availability of services to people with disabilities. It is of vital importance to identify attitudes toward people with disabilities and study the resultant impact of the different variables on attitude formation. Attitude studies are expected to assist in the formulation of social policies, educational programs, disability-related legislations, employment laws, and service delivery systems. It is anticipated that information from this and similar studies will increase public awareness on issues related to people with disabilities.
REFERENCES


Report on the implementation of the convention on the rights of the child by Nigeria. Retrieved February 18, 2005, from www.cleen@cleen.org.ng


SACRAMENTO ASSOCIATION OF NIGERIANS

P.O. Box 232748  Sacramento, CA 95823

February 11, 2006

Charles Akhidenor
9672 River Thread Court
Elk Grove, CA 95624

RE: Authorization to Conduct Survey

Dear Mr. Akhidenor:

We commend you for your research effort which will better the Nigerian community at large. Following our Feb 10th 2006 discussion regarding the above-referenced subject, on behalf of the association, I hereby grant you permission to administer your survey questionnaire during any of our monthly meetings.

Please let me know if I may be of any further assistance to you. I wish you the best of luck in your studies.

Sincerely,

[Signature]

Chief Sahib Lamn Hassan, President
Sacramento Association of Nigerians
(916) 774-8229

cc: SAN Exec
Hello!

My name is Charles Akhidenor, a graduate student from Capella University. As part of my doctoral dissertation, I am conducting a study on Nigerians’ attitudes toward people with disabilities. I invite you to participate in a survey about your attitude towards people with disabilities. You need not sign the questionnaire and you are assured that your response will remain anonymous and confidential. In fact, I want you to avoid using any information that might identify you to me or others involved in the study. And keep in mind your participation is voluntary.

Please answer all the questions, return the completed questionnaire and Informed Consent Form to me in the enclosed envelopes provided. It will take about fifteen (15) minutes to complete the questionnaire.

If you wish a summary of the findings of this study, please contact me at the e-mail address stated below. Also, if you have questions or concerns, please contact:

Charles Akhidenor, PhD Candidate Akhidenor@hotmail.com
School of Human Services
Capella University

Thank you for your consideration.
APPENDIX C.

CONTACT INFORMATION

CAPELLA UNIVERSITY
225 South Sixth Street, 9th Floor
Minneapolis, Minnesota 55402

Contact Information for this Study

Charles Akhidenor, MPA
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Manuel Woods, Ph.D (Chair)
Capella University
225 South Sixth Street, 9th Floor
Minneapolis, MN 55402
Email: manuel.woods@capella.edu
(888) 227-3552

Capella University
Institutional Review Board
1-(888) CAPELLA, Extension 5377
APPENDIX D

SURVEY QUESTIONNAIRE

Scale of Attitudes Toward Disabled Persons

Directions: The statements presented below express opinions or ideas about people with disabilities (mental, physical, visual, hearing). Many people agree and many disagree with each statement. I would like to know your opinion about them. Circle the appropriate number, from -3 to +3, which best corresponds with how you feel about the statement. There are no right or wrong answers.

KEY:

-3 = I disagree very much  +3 = I agree very much
-2 = I disagree pretty much  +2 = I agree pretty much
-1 = I disagree a little  +1 = I agree a little

1. People with disabilities get unfair advantages  -3 -2 -1 +1 +2 +3
2. People with disabilities can increase their job skills through training……………….. -3 -2 -1 +1 +2 +3
3. Mental retardation and mental illness are similar. -3 -2 -1 +1 +2 +3
4. Adults with developmental disabilities are in many ways like children -3 -2 -1 +1 +2 +3
5. People with disabilities should be encouraged to mainstream (engage in activities with non-disabled people)-3 -2 -1 +1 +2 +3
6. I agree with the statement. “People with disabilities should be given more control in making decisions that affect their lives”-3 -2 -1 +1 +2 +3
7. People with disabilities should live with others with similar disabilities -3 -2 -1 +1 +2 +3
8. I generally feel sorry for people with disabilities. -3 -2 -1 +1 +2 +3
9. Adults with disabilities should not engage in sexual activities -3 -2 -1 +1 +2 +3
<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10.</td>
<td>People with disabilities are not capable of making moral decisions</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>11.</td>
<td>Most people with disabilities are willing to work.</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>12.</td>
<td>People with disabilities can be expected to fit into competitive society</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>13.</td>
<td>People with disabilities should be allowed to live where and how they choose</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>14.</td>
<td>People with disabilities are more emotionally maladjusted than the general public</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>15.</td>
<td>People with disabilities are able to adjust to life outside of an institutional setting</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>16.</td>
<td>Laws to prevent employers from discriminating against people with disabilities should be passed</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>17.</td>
<td>Simple and repetitive work is appropriate for people with disabilities</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>18.</td>
<td>The presence of a disabled in a social gathering makes people uncomfortable.</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>19.</td>
<td>Disabled children in regular classroom have an adverse effect on other children</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>20.</td>
<td>The opportunity for gainful employment should be provided to people with disabilities</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>21.</td>
<td>People with disabilities can have active a active social life...</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>22.</td>
<td>People with disabilities are a financial drain and give little back to the community.</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
<tr>
<td>23.</td>
<td>People with disabilities experience the same range of emotions as non-disabled people...</td>
<td>-3</td>
<td>-2</td>
<td>-1</td>
<td>+1</td>
</tr>
</tbody>
</table>
24. Some people with disabilities are physically indistinguishable from the general population… -3 -2 -1 +1 +2 +3

DEMOGRAPHIC INFORMATION

Gender: 1. □ Male 2. □ Female

Religion: 1. □ Christian
2. □ Muslim
3. □ African Traditional Religion
4. □ Other (specify)


Age Groups: 1. □ 35 years old or less
2. □ 36 to 45 years old
3. □ 46 years and above

Level of Education: 1. □ HND or less
2. □ Bachelor’s Degree
3. □ Master’s Degree and above

Are you disabled? 1. □ yes 2. □ no

Do you have children that are disabled?
1. □ yes 2. □ no

Do you have friends that are disabled?
1. □ yes 2. □ no

Do you have relatives that are disabled?
1. □ yes 2. □ no

How long have you resided in the United States of America? 1. □ 1-4 years
2. □ 5-10 years
3. □ Over 10 years

Thank you for your time and participation in this study.
Dear Participants:

My name is Charles Akhidenor, and I am a doctoral candidate in the School of Human Services at Capella University. Under the supervision of Dr. Manuel Woods, I am conducting a survey study titled, “Nigerians Attitudes Toward People with Disabilities”.

The purpose of this study is to investigate Nigerians’ attitudes toward people with disabilities. As there is paucity of information on the status of people with disabilities in Nigeria, findings of this study will contribute to the knowledge on the perceptions of people with disabilities in a cultural context. The result of these findings will also enable governmental agencies, professional associations, vocational rehabilitation counselors, and employers to design programs affecting people with disabilities.

The main criteria for the selection of participants will be Nigerians who reside in Sacramento and surroundings Counties. Participation in this study will involve completing a survey questionnaire, which address questions related to background information and attitudes toward people with disabilities. Completion of the survey questionnaire will take about 15 minutes. Participation in this study is voluntary. The participants may refuse to participate or withdraw at any time. The participants may also skip any questions that he/she prefers not to answer.

There are no known risks associated with your participation in this research. Although you will receive no direct benefits for your participation, you may help the researcher learn more about Nigerians attitudes toward people with disabilities.

If you are interested in participating in this study, and/or you need more information about this study, please contact me. All telephone calls and messages are confidential. I would like to thank you for taking the time to read this letter and for considering participation.

Sincerely,

Charles Akhidenor  
(916) 230-4085  
Akhidenor@hotmail.com