# Changing medical students' attitudes to learning disability

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The Strathcona Theatre Company is made up of professional actors with a learning disability and two directors. As part of the teaching course in the Department of Psychiatry of Disability at St George's Hospital Medical School, the medical students participate in a workshop given by the Company, near the beginning of their attachment in psychiatry. During the two-hour workshop the students are taught a variety of 'ice breaking' games and mimes by members of the Company. This means that early on in the course, students have face to face contact with adults with a learning disability, and furthermore see them in a socially valued role as teachers and leaders. The students usually find the workshop enjoyable, and give positive feedback although they were unsure how successful the workshop was in changing medical students' attitudes towards people with learning disability. We report an evaluation of students' attitudes before and after the workshop, and show statistically significant changes in attitudes towards people with a learning disability.

# The study

Students were asked to rate how much they agreed with a series of ten statements concerning people with Down's syndrome, by drawing a line across a 100 mm line, one end of which represented 'strongly agree', the other 'strongly disagree'. They were asked to do this immediately before and after the workshop. We chose statements concerning Down's syndrome, because this will be familiar to medical students whereas the concept of learning disability may not. Several members of the theatre company have Down's syndrome.

# **Findings**

Fourteen students participated in the workshop in two successive firms, making a total of 28 students in the study. The results are presented in Table 1. For each statement, the median percentage agreement and the inter-quartile range are presented for before and after the workshop. Wilcoxon's signed ranks test was used

Table 1. Students' agreement with the statements before and after the workshop

Statement	% agreement before		% agreement after		
	Median	Inter-quartile range	Median	Inter-quartile range	Significance
People with Down's syndrome:					
1. Are poor communicators	23	18	14	15	P<0.001
2. Make good teachers	44	19	55	40	P=0.01
3. Understand other people's					
feelings	68	40	78	12	NS
4. Prefer to be told what					
to do	22	25	11	19	P=0.02
5. Are generally happy	60	29	64	34	NS
6. Have little sense of humour	12	12	5	10	P=0.01
7. Tend to be frightening	8	17	6	11	P=0.05
8. Act like children most of					
the time	31	36	20	22	P=0.02
9. Are often capable of look-					
ing after themselves	58	40	73	34	P=0.02
10. Find it easier to understand					
words than signs or gestures	45	15	48	28	NS

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to assess whether the change in scores was of statistical significance. For all statements, there was more agreement with positive statements and less agreement with negative statements after the workshop than before it. Seven of the changes achieved statistical significance.

### Comment

We have demonstrated that there was a significant shift in medical students' attitude towards people with Down's syndrome after the workshop compared to before it. There was significantly less agreement with the statements that people with Down's syndrome make poor communicators, prefer to be told what to do, have little sense of humour, tend to be frightening, and act like children most of the time. There was significantly more agreement after the workshop with the statements that people with Down's syndrome make good teachers, and are often capable of looking after themselves. We have thus demonstrated the value of the workshop in changing attitudes towards a more enlightened viewpoint.

Communication and disability were both identified in the General Medical Council (1993) report *Tomorrow's Doctors* as curricular areas which required more time in a modern medical undergraduate curriculum. Hollins (1988) found considerable agreement about the broad aims of learning disability teaching in United Kingdom medical schools, in particular that these should enable doctors in any speciality, including general practice, to provide sensitive and appropriate care to people with a learning disability. Learning objectives defined by learning disability course organisers typically include more skill and attitude objectives than other parts of the curriculum, recognising that knowledge-based objectives must be supported by a holistic understanding of the social and emotional consequences of chronic disability. Crisp (1994) included the "abilities to communicate professionally with people of all ages, those with learning disabilities (and their families) . . ." as an important skill, and to have "respect for the views of patients and other carers" as an important attitude to teach undergraduate medical students in psychiatry.

In reviewing learning objectives for the future, curriculum committees will be identifying knowledge, skill and attitude objectives for each subject area. We have demonstrated that by using innovative teaching methods it is possible to change medical students' attitudes to more appropriate ones for helping people with a learning disability. We hope that such methods will ensure that these young doctors will be able to meet the health care needs of people with a learning disability in whatever branch of medicine they choose.

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