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**Ca' Foscari students' perception
of disability.**

A comparison between future teachers and future social
workers.

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“Disability is a matter of perception.

If you can do just one thing well,

you’re needed by someone.”

Martina Navratilova

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ABSTRACT

What people think of and how they act towards individuals with disabilities may have a huge impact on society, especially when they are in close contact. Social workers and teachers work in close contact with people with disabilities every day and therefore they represent important figures in this area.

This thesis wants to offer a contribution to this research field by exploring the perceptions, the thoughts and the attitudes towards disability. More specifically, the aim of this work is to investigate Ca' Foscari students' perception of disability, since the employment rate of Ca' Foscari students after graduating is higher than the national average. Particularly, the present work focuses on future teachers and future social workers, in order to understand their initial beliefs and expectations. Communalities and differences between these two groups of students will be underlined in the results.

Essentially, the research involved eighty-nine Ca' Foscari students of various disciplines studying in Venice, who voluntarily completed an online questionnaire. The findings indicate that the majority of the participants consider disability as a condition of difficulty and an insidious obstacle in daily life. Moreover, participants believe that knowing someone with disabilities personally, leads to a better understanding of disability and none of them showed indifference to the theme.

INTRODUCTION

How people think about and act towards individuals with disabilities may have a huge impact on society, especially when people are in close contact with individuals with disabilities. Although architectural barriers, social biases and negative attitudes towards people with disabilities are still very common, there is an open challenge to remove the barriers to accessing services and in order to reduce prejudices and stereotypes. In particular, schools are becoming more and more accessible for students from all backgrounds and children with disabilities are educated in full inclusive classrooms. In such a context therefore, some important figures (e.g., teachers and social workers), are involved and increasingly in demand.

Many recent studies have focused on general attitudes towards disability and inclusive education; however, there is a lack of information concerning the perceptions, attitudes, sentiments and concerns towards disability of both pre-service teachers and social workers, especially within the Italian context.

The main purpose of the current work is to investigate Ca' Foscari students' perception of disability; in addition, their sentiments, beliefs and concerns towards disability are also investigated. In particular, this thesis compares Ca' Foscari future teachers and future social workers, in order to understand their initial beliefs and levels of consciousness, since they will work in close contact with people with disabilities. Differences and common points between the two groups of students will be underlined. It has been decided to focus specifically on Ca' Foscari students since their employment rate after graduating is higher than the national average. Moreover, it must be specified that Ca' Foscari University of Venice is aware of the issue of disability and offers services in order to include all students and facilitate academic life for students with disabilities, thus showing a certain sensitivity to the theme.

The research involved eighty-nine Italian participants studying in Venice (all Ca' Foscari students of various disciplines), who voluntarily completed an online

questionnaire, divided into four sections. The majority of the participants were female (85.4%) with an average age between 18 and 43 years.

Basically, the thesis is composed of five chapters.

Chapter one shows the evolution of the concept of disability through the centuries and explains how people with disabilities were perceived not only in ancient and modern times, but also how they are considered nowadays. In addition, this chapter analyses the current situation of people with disabilities in Italy. Different laws that promote inclusion and recent data from ISTAT are presented, in order to better understand it.

Chapter two deals with the figure of the teacher in an inclusive classroom and at the same time shows the importance of Social Work. Specifically, this chapter analyses the International literature about both pre-service teachers and social workers' perceptions, attitudes and concerns regarding disability.

Chapter three is about the exploratory survey. In particular, it introduces the main objectives of the thesis, the methodology used and also provides the presentation of the sample and the structure of the questionnaire. In addition, this chapter shows the number of Ca' Foscari students with disabilities enrolled at the University of Venice in the academic year 2020/2021.

Chapter four deals with data analysis and the results obtained are presented and revealed, with the help of graphs and tables.

Finally, chapter five examines the data from different perspectives and discusses the results obtained. Moreover, the limits encountered and the conclusion are provided.

Overall, the results have shown that the majority of future teachers and future social workers both consider disability as a difficult condition and an insidious obstacle in daily life, despite specific university courses and the promotion of inclusive policies to reduce prejudices. Also, the results have shown that the majority of the two groups of students have the same initial thoughts, when they see a person with a disability. In addition, the majority of them not only share most beliefs of self-efficacy, but have also expressed the same sentiments and concerns towards people with disabilities in general. Finally, it emerged that none of the participants show indifference to the theme

and the majority of both future teachers and future social workers believe that knowing someone with disabilities personally, leads to a better understanding.

However, not even half of the participants are completely aware of the existence of chronic and invisible illnesses; in addition, they only partially know of some diseases (e.g., Autism, Multiple Sclerosis and Parkinson's Disease).

To sum up, this thesis provides new data regarding how Ca' Foscari students perceive a person with a disability and underlines common aspects and differences between future teachers and future social workers. This work is addressed to anyone who would like to deepen their knowledge on disability and to teachers, educators and social workers that deal with this situation every day.

CHAPTER I

HISTORY REGARDING THE CONCEPT OF DISABILITY

1.1 The concept of Disability in ancient times

Fortunately, not only has the concept of disability changed quite a bit over the centuries, but it has done so in a positive way. As a matter of fact in ancient times a person with a disability was often marginalized by society and considered unworthy of living. Already in his work entitled *Politics*, the Greek philosopher Aristotle (1973) wrote that as far as the newborn were concerned there should have been a law that impeded the upbringing of children born with malformations. In fact these children were considered useless to the State and therefore eliminated at birth. Plato, in his book *Republic*, claimed that all physicians had to leave those individuals that were physically ill to perish. Therefore, only those who were considered to be healthy in body and spirit deserved to be treated (Cario, 2014).

However, a significant change came about with the presence of Christianity since the New Testament began to give voice to the concept of disability and the disabled¹ were no longer characterized in a negative way. From the Gospel according to Matthew there is a passage that reads:

1 When he finished giving instructions to his twelve disciples, Jesus left to teach and preach within their cities. **2** John, having heard of the works of Christ while in prison, sent his disciples to say **3** “Are you He who must come or must we wait for another?” **4** Jesus answered “Inform John of what you hear and see. **5** The blind receive sight, the lame walk, those who have leprosy are cleansed, the deaf hear, the dead are raised, and the good news is proclaimed to the poor. **6** Blessed is anyone who does not stumble on account of me” (Matthew 11:6 NIV).

¹ The terms “handicapped” and “disabled” are used only in reference to the original sources and the historical context.

With the reading of the Gospel and the stories of Jesus who encounters the blind, the crippled and others suffering from various ailments, the concept of disability took on a new perspective, a new approach towards the sick person which resulted in such feelings as pity and compassion. For this reason, all worshippers had the opportunity of doing good deeds, following the principle of Christian charity, helping those with malformations or other problems and condemning every form of inequality, no longer considered a form of Divine punishment (Cario, 2014).

Commencing from the 12th Century, the first leper colonies arose as a result. In other words, they were charitable establishments where the leprosy patients were isolated in order not to infect the other inhabitants. This was to lead, in the following centuries, to the creation of hospitals, within London and Paris, wherein patients with physical and mental disabilities were placed. In the year 1700 interest towards patients with mental illnesses had increased notably to the extent that a French doctor by the name of P. Pinel founded in 1793 the first asylum for those individuals that showed signs of psychiatric disability (Cario, 2014).

One of Pinel's students, Jean Marc Gaspard Itard (1774-1838), a French physician and pedagogist, is nowadays considered the founding father of special psychology, a branch which operates in all areas of psychology. Itard is known for having tried to teach Victor, a child that was unable to speak and who showed mental retardation. The child was discovered alone within the woods of Aveyron and for this reason is better known as the *Savage of Aveyron* or simply the *sauvage*. According to Itard, the handicap in people as Victor was as a result of the lack of socializing. Therefore, human beings were supposed to live exclusively within a social context. This theory dates back to the 1800s. It was because of this episode that the disabled began to be considered *savages* that had to be taught (Itard, 2007).

The 1800s, however, were also characterized by the widespread presence of orphanages, prisons, hospitals and asylums; these were all facilities that were created and built with a sole purpose: to maintain social control. The "patient" placed within these establishments was taken care of and treated and hence did not interfere with the other healthy and productive people of society, all this within the historical context of

the Industrial Revolution. The work of scientific literature written in 1859 by the English naturalist Charles Darwin entitled *On the Origin of Species* was a turning point in the 19th Century. “Darwin, considered to be the father of the theory of evolution of the human race, [...] reached the conclusion that of all the living creatures present on Earth, only those that were able to adapt to the environment, developed and survived” (Legrenzi and Jacomuzzi, 2020, p. 23)². The outlook of the world had definitely changed in consequence of the Darwinian theory; according to the latter, those, who were not able to adapt to the environment, became extinct.

The English philosopher, Herbert Spencer, was to follow in Darwin’s footsteps. The theory he developed was explained in his main work, *Social Statics*, written in 1851. In Spencer’s view, “the attempts to reduce ‘the strict discipline of Nature’ are harmful as Nature strives to ‘wipe the slate clean’ of the weak to make room for the best individuals” (Cario, 2014, p. 4)³. In this case Darwin’s theory of evolution was not only misunderstood, especially concerning the concept of adaptation, but was moreover applied, for the very first time, to the social and political context. This fostered an ideology in favour of the bourgeoisie which in turn contributed to laying the foundations of the conception of race (Cario, 2014).

The 20th Century was particularly difficult for individuals with disabilities, as it featured the two World Wars. People with flaws and those believed to be *inferior* were a large problem for the State, a problem which needed to be resolved. This was pointed out by the Italian leader Benito Mussolini in 1927, during his speech to power. Shortly after, the genocide, carried out during the Nazi Regime, started precisely with the disabled. The first test subjects within the concentration camps and the first people to be killed for the sake of *racial purity* were the weaker individuals - in other words, disabled children and adults, having physical or mental disabilities, congenital disorders or learning impairments (Friedlander, 1997).

² Translated by the author.

³ Translated by the author.

An immense number, more precisely 275,000 people, were killed by the Nazi doctors between 1939 and 1947.

The following is particularly important:

It is particularly difficult to describe this part lightheartedly. To talk about the atrocities that babies, children and adolescents were subject to, being starved to death or used as test subjects in various experiments, simply because they were born with a disability or suffered from a disease, were slow learners or had behavioural issues. All this for the sake of “racial purity”. Reporting all of this causes a knot in my stomach. But it is necessary to report (Tarditi, 2007. “*L’olocausto delle diversità*”)⁴.

But the 19th Century was also a century which brought about positive changes as regards the subject of disability. Maria Montessori was an Italian doctor and pedagogist who founded the very first *Casa dei Bambini* in the outskirts of Rome, Italy. This was a pre-school where children, many of whom came from difficult situations, could freely express their spontaneity and learn in a playful way by choosing learning tools on their own. It was a multi-disciplinary approach and an innovative teaching method for all children, even those considered unteachable. It was precisely due to this revolutionary approach introduced at the Montessori schools that led to school integration as we know it today (Nota, Ginevra & Soresi, 2015).

Many changes took place both within the school system as well as within healthcare facilities starting from the second half of the 1900s, following the two World Wars. Foremost the Italian Constitution came into effect on January 1, 1948; Article 3 continues to guarantee rights to all citizens, irrespective of gender, race, social and personal conditions. Hence, even a disabled person has the same rights as any other citizen.

⁴ Translated by the author.

The brutality witnessed during the Second World War led to a feeling of general indignation thus the disabled person began to be seen under another angle; his/her state of life slowly began to be improved in every respect. The Italian neurologist and psychiatrist from Venice, Franco Basaglia, was the first to refuse the asylum. During the 1960s he became Chief-of-Staff of the Psychiatric Hospital in Gorizia; he struggled to change the rigid organization within. He wanted that inhumane methods no longer be used and that the label of “incomprehensible patients” be removed (Cario, 2014).

The 1960s witnessed a change also regarding the way that the disabled child was inserted into the school system: a medical and more isolating approach was followed by an approach that allowed for children with impairments to be placed within classrooms of *scuola comune* and no longer in special or differential classes thanks to Law No. 517 passed in 1977. This law, together with other legislation, led to the Framework Law No. 104 of 1992. The latter guarantees the right to an education and the inclusion of all students with impairments (Cottini, 2018).

1.2 The concept of disability in modern times

It is not easy to provide a definition of disability. Efforts have been made over the years to classify disabilities in order to obtain a definition generally agreed upon. Up until the mid 1950s, there was a healthcare approach towards the disabled according to which they were considered needy of constant treatment and care. For this reason, hospitals and specialized centers seemed to be the only solution possible (Sedran, 2004).

By the end of the 1970s, however, the perspective changed as the subject of disability began to be seen as an issue that regarded the whole society and not only that of the sole individual. For this reason, we have moved from a medical model, better known as the *individual* model (since the impairment was considered a burden of the individual), to the *social* model, which took into account those problems caused by disabling environments as well as physical and cultural barriers. The 1970s represented

an important breakthrough regarding the way people conceive the disability issue, thus promoting an approach in favour of social integration of disabled persons (Cottini, 2018). In addition, healthcare was also considered fundamental as it was to be accessible not only to the patient but also to his/her family.

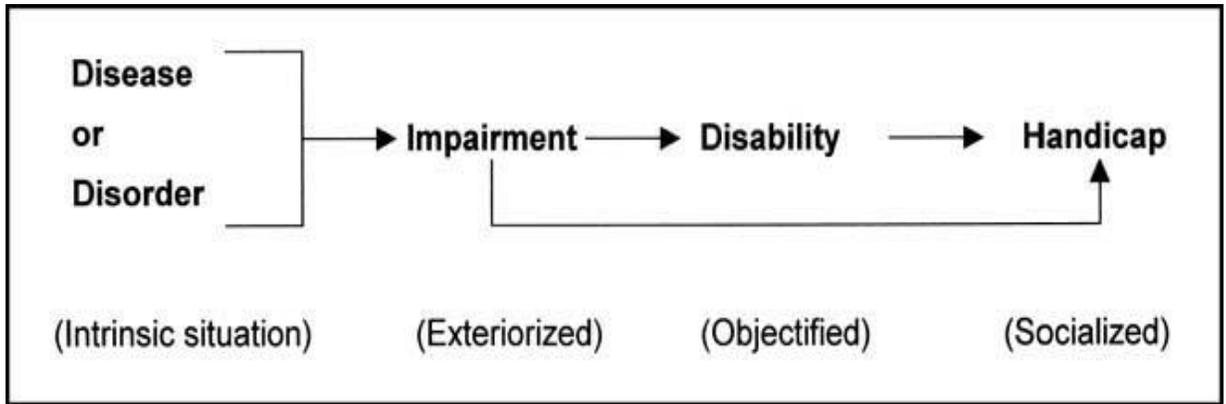
The first classification worded by the WHO (World Health Organization) in 1970 was *ICD*; in other words, *International Classification of Diseases*, based on the medical model. It aimed at identifying the causes of the illnesses, describing them from a clinical point of view and ranking them by transforming the clinical information gathered into numerical data. One of the primary limits represented by ICD is the fact that such a classification focussed the attention exclusively on the etiological aspect of the illness and did not allow for the observation of the disabling environmental situations (Schianchi, 2012).

To face the deficiencies of those subjects with disabilities, to facilitate their socialization and, at the same time, keep the implications of their illnesses into account, the World Health Organization published *ICIDH (International Classification of Impairment, Disability and Handicap)* in 1980 (see Fig. 1). Thanks to this publication, it became possible to distinguish between Impairment, Disability and Handicap. More specifically, *impairment* implies a loss or a structural or functional disorder which can occur both at a physical as well as mental level. The term *disability*, on the other hand, refers to a limitation in the ability to carry out an activity in a way that is considered common to all human beings. Lastly, *handicap* indicates a disadvantage regarding the interaction between the person and the surrounding environment which impedes the individual from achieving a certain social status.

It thus becomes possible to assert that the circumstances become *handiccapanti* for the individual involved. According to this notion, it is important to underline that the impairment determines the disability and that the handicap is caused by the impairment or the disability, in a cause-and-effect relationship (Cottini, 2018).

As Cario (2014) points out, “ICIDIH represents an important step in the development of the ranking system since it is the first tool, as regards disability, which is able to analyze the impact that one’s health condition has on the person” (p. 7)⁵.

Figure 1 – *ICIDH's causative model*



Source: WHO (1980).

There has been a follow-up with another document containing some revisions to the original: *ICIDH-2* (WHO, 1999). In this revised version, the concept of greater importance regards active participation, which was innovative.

The health concept became central with the adoption of the *ICF* model (WHO, 1999), which is the *trait d'union* between the previous models, in other words, individual and social models. The ICF was not a diagnostic instrument but rather served to classify health and its related conditions. The responsibility of being disabled was no longer addressed to the person but instead regarded the situation in which this person found him/herself.

ICF gains significant importance seeing that it uses an innovative approach and represents a multi-disciplinary tool as it serves as a model from a biological, psychological and social point of view (i.e., biopsychosocial model). As Cottini (2018) underlines, “ICF strives to arrive at a synthesis able to provide a coherent prospective of the different dimensions of health at a biological, individual and social level” (p.18)⁶.

⁵ Translated by the author.

⁶ Translated by the author.

The environment takes on considerable significance according to this model and is always to be taken into account since it may both be a facilitator as well as barrier to people with disabilities. Therefore, the ICF model represents a valid tool to describe and measure any health condition of an individual not to mention the disabilities present amongst the population. At the centre of the discussion there are the concepts of activity and social participation, which in turn replace the concepts of impairment and handicap (Cottini, 2018).

In 2007 *ICF-CY (International Classification of Functioning, Disability and Health for Children and Youth)* was published with the aim to compensate the need to have an ICF model, universally recognized and valid also for children and adolescents (WHO, 2007). Such a model allows for the ranking of health conditions and the display of disabilities amongst youngsters, keeping in mind the various aspects related to growth during childhood. The ICF-CY (WHO, 2007) focuses on the recreational aspect and the technological field.

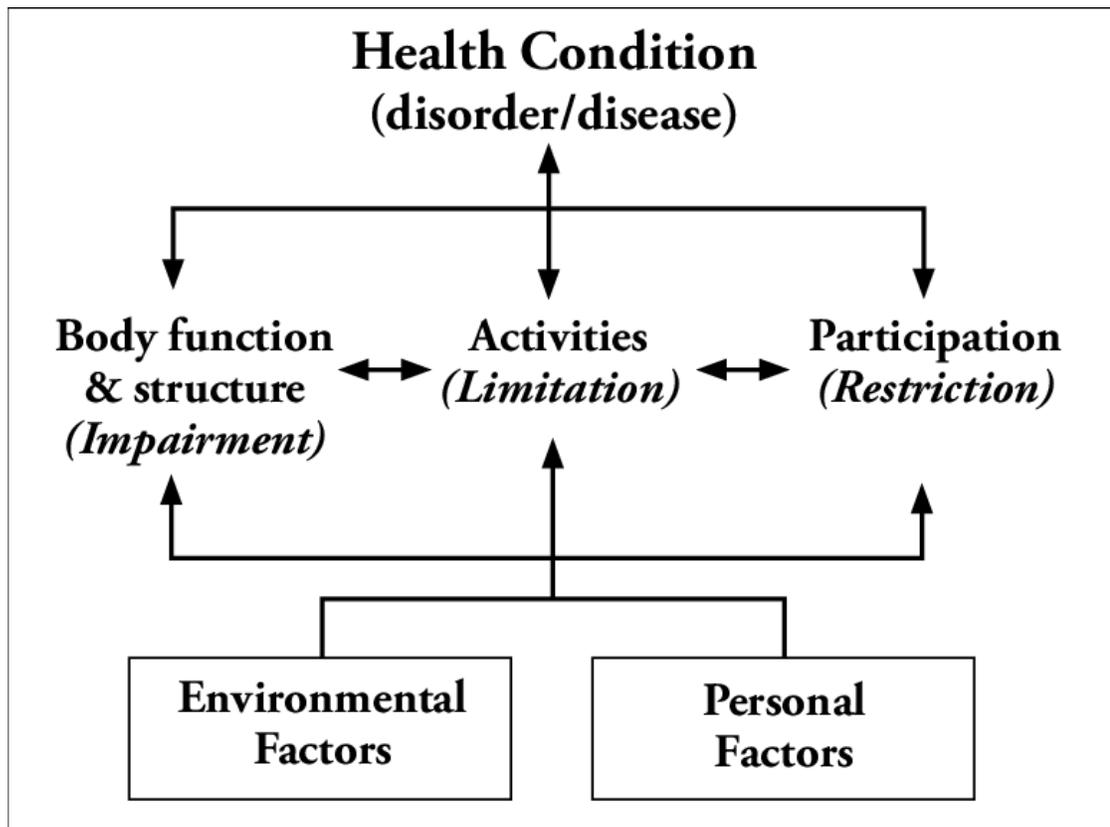
1.2.1 Organization of ICF

ICF (see Fig. 2) is divided into two parts. The first part is made up of two elements (a) and (b): we can find (a) body functions (which include physiological functions as sensorial functions and pain) and body structures (which regard anatomical parts as the nervous system, an organ, skin and related structures) and (b) activity and participation (which concerns the actions carried out by the subject and his/her involvement in a specific situation; this involves personal care and life within a community).

The second part consists of (c) environmental factors (services, systems and politics) and (d) personal factors. The latter, however, are included but not classified within the ICF and refer to the experiences of the individual (Cottini, 2018). Each element is further subdivided into a sequence of chapters, each of which contains other categories at different levels.

As already underlined, ICF is not a ranking system which addresses a minority of people with disabilities; on the contrary, it regards everyone seeing that an individual may find him/herself within a unfavourable context, causing thus a condition of disability (Leonardi, 2003). ICF, therefore, classifies health conditions whenever there is the need to evaluate a person’s health condition not only from a physical but also from a personal and social point of view.

Figure 2 – The ICF bio-psycho-social Model of functioning.



Source: WHO, 2007.

In conclusion, as Cottini (2018, pp.73-74) claims:

The ICF document covers all features of a person's health, grouping the former in a *health domain* (which includes, the ability to see, hear, walk, learn and remember) and in *health-related domains* (which include mobility, education, participation in social life and the like)⁷.

With this in mind and with the aim of creating a language understood by all, it is possible to assert that ICF can be used as a valid tool in collecting and comparing data not only amongst dissimilar illnesses but also amongst different countries. This allows for planning appropriate actions considering that Italy, at the moment, does not have a system whereby information concerning disabilities and health can be gathered (Leonardi, 2003).

As time goes by, ICF will be used not only by practitioners in the medical field but will also be used in learning and social contexts; this represents a step forward. This tool will be helpful in identifying persons with disabilities' needs not to mention in monitoring the costs of treatments.

It is worth mentioning that, thanks to ICF, disability nowadays is no longer a synonym of illness. What lies at the basis is an individual's real potential and not his/her disability.

1.3 The concept of disability nowadays

Without doubt the Framework Law No. 104 of 1992 represents a turning point as regards the inclusion and care of subjects with disabilities. This law enhanced the integration of people with disabilities in all sectors of life; not only as regards social life but also at school, work and within the family, thus filling the legislative void (ISTAT, 2019).

⁷Translated by the author.

In 2006 the United Nations General Assembly approved the Convention on the Rights of Persons with Disabilities. This document provided the necessary guidelines so that all countries around the world could guarantee the rights of social integration and equality to all those with disabilities.

The objective of guaranteeing equality to all citizens is evident in Article 5, comma 1, 2, 3 and 4 within the Convention on the Rights of Persons with Disabilities (United Nations, 2006, p. 6):

1. States Parties recognize that all persons are equal before and under the law and are entitled without any discrimination to the equal protection and equal benefit of the law.
2. States Parties shall prohibit all discrimination on the basis of disability and guarantee to persons with disabilities equal and effective legal protection against discrimination on all grounds.
3. In order to promote equality and eliminate discrimination, States Parties shall take all appropriate steps to ensure that reasonable accommodation is provided.
4. Specific measures which are necessary to accelerate or achieve de facto equality of persons with disabilities shall not be considered discrimination under the terms of the present Convention.

Even Article 10 is notably significant as it guarantees the right to life. As stated within the Convention on the Rights of Persons with Disabilities, “States Parties reaffirm that every human being has the inherent right to life and shall take all necessary measures to ensure its effective enjoyment by persons with disabilities on an equal basis with others” (United Nations, 2006, p. 9). The Guidelines on the topic of inclusion within schools was to follow in 2009. According to the latter, one of the main objectives set forth was that of creating a school as inclusive as possible so as to involve all students not only those with disabilities. This approach aimed to creating spaces that would accommodate all people, thus considering diversity as a starting point. As Cottini (2018) states, “It is not about including the students in class, replacing in this way the word integration with a more appealing expression, but rather rendering the context, the method and the approach more inclusive for all people” (p. 15)⁸.

⁸Translated by the author.

From the above-mentioned Guidelines, focus then turns to students with Specific Learning Disabilities (*DSA* in Italian) with Law No. 170 of 2010 and to those with Special Needs (*BES* in Italian) with the Ministerial Directive dating December 27, 2012, issued by the Department of Education (*Ministero dell'Istruzione, dell'Università e della Ricerca – MIUR*).

As a result students that experience drawbacks from a cultural, linguistic or social-economic point of view are considered Special Need students in addition to those with Attention Deficit Hyperactivity Disorders (ADHD) or those with disabilities (Cottini, 2018). Thanks to these recent laws, it is possible to guarantee not only the inclusion of these students within the school context but also introduce targeted measures aimed at single individuals as well as involve the entire class through group work.

Legislation regarding inclusive education and specialized teacher training was passed in 2017. More specifically, Legislative Decree No. 66 of 2017 formally introduced ICF in the processes regarding social and scholastic inclusion. It is precisely from the latter classification, founded on a biological, psychological and social approach that the operating profile (*Profilo di Funzionamento*) for the inclusion of students with disabilities was designed. This consists of a document prepared by various members, taking into account environmental factors and enabling a broader interpretation of needs (Lascioli & Pasqualotto, 2021).

In conclusion, on the basis of ICF, one of the main objectives nowadays is to create inclusive contexts for all persons, thus breaking down barriers and prejudices. As Leonardi (2003) claims, “By adopting ICF, one takes on an outlook on health considered inclusive, fair and humanitarian, thus accepting the right of disabled people to be a natural part of society itself” (p. 8)⁹.

⁹Translated by the author.

1.4 People with disabilities in Italy

It has never been easy to identify and thus quantify the number of people with disabilities; this, above all, as a result of the elaboration of ICF which introduced new aspects to be taken into account.

ISTAT Research, which has been present in Italy since 1926, found that “People who suffer serious limitations, which prevent them from carrying out daily tasks as a result of health problems, are approximately 3,100,000 in our country (5.2% of the entire population)” (ISTAT, 2020 p. 10)¹⁰. The age range involved, for the most part, are the elderly, with nearly 1,500,000 beyond the age of 75. The latter represents about 20% of the whole population. Approximately a million of these individuals are female. ISTAT has also calculated the distribution of disabilities from a geographical point of view. The finding shows a larger presence of persons with disabilities in the South and on the islands rather than in the North. On a regional scale, Umbria is at the top of the list with 8.7% of persons with disabilities present and Sardegna with 7.3%. This phenomenon is less widespread in Valle d’Aosta, Lombardy and the Veneto Regions, with a rate of 4.4% (see Chart 1).

Chart 1 – *Population with disabilities. Year 2017.*

Tavola 1 - Persone con limitazioni gravi nelle attività abitualmente svolte (valori percentuali) per Regione e sesso. Anno 2017

REGIONI	Maschi	Femmine
Piemonte	4,9	5,9
Valle d'Aosta / Vallée d'Aoste	3,4	5,3
Liguria	4,5	6,3
Lombardia	3,5	5,1
Trentino Alto Adige / Südtirol	4,3	5,1
Veneto	3,2	5,6
Friuli-Venezia Giulia	3,6	5,3
Emilia-Romagna	4,3	6,2
Toscana	4,1	6,1
Umbria	6,9	10,5
Marche	4,5	6,4
Lazio	4,1	6,2
Abruzzo	4,5	6,4
Molise	3,8	6,4
Campania	4,2	5,3
Puglia	4,4	6,0
Basilicata	4,5	7,0
Calabria	5,1	6,4
Sicilia	5,3	6,6
Sardegna	6,1	8,5
Italia	4,3	6,0

Source: ISTAT (2019). *Conoscere il mondo della disabilità.*

In brief, ISTAT Research has pointed out how a disability is determined by a series of limitations, often considered serious, with consequent effects in many different areas of people's lives – health, education, the workplace and social life. There can be notable repercussions which affect a disabled person's daily life even from an economical point of view. Moreover, a study carried out, regarding health conditions, shows that Southern Italy clearly has more disadvantages in comparison to Central and Northern Italy. Furthermore, it appears that women experience more drawbacks than men do.

1.5 Disabilities within the Italian school system

ISTAT published some statistics in a document entitled *Report sull'inclusione scolastica degli alunni con disabilità* in regards to the 2018/2019 school year (ISTAT, 2020). The aim of the report was to observe the current situation in the schools and to verify the students with disabilities' inclusion within.

As stated in the Report, “There has been an increase in the number of disabled students (above ten thousand) that attend Italian schools (3.3% of the total student body)” (ISTAT, 2020 p. 1)¹¹. In addition, an analysis of the data shows that only 34% of Italian schools are accessible to those students with mobility impairments; only 2% of schools are able to provide appropriate support such as Braille software to those with a sensory disability. It follows that too many architectural barriers are still present - barriers have been demolished in only 15% of school buildings; this even though many illnesses are acknowledged nowadays and despite the presence of many more certified cases in respect to the past. The situation is more critical in the South in comparison to the North of Italy, respectively having 29% versus 38% of schools in accordance with regulations.

¹⁰Translated by the author.

¹¹Translated by the author.

ISTAT Research shows improvement as regards the relationship between the student with disability and the *support teacher*. This even though the latter has not yet received adequate training and despite the fact that the number of trained support teachers is below the amount needed.

A student with disabilities receives on average 14.1 hours of support per week. In the last few years the hours dedicated per week have increased by 18%. Nonetheless, “the needs of the disabled students have not been met: almost 6% of families have appealed to the Regional Administrative Court, claiming that the number of hours assigned to the students are unsuitable” (ISTAT, 2020 p. 6)¹².

The Report also indicates that “during the 2018/2019 school year, the number of disabled students that attended Primary and Middle Schools were just over 177,000. This amounted to 3.9% of the total number of students” (ISTAT, 2020 p. 5)¹³.

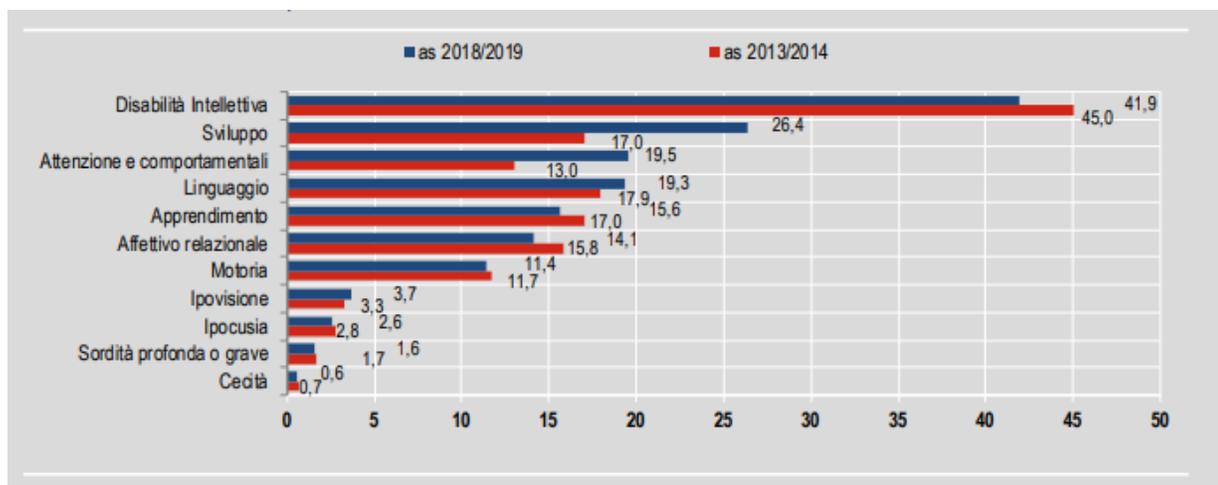
98.4% of the total number of students with disabilities are certified according to Law No. 104 of 1992. In this context, not only are the majority of students with disabilities male (there are 212 boys for every 100 girls) but also mental disabilities prevail in 42% of cases of students with support teachers (See Chart 2).

What follows, as indicated in the chart below, is a larger percentage of disorders related to development and more precisely, 26.4%, whereas sensory disabilities appear to be less common with 8% of cases.

¹²Translated by the author.

¹³Translated by the author.

Chart 2 – *Students with disabilities according to the type of disorder and school year within the Primary School Context*



Source: ISTAT (2020). *Report sull'inclusione scolastica degli alunni con disabilità*.

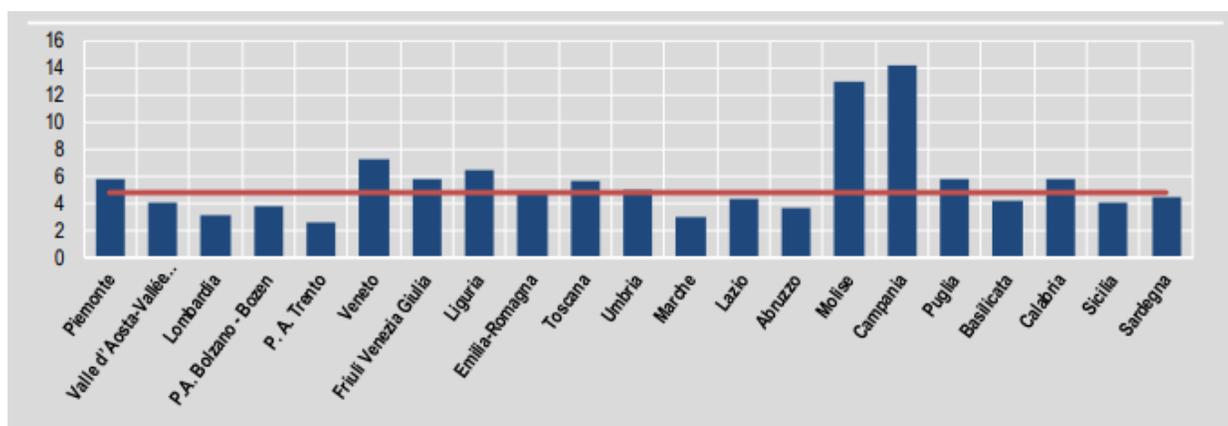
1.5.1 *Ad personam* assistants

Assistants for autonomy and communication (*ad personam* assistants) represent significant number of professionals providing assistance to disability, thanks to Law No. 104 of 1992. Some assistants work at school and they assist students with disabilities; in addition, they collaborate not only with support teachers, but also with the entire teaching staff. Among his/her tasks, an assistant has to facilitate communication, to implement some skills or activities and to support students' socialization and autonomy. For this reason, *ad personam* assistants represent very important figures since they provide support to the students with disabilities in schools.

According to ISTAT (2020), in Italy there are little less than 54 thousand *ad personam* assistants, which corresponds to 19 assistants per 100 students with disabilities. The pupil/assistant ratio in Italy is 4.8%.

On a regional scale, Campania and Molise are at the top of the list, with 14 and 13 students with disabilities per assistant respectively. The situation is therefore more critical in the South in comparison to the North of Italy (see Chart 3).

Chart 3 - *Students with disabilities/Assistants for Autonomy and Communication Ratio Comparison. School year 2018-2019.*



Fonte: ISTAT (2020). *Report sull'inclusione scolastica degli alunni con disabilità*

CHAPTER II

ASSISTANCE TO PEOPLE WITH DISABILITIES

People with disabilities, who constitute nearly 5.2% of the population in Italy, have to face many difficulties, since they are often victims of discrimination and stereotyping, and therefore they need assistance and help in life. For these reasons, there are two main players involved who both provide support to people with disabilities: the teacher and the social worker.

This chapter focuses on the assistance given to people with disabilities, starting at school. Firstly, it shows the importance of the teacher in an inclusive classroom, the new skills that are required and details of the “24-CFU programme”, which was introduced in 2017. Secondly, the chapter emphasises the importance of the teacher helper, especially for students with disabilities, and then the connection that has emerged between adaptability and teachers wellbeing in the workplace. Thirdly, based on the literature review, this chapter presents pre-service teachers’ attitudes and concerns towards disability and the factors that may influence teachers success. Finally, there is a brief history of Social Work in Italy, since this profession is focused on human rights and social workers who assist people with disabilities. The last paragraph is devoted to Social Work students’ perceptions and attitudes towards disability, suggesting the need for more research in this area.

2.1 The figure of the teacher in an inclusive classroom

It is not easy being a teacher nowadays, because teachers have to attain high performance within a challenging and ever-changing context. In addition, they have great responsibility since the task is crucial and delicate.

As shown in the previous chapter, Law 517/1977 abolished special schools in Italy and Law 104/1992 supports pupils with disabilities in education, which is a human right. Baguisa and Ang-Manaig (2019) stated that “education may be defined as the process of imparting knowledge, skills, values, norms and culture from one generation to another in a society” (p.1410). However, to date, one of the most important aspects to consider is the Inclusive Education, which means that all children are in the same classrooms, and that they can participate, learn and grow together. As synthesized by Ridarick & Ringlaben (2013), “In the past 30 years, the number of students with disabilities served in a general education classroom has increased. This movement, previously called mainstreaming, is now more frequently referred to as inclusion” (p.1). Consequently, because of the rapid changes on a social and cultural level, the situation that teachers have to face in an inclusive classroom is more complicated, since they have to operate and interact with children of mixed abilities (Sakarneh & Nair, 2014). Not only teachers and parents, but also communities and Governments have to collaborate in order to combat discriminations, support each child’s learning and promote equal opportunities.

Inclusive education, which is the need of the time, is not only an approach for some groups of learners with particular needs but on the contrary, it is an approach for all learners. This means that all teachers have to be prepared for the purpose of teaching all students, since inclusive education is their responsibility. Therefore, teachers have not to only consider skills and knowledge (European Agency, 2012).

Applying a rights-based approach to education in order to move towards inclusion will require comprehensive school system reform including modification of constitutional guarantees and policies, curricula, teacher training systems, materials, learning environments, methodologies, resource allocation, etc. Above all, it will require a change in attitudes of all people, throughout the system, to welcome diversity and difference and see these as opportunities rather than problems. (UNESCO, 2008, p. 29)

In 2007, The European Commission (EC) analysed the various situations and working conditions for teachers in Europe in a document named *Communication from*

the Commission to the Council and the European Parliament. Improving the Quality of Teacher Education (European Commission, 2007). This document has showed that improving the quality of Teacher Education is an important aim for Europe's education systems. In addition, new teaching approaches and competences are required. According to the European Commission (2007), "classrooms now contain a more heterogeneous mix of young people from different backgrounds and with different levels of ability and disability" (p.4).

The Profile of Inclusive Teachers (2012) is a result of the Teacher Education for Inclusion (TE4I) project, which wanted to answer the question "how can we prepare teachers in their initial teacher training to be inclusive?" (Arvelo-Rosales, Alegre de la Rosa & Guzmán-Rosquete, 2021). Besides, *The Profile* has now been implemented and therefore it is relevant for all teachers, not only for initial teacher education students. Consequently, The Profile represents a guide for all teachers and it is also a useful device for self-reflection. Moreover, it describes the essential values and areas of competence for teachers, in order to reach the goal of being effective in inclusive classrooms (European Agency for Development in Special Needs Education, 2012)².

EASDNE (2012), describes the teacher profile for inclusive education:

Four core values relating to teaching and learning have been identified as the basis for the work of all teachers in inclusive education. These core values are associated with areas of teacher competence. The areas of competence are made up of three elements: attitudes, knowledge and skills. A certain *attitude* or belief demands certain *knowledge* or level of understanding and then *skills* in order to implement this knowledge in a practical situation. For each area of competence identified, the essential attitudes, knowledge and skills that underpin them are presented. (p. 7)

² European Agency for Development in Special Needs Education (EASDNE).

According to EASDNE (2012), the Teacher Profile for Inclusive Education illustrated in (Figure 3) is composed of four competency areas, and each area comprises skills, attitudes and some capacities.

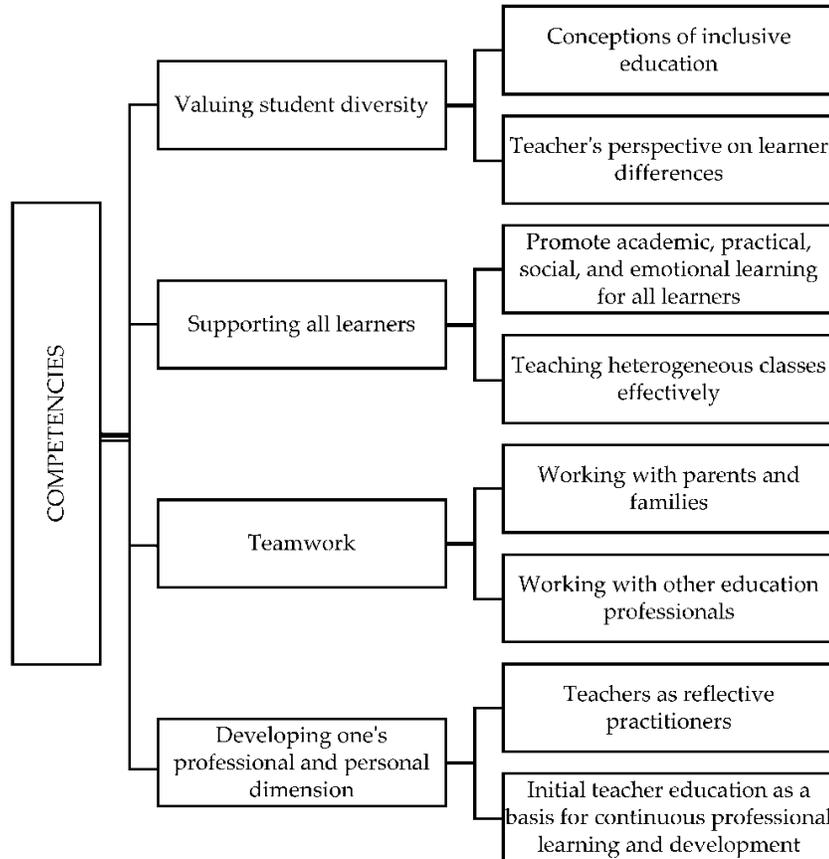
The first competence is valuing the diversity of learners. This means that an inclusive teacher should find the most adequate strategies to respond to the different needs in a classroom, in order to facilitate the participation of all students, who must be able to develop their learning potential.

The second competence, supporting all learners, involves the promotion of the academic, practical, social and emotional learning of all students. Moreover, teachers have to consider that their attitudes have consequences on students motivation and learning, and therefore teachers could affect their learners in a positive or negative way. For this reason, it is also important that teachers support all learners by adopting appropriate attitudes in terms of inclusion.

The third competence is teamwork. It is necessary that an inclusive teacher is capable of working in collaboration with other schoolteachers and educational professionals as a team. In addition, parents and families should also be involved in the process of working in a collaborative way, in order to support pupils.

The last competence, developing one's professional and personal dimension, refers to the fact that teaching requires continuous updates at both the practical and theoretical level. Teachers have to be aware of new regulations, and they have to find successful methods systematically as well as updating the school planning (Arvelo-Rosales et al., 2021; EASDNE, 2012).

Figure 3. Teacher profile for inclusive education (own elaboration based on EADSNE).



Source: *Initial Training of Primary School Teachers: Development of Competencies for Inclusion and Attention to Diversity*.

In conclusion, several studies have shown the importance of inclusive education which provides all students the possibility to reach their potential, focusing on learning needs. Furthermore, teachers are crucial and they must be able to provide support for students with and without disabilities (Larrivee, 1985, as cited in Sakarneh & Nair, 2014). According to EASDNE (2012), “teaching is a problem solving activity that requires on-going and systematic planning, evaluation, reflection and then modified action” (p.16).

2.1.2 '24 ECTS' for teaching to raise students' awareness of disability

As we have seen previously, since the responsibilities in an inclusive classroom are numerous, teachers have to master different competencies (e.g., organisation, teaching strategies, emotional learning, teamwork, etc.).

Particularly, teaching in secondary schools requires specific capabilities. For this reason, the Italian Ministry of Education and Research (MIUR) introduced in 2017 a "24-CFU programme", in accordance with Legislative Decree n.59 of 13 April 2017. The collection of all 24 university credits within the anthropo-psycho-pedagogical field allow students, after their Master degree, to access the national open competitive exam in order to become teachers. It should be stressed that an additional specialisation course called *TFA per il sostegno (Tirocinio Formativo Attivo)* is required for support teachers at all levels (Eurydice, 2022).

The Ministerial Decree n.616 of 10 August 2017 identified four main areas of interest for the 24-CFU programme. Students have to acquire 24 ECTS through university courses in the following areas:

- A – Pedagogy, Special Pedagogy and Didactics of Inclusion
- B – Psychology
- C - Anthropology
- D – Teaching Methodologies and Technologies

There are also two more requirements: students have to collect a minimum of 6 credits from each area (A, B, C or D) and they have to obtain credits in at least three of the four fields. These university specific courses are very interesting and useful for students, because it is thanks to them that future teachers could, for example, better understand the characteristics of learning of pupils with disabilities or with other types of difficulties. In addition, students have the possibility of exploring inclusive teaching strategies and they can also learn how to activate inclusive strategies for students with special education needs (SEN).

2.2 The importance of the teacher helper

Students with disabilities have additional needs and literature shows that not only they have always to face new challenges, but that there are still different barriers to tackle (Stanley, 2000). Students with disabilities should also receive assistive technology (AT), which means any piece of equipment that is used to help or improve the capabilities of a student with disabilities (e.g., computers and communication programs). The situation of people with disabilities at school is in the process of change and, as a consequence, the traditional role played by the teacher helper has also changed considerably.

In Italy, the teacher specialization for educational support activities for students with disabilities was introduced with D. M. n.249 of 10 September 2010. The skills that must be acquired by the aspiring teachers at the end of these courses have been clarified by the decree of 30 September 2011 (Montesano, Stranieri & Valenti, 2021).

Teacher helpers (also called teacher assistants, support teachers or additional teachers) support and help students with disabilities or with special needs. They have also to support the mainstream teacher and simplify everyday activities. Moreover, support teachers now have the specific role of mediator-agent: it is important that they increase their skills and knowledge, in order to support not only all diversities in an equal way, but also students with special needs (Gaspari, 2016).

The role of support teachers is complicated and their work involves different abilities and at the same time the capacity to respond to ever rising expectations. In fact, “the role of teacher assistant has shifted over the years, moving closer to a classroom teacher’s role, but often without clarity of boundaries” (Mackenzie, 2011, as cited in Martin A.J., Strnadová, I., Hájková, V., Němec, Z., & Květoňová, L., 2019, p.4).

In addition, support teachers can sometimes be marginalized and face a situation of exclusion and frustration at school. This might be due to tensions and contradictions, since the collaboration between teachers and support teachers cannot be assumed.

Despite numerous issues, one researcher emphasized that teacher helpers are crucial for students with special needs, considering that these figures increase the motivation, attention and behaviour of students (Howes, 2003, as cited in Rasmitadila & Goldstein, 2017). Consequently, there is a positive impact for both students with and without special needs, and also classroom teachers could benefit from teacher helpers. Moreover, it is relevant to notice that there is an increase in academic achievement and pupils are becoming more independent and skilled. Support teachers have to focus on annual goals and short-term instructional objectives (Arvelo-Rosales et al., 2021).

Teacher helpers have therefore to support students with learning and physical difficulties and provide the most appropriate compensatory interventions. They must also help the teacher they are supporting, since they are expected to always be prepared for new working situations. In other words, “Teacher assistants are a valuable classroom resource for students with disability and the teachers who work with these students” (Martin et al., 2019, p.26). The main goal to achieve is to facilitate the learning process in the classroom.

Furthermore, the interaction between teachers and students is the basis of a successful inclusive education. Recent studies have shown that for a positive interaction between teacher-student, teacher helpers have to consider not only verbal communication, but also non-verbal communication, in order to avoid misunderstanding. Particularly, non-verbal communication types include postures, gestures, facial expressions, tone of voice, touch and proximity. Another important aspect to consider is that “interactions can be intensified by pairing adults with students with special needs to help students overcome the difficulties associated with social interaction” (Burdick & Theoharis, 2012, as cited in Rasmitadila & Goldstein, 2017, p.486). Finally, positive interactions between support teachers and students with disabilities are considered extremely sensitive and the bond that is created between them has an influence on students emotional development. According to Mainhard, Oudman, Hornstra, Bosker & Goetz (2018), “the way that teachers interpersonally relate to their students is highly predictive of student emotions” (p.109).

2.2.1 Adaptability linked to teachers' workplace wellbeing

Several studies investigated the possibility that workplace adaptability represents a crucial element of wellbeing in the workplace. The results obtained demonstrated in fact that workplace adaptability is deeply connected to workplace wellbeing (Martin et al., 2019).

Adaptability means the capacity to be flexible and teachers who are adaptable are able to conform to changing environments and conditions. According to Martin, Nejad, Colmar and Liem (2012), as cited in Martin et al. (2019), "adaptability is defined as the ability to constructively regulate psycho-behavioural functions in response to new, changing and/or uncertain circumstances, conditions and situations" (p.5). Therefore, teachers and support teachers should be able to adjust their emotions and actions in order to face the situations properly, especially at the beginning of their careers.

Additionally, further studies have shown a considerable issue that support teachers have to face, which completely depends on the school situation (Martin et al., 2019). Firstly, sometimes a support teacher works with a single student with disability. Secondly, the support teacher shares his/her competencies with the entire classroom and, as a consequence, the attention is not only for the student with disability. Finally, a support teacher could find another situation whether he/she works with more students that are in different classrooms and, therefore, with more classroom teachers. These various situations might lead to high levels of stress and not all the individuals are capable of managing the requests (Butt, 2016b; Garwood, Van Loan, & Werts, 2018).

However, recent research has indicated that adaptability is the key to further success. Therefore, the role of adaptability in support teachers' workplace wellbeing is crucial (Collie et al., 2018, as cited in Martin et al., 2019).

Another noteworthy finding is that workplace wellbeing is composed of four factors, which are: workplace enjoyment, workplace self-concept, workplace participation and workplace motivation. All these elements contribute to the development and maintenance of the wellbeing of both teachers and students. Additionally, workplace wellbeing is strictly related to lower absenteeism from work, since teachers appreciate

their role. In conclusion, according to Martin et al. (2019), “it appeared that workplace adaptability significantly mediated the link between various personal/background characteristics and teacher assistants’ workplace wellbeing” (p.26).

2.3 Pre-service teachers’ attitudes and concerns towards disability

All teachers need to have the necessary knowledge and skills in order to provide didactic support. They also have to be equipped with the competencies required to respond to the needs of all students, especially for those with disabilities, since according to recent studies (e.g., Fiorucci, 2019) the person with disability is still considered scary and linked to the fear of difference.

There is a growing body of literature about teachers’ attitudes and perceptions regarding disability, since teachers’ positive attitudes towards disability are fundamental to facilitate inclusive practices. According to recent studies, “often the representations of the teachers in formation appear very close to the common sense, mostly stereotyped and prototypical, and often influenced by the fear of disability” (Fiorucci, 2018; Ramel, 2014; Disanto, 2015, as cited in Fiorucci, 2019, p. 70).

Furthermore, it is essential to understand and discover teachers’ initial beliefs and perceptions, as well as, being important to also explore the concerns and confidence levels that pre-service teachers feel. In fact, by understanding attitudes and concerns about disability, it is possible to establish whether future teachers are ready to teach students with special needs and whether they are also aware of the situation in mainstream schools, since classrooms represent complex scenarios (Forlin & Chambers, 2011, as cited in Aiello & Sharma, 2018).

Several studies have been conducted in order to investigate the perceptions of teacher trainees. Particularly, researchers wanted to explore the components that might affect teacher agency and pre-service teachers’ thoughts, expectations, attitudes and concerns. In fact, according to Aiello, Pace, Dimitrov & Sibilio (2017), teachers are

mostly influenced by three components, which are: the cognitive, the affective and the environmental.

According to some research, pre-service teacher training represents a relevant variable since training courses allow trainee teachers to immerse in the field of scholastic inclusion. In fact, Fiorucci (2019) stated, “training is an important opportunity to guide future teachers to reflect, evolve, change their attitudes towards disabilities and inclusion” (p. 70). Moreover, according to Rizzo, Frolli, Cavallaro, Sinigaglia & Scire (2021), specific courses help the new teachers to achieve nonstereotyped thinking about disability. Other studies have also shown that different personal characteristics, such as teachers’ beliefs, ideas, thoughts and values influence teaching and its effectiveness (Aiello et al., 2017). In other words, the efficacy depends primarily on teachers’ sentiments. Hence, further research has demonstrated that multiple variables affect teaching practices and inclusive approaches, which is also completely in line with the idea of self-efficacy. Bandura (1986) stated, “self-efficacy does not depend on the competencies one possess, but what you believe you can do with what you have under a variety of circumstances” (p.37). Therefore, both knowledge and sentiments have to be considered since they have a strong impact on trainee teachers (Aiello et al., 2017).

On the basis of such reflections, a significant number of scales and questionnaires have been used in order to investigate sentiments and concerns towards disability and inclusive education, not only in Italian contexts but also worldwide. Particularly, the *Sentiments, Attitudes, and Concerns towards Inclusive Education – Revised* (SACIE–R) Scale (Forlin, Earle, Loreman & Sharma, 2011) and the *Teacher Efficacy to Implement Inclusive Practices* (TEIP) Scale (Sharma, Loreman & Forlin, 2012) are two examples of these scales (that have also been translated in Italian), created for inclusive contexts and for the purpose of exploring the differences in attitudes towards mainstreaming and also the levels of efficacy, which is the newest variable compared to others. Particularly, the SACIE–R Scale provides items related to sentiments and for this reason it represents a very efficient tool. Finally, another important scale to keep in mind is the *Attitudes towards Mainstreaming* (ATMS) Scale (Berryman & Neal,

1980). According to the research results conducted in Italy, the scales when administered to both pre-service and in-service teachers are of great value and also have strong reliability. Moreover, according to Aiello et al. (2017), “the availability of validated questionnaires that can be used within the Italian context will not only provide insight into the Italian scenario but also the possibility of comparing data on an international level” (p.15). Hence, quantitative research is most commonly used.

Vianello, Lanfranchi, Moalli and Pulina (2015), as cited in Aiello et al. (2017), summarised some relevant studies on attitudes towards inclusion that are initiated in Italy in 1970. The most important results comprise the following aspects:

- teachers who had direct contact and experience seem to have fewer concerns than teachers who have little or no experience. This concerns all types of disability or special educational need except for students with socio-cultural disadvantage (Vianello, 1999, as cited in Vianello et al., 2015);
- the type of disability influences the teachers’ opinions, especially those students with mental or physical disability;
- the main cause of concern is students’ behavioural problems and the level of disruption that they may cause (pp. 15-16).

Moreover, children with Down syndrome appear to be less problematic than other pupils with other disabilities (e.g., intellectual disabilities). This could be due to the fact that there is more accurate knowledge of Down syndrome in general (Vianello et al., 2015). In this respect, Campbell, Gilmore & Cuskelly (2003) conducted a study, in which 274 teacher education students participated. The aim was to investigate their knowledge of Down syndrome and also their beliefs on inclusive education. The results obtained demonstrated that attitudes towards inclusion and disability change whether the knowledge and formal instruction is associated with structured fieldwork experiences, and therefore, with a direct contact with people with disabilities. In fact, “in general, level of contact has emerged as a significant factor in determining positive attitudes towards disability” (Forlin, Fogarty & Carroll, 1999a; Gregory, 1997; Hastings et al., 1996, as cited in Campbell et al., 2003, p.2). In addition, the results

indicated that raising awareness of one disability is strongly linked to favourable changes in student teachers' attitudes towards disability. Furthermore, the research literature on teachers' attitudes and perceptions has shown that the direct contact with people with disabilities also reduces concerns and provide better awareness.

A study conducted by Forlin, Douglas & Hattie (1996, as cited in Campbell et al., 2003) has highlighted that the majority of teachers are less reluctant to include in their classrooms students with mild physical disabilities, and for this reason, the severity of the disability affects teachers attitudes and perceptions in general.

Finally, according to the research results conducted in Italy, with the use of ATMS, it has emerged that support teachers have a general favourable attitude towards disability and inclusion than curricular teachers (Mega, Castellini & Vianello, 1997; Balboni & Pedrabissi, 2000). In addition, support teachers are more inclined to have a good relationship with their students, and this could be due to the fact that they have decided to focus on special education.

To conclude, pre-service teachers and teachers under 40 were found to be more available for any special needs students may have. Younger teachers are therefore more open to inclusion, even though the biggest fear is that of failure (Fiorucci, 2019).

To sum up, there are some common dominators that can be considered in order to better understand the complexity of inclusive education and that provide data on pre-service and in-service teachers attitudes and concerns towards disability. The main factors to take into consideration are:

- the level of knowledge;
- the severity of the disability;
- direct experiences;
- sentiments and personal interaction with students with disabilities;
- self-efficacy;
- age of the teachers;
- positive attitudes towards disability.

On the basis of positive attitudes towards disability, an important aspect to keep in mind is that pre-service teachers with positive attitudes towards disability generally show fewer concerns and vice versa (Aiello et al., 2017). Consequently, students with disabilities are generally more excluded by teachers with apprehensive attitudes (Sharma, Forlin & Loreman, 2008).

2.4 The importance of Social Work

The IFSW (International Federation of Social Workers) General Meeting and the IASSW (International Association of Schools of Social Work) General Assembly adopted in 2014 a global definition of the Social Work Profession, which is the following:

Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledges, social work engages people and structures to address life challenges and enhance wellbeing. The above definition may be amplified at national and/or regional levels (www.ifsw.org).

Social work is therefore a values-oriented and dynamic profession, focused on social cohesion, respect for the equality and problem solving, especially in the presence of social and health problems (e. g., disabilities, child protection, multidimensional poverty and old age). In this connection, Trevithick (2000) stated, “the complex nature of social work is due, in part, to the fact that it involves working across differences of class, race, gender, age, disability, sexual orientation, religion, culture, health, geography, expectations and outlook on life” (p.12).

Therefore, social workers (*assistenti sociali* in Italian) are change agents and professionals who improve people's lives in relation to the environment. An anti-discriminatory perspective is required, since they have to promote social inclusion with the objective of reducing vulnerable people's suffering (Trevithick, 2000; Gui, 2005). Both knowledge and experience are crucial elements because of the fact that social workers have to develop the proper skills and learn how to use them in practice. In addition, they have to be flexible in their approaches. Key words include also empathy, communication and contact with the person or family in need, organization and resource management, intervention and study. For these reasons, social protection systems have to be consolidated in order to help social workers reduce inequality (Banks et al., 2019).

2.4.1 A brief history of Social Work in Italy

Social work in Italy, which is strictly related to the ideology of the welfare state, began to develop after the Second World War and at the beginning there were mainly national public organizations. Although little was done before 1970, according to Sicora (2015), "in the 80s, [...] the national parliament and the government, started to adopt laws and regulations to facilitate the activity of voluntary associations, cooperatives and other third sector organizations" (p.50). The 84/1993 Act (Regulation of the profession of social worker and constitution of the professional register) was approved in 1993 and represents an important goal that was reached. According to the first article, "the social worker works with technical and professional autonomy and judgement in all phases of prevention, support and recovery of individuals, families, groups and communities in need and distress and can conduct teaching and training activities" (Art.1; Law 84/1993). This is completely in line with the Italian social policy and the Italian Constitution that must avoid injustices and ensure civil and social rights (Sicora, 2015). After this Act, a national register was created and the degree awarded

by a university has become compulsory for registration (Laging, 2021). Then, the order of social work was established and a sense of identity in the profession finally achieved.

On the basis of the qualifications required (and in accordance with the principles of the Bologna declaration in 1999 and the national higher education reform), there are currently several degree programmes in Italy, such as bachelor courses, master degree courses and also doctorates for social work. Particularly, Ca' Foscari University in Venice offers a Bachelor Degree in *Social Sciences and Social Work*. Students have therefore the opportunity to study not only human and social sciences, but also social work theory and techniques, in order to acquire specific knowledge and practical skills. In fact, most of the studies showed that both theory and practice have to be consolidated and that the internship represents an essential part of the educational program (Trevithick, 2000).

Another important Act, Law n. 328 of 2000, established the integrated systems of interventions and social services. In fact, the aim of this law was to ensure integration and make social services accessible for all citizens in an equal way. In addition, after Law 328/2000 and a redefinition of welfare, there was also the so called *Riforma del Titolo V* approved in 2001: most of the legislative power of social services has been transferred to regional powers, and the main municipalities had to create specific area plans, called *piani di zona*, in order to facilitate social intervention. The basic level of services and benefits are defined by the State and have to be ensured over the entire nation (Sicora, 2015). Nevertheless, according to Benassi, Bertotti, Campanini & Rossi (2021), “the devolution of the legislative power to Regions has brought about a further differentiation” (p.19).

Finally, after the 2008 financial crisis, there were strong consequences to face, since social vulnerability increased and also the welfare system became even weaker. Moreover, there were differences in expenditures at regional level and as a consequence, a clear split between North and South (Benassi et al., 2021).

In conclusion, the role of social worker is evolving and there is an instability of working conditions. Nowadays it is increasingly difficult to obtain public funding, and resources for welfare benefits have been restricted because of the crisis. Therefore,

social workers have an important role and new challenges to face, since the vulnerable population is increasing more and more.

2.4.2 Social Work students' perceptions and attitudes towards disability

Attitudes towards disability represent a significant issue due to the fact that “negative attitudes and representations can create substantial barriers for people with disabilities” (Antonak & Livneh, 2000, as cited in Falanga, De Caroli & Sagone, 2020, p.28).

There is little known about the perceptions and attitudes of social work students towards disability in Italy. Similar research on the theme was conducted in 2011 in order to explore the attitudes towards disability, in spite of the fact that participants were students attending the degree course of Psychology at the Faculty of Educational Science and not social work students. This stresses the fact that little research has been done in Italy on this field. However, the results obtained from the study conducted in Italy (University of Catania), showed that in Psychology college students, social attitudes towards disability resulted modified after contact with people with intellectual disability (ID) in a rehabilitation centre. Moreover, the experience of direct contact that the congress activities provided, also changed the representation of people with disabilities, who were considered important and appreciable subjects, but even more enigmatic and problematic (Falanga, De Caroli & Sagone, 2011). This is completely in line with another similar study conducted by Servidio & Marcone (2020), who demonstrated that Italian students (University of Calabria) who belonged to a Physical Science degree course (i.e., Mathematics) and without any previous work experience or contact with people with ID, showed modern prejudice, which is indirect and “invisible to the perpetuator” (Whitley & Kite, 2016, as cited in Servidio & Marcone, 2020, p.2) towards individuals with intellectual disabilities.

On the other hand, International literature on the theme has confirmed that greater quality of contact (in other words, positive experiences) with people with ID is

associated with positive attitudes towards people with disability (McManus, Feyes & Saucier, 2011). Furthermore, one study by Schwartz & Armony-Sivan (2001) demonstrated that Israeli social work students showed more positive inclusion attitudes towards people with disabilities than other students. In addition, “Existing studies have demonstrated that social workers’ attitudes towards individuals with disabilities are only slightly more favourable than the attitudes of other professionals or the general public (Smith & McCulloch, 1978; Olkin, 1999; Miller, 2002; as cited in Kennedy, 2012, p.20). A study conducted in Hong Kong using the *Attitudes Toward Disabled Persons Scale* (ATDP; Yuker, Block & Youngg, 1966) wanted to explore the attitudes towards people with disabilities in health care professionals and in their students. The results indicated that the quality of the contact is a relevant variable in the reduction of negative attitudes (Au & Man, 2006). However, the social work students were found to have less favourable attitudes than the professional social workers. Particularly, the main factors that seem to influence students and professionals’ attitudes are: age and year of study, knowledge and direct contact with people with disabilities (Au & Man, 2006). Moreover, the results of another study about social work students’ attitudes toward people with disabilities in Japan showed that students have a lack of knowledge and experiences regarding disabilities issues (Hayashi & Kimura, 2004). Remaining in this area, another recent study that applied the ATDP scale, has exposed that “Social work practitioners and students report relatively positive attitudes, including when compared to other helping professionals” (Werner & Grayzman, 2011, as cited in Holler & Werner, 2018, p.425). More specifically, women and social workers who work closely with people with disabilities and who had attended disability courses showed a potentially high aptitude (Holler & Werner, 2018). In addition, according to Miller (2002), women held slightly better attitudes than men.

In any case, very little is known about social workers’ perceptions of disability and this data is unsatisfactory by itself, suggesting the need for more current research in this area. According to Goulden (2020), there are two main new instruments that measure attitudes towards people with disabilities in this context, which are the *Disability Attitudes in Health Care Scale* (DAHC), designed for healthcare

professionals, and the *Social Worker's Attitudes Toward Disability Scale* (SWADS), created for social workers (Chadd & Pangilinan, 2011; Cheatham et al., 2015). Nevertheless, Goulden (2020) stated “One major limitation identified for both scales is that few studies have used them [...] however, this is common for newly developed scales” (p.71).

Finally, another piece of research has been conducted in the United States in order to explore the effects of social work education and self-esteem on social work students' attitudes towards people with disabilities (Bean & Hedgpeth, 2014). The results demonstrated that not only social work education impacts students attitudes (and therefore a quality education is essential to prepare students to feel confident on this field), but also that both self-esteem and having a friend with a disability are associated with social work students' attitudes and social discrimination towards people with disabilities (Bean & Hedgpeth, 2014).

CHAPTER III

AN EXPLORATORY SURVEY

Chapter II underlines that by investigating the perceptions, attitudes and concerns towards people with disabilities, it is possible to better understand teachers initial beliefs, anxieties and their confidence levels. In addition, it is also useful and interesting to explore social workers perceptions and attitudes towards disability, in order to comprehend their initial expectations.

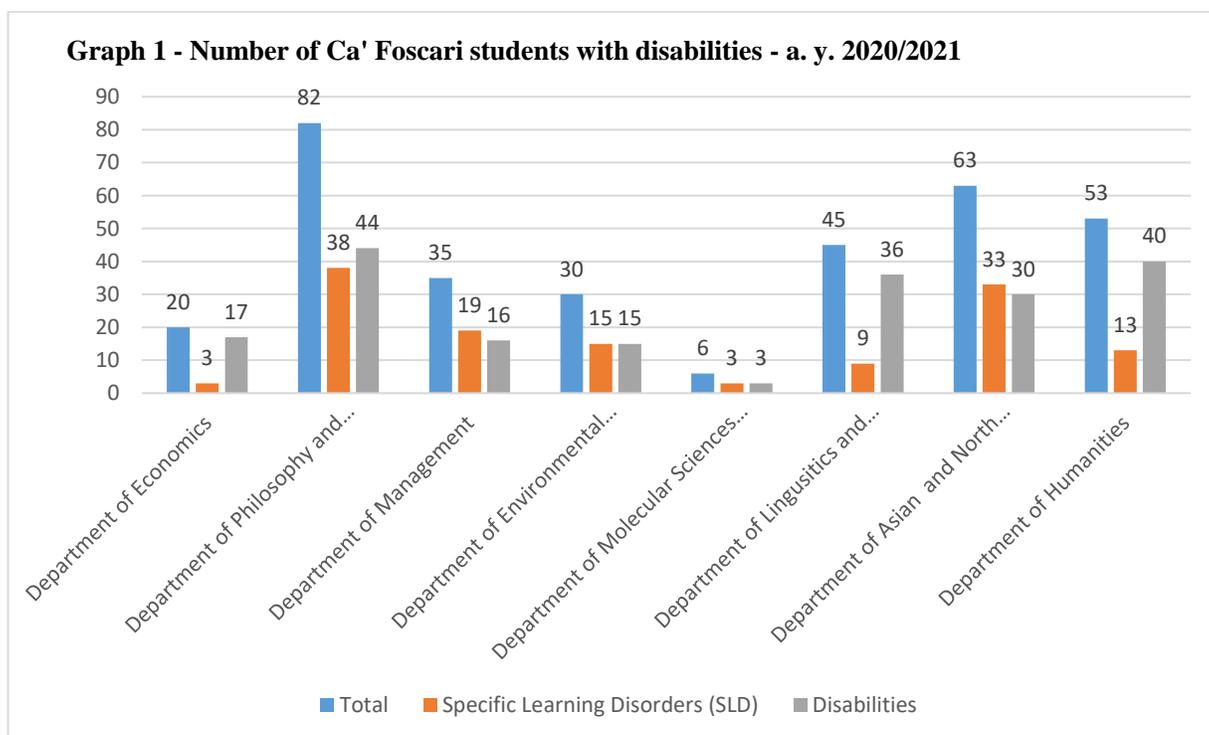
The study conducted through a questionnaire is introduced in this chapter. Firstly, the purpose of the survey and the hypotheses are presented in the following paragraphs. Secondly, the sample and the methodology used, as well as the structure of the questionnaire are explained.

In this respect, it must be emphasised that the thesis intends to contribute to this discourse by analysing both Ca' Foscari pre-service teachers and social workers' perceptions and attitudes towards disability. The focus therefore, has been on Ca' Foscari students (University of Venice) because the employment rate of Ca' Foscari students after graduating is higher than the national average. In fact, data collected on Ca' Foscari graduates interviewed on Employment by the *Interuniversity Consortium AlmaLaurea* in 2019 showed that, a year after graduation, the employment rate was 71,9% compared with 68,1% of the national average. In addition, the employment rate of postgraduates interviewed five years after graduation was 91,4% as against 87,7% of the national average. This report was presented on 18 June 2021, but even in 2013, despite the difficult economic situation, the data was in favour of Ca' Foscari University.

Furthermore, Ca' Foscari University of Venice is aware of the issue of disability, since it promotes the right to education for students with disabilities and learning disabilities (e.g., dyslexia or dyscalculia) and offers services in order to facilitate their

autonomy and their academic life. Consequently, students enrolled at the University of Venice can contact the *Disabled Students Service* and also find the support of a tutor. Moreover, enrolled students with disabilities can benefit from specific technological support, financial aid (depending on the percentage of disability) and accessible education material. For the current academic year in fact, the University provides students with disabilities and students who are family caregivers with the possibility of using specially made video lessons and multimedia materials, in order to promote inclusion and facilitate learning. In addition, students with disabilities can substitute on-campus exams with online equivalents.

The following graph and table (Graph 1; Table 1) show the number of Ca' Foscari students with disabilities enrolled at the University of Venice (divided into different departments) in the academic year 2020/2021. Data were provided by the *ADiSS - Settore Diritto allo Studio, Disabilità, Equità e Inclusione* of University.

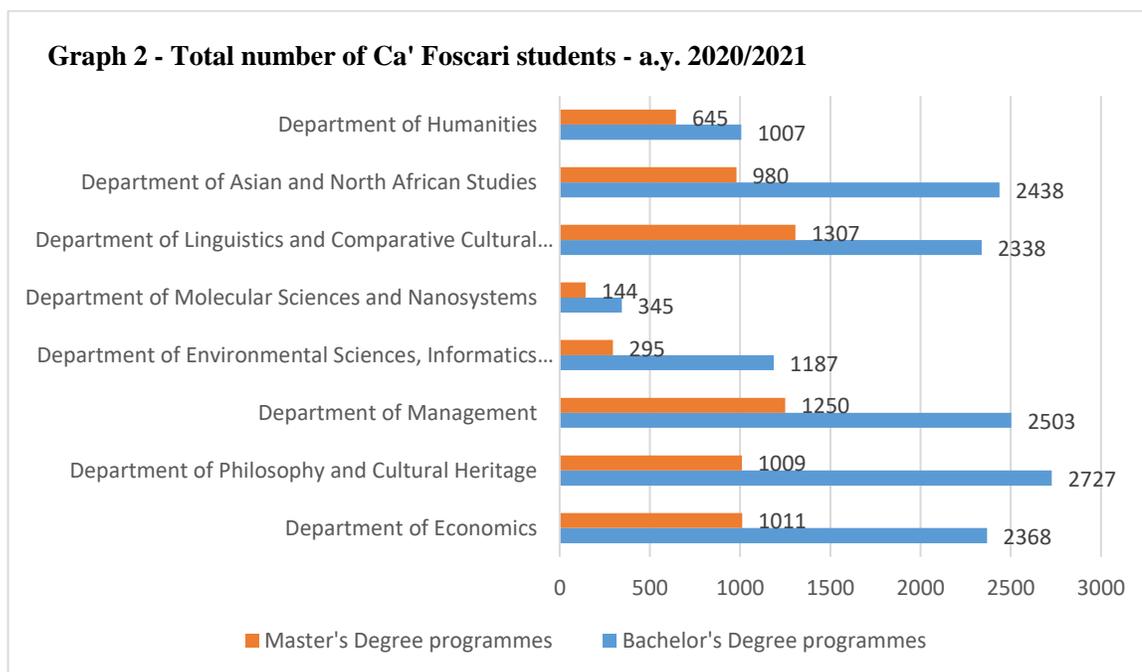


The specific different disabilities of students were: Metabolic Disorders (MD), Mobility Impairments (MI), Neurological Disorders (ND), Mental Disorders (MED), Hearing Impairments (HI), Visual Impairments (VI), Other (OT) and *Omissis* (OM).

Table 1 – Different types of disabilities.

	M D	M I	N D	M E D	H I	V I	O T	O M
Department of Economics	4	7	0	0	2	0	2	2
Department of Philosophy and Cultural Heritage	11	7	4	5	2	1	8	6
Department of Management	6	4	1	1	0	0	2	2
Department of Environmental Sciences, Informatics and Statistics	4	3	3	2	0	1	0	2
Department of Molecular Sciences and Nanosystems	0	0	0	0	1	0	0	2
Department of Linguistics and Comparative Cultural studies	3	6	4	3	7	2	4	7
Department of Asian and North African Studies	4	12	1	2	1	3	2	5
Department of Humanities	4	12	0	2	2	5	6	9

The following graph (Graph 2) shows the total number of students enrolled at the University of Venice in the academic year 2020/2021, divided into Bachelor and Master Degree courses.



3.1 Purpose of the study

The main objective of the current study is to investigate Ca' Foscari students' attitudes and perceptions towards disability. In particular, this study wanted to explore the perceptions, sentiments, concerns and attitudes towards people with disabilities both of pre-service teachers and Social Work students, by making a comparison between these two groups of Ca' Foscari students; in fact, they will be working in close contact with people with disabilities and must therefore be prepared and conscious of the future.

3.2 Research questions and hypotheses

Since the research focused on Ca' Foscari students, the current study tried to answer the following four research questions:

- 1) What kind of perception of disability do Ca' Foscari students that would like to become teachers or social workers have, and are they interested in the theme?
- 2) Do Ca' Foscari students that would like to become teachers and those who would like to become social workers have the same sentiments, attitudes and concerns towards disability?
- 3) How do Ca' Foscari students that would like to become teachers or social workers approach the world of disability?
- 4) Do students believe that knowing someone with disabilities personally (e.g., a family member, a friend) may lead to a better understanding of disability and higher levels of acceptance?

It was hypothesized that:

- a) Ca' Foscari students who would like to become teachers or social workers demonstrate a good knowledge of disability and are able to define it, which is considered an added value.
- b) Ca' Foscari students who would like to become teachers and Ca' Foscari students who would like to become social workers share the same sentiments, attitudes and concerns towards disability.
- c) Ca' Foscari students that would like to become teachers or social workers approach the world of disability with prior experience, personal interest and knowledge.
- d) Students believe that knowing people with disabilities personally, affects their perception and leads to a better understanding of disability.

3.3 Materials and Methods

3.3.1 Participants

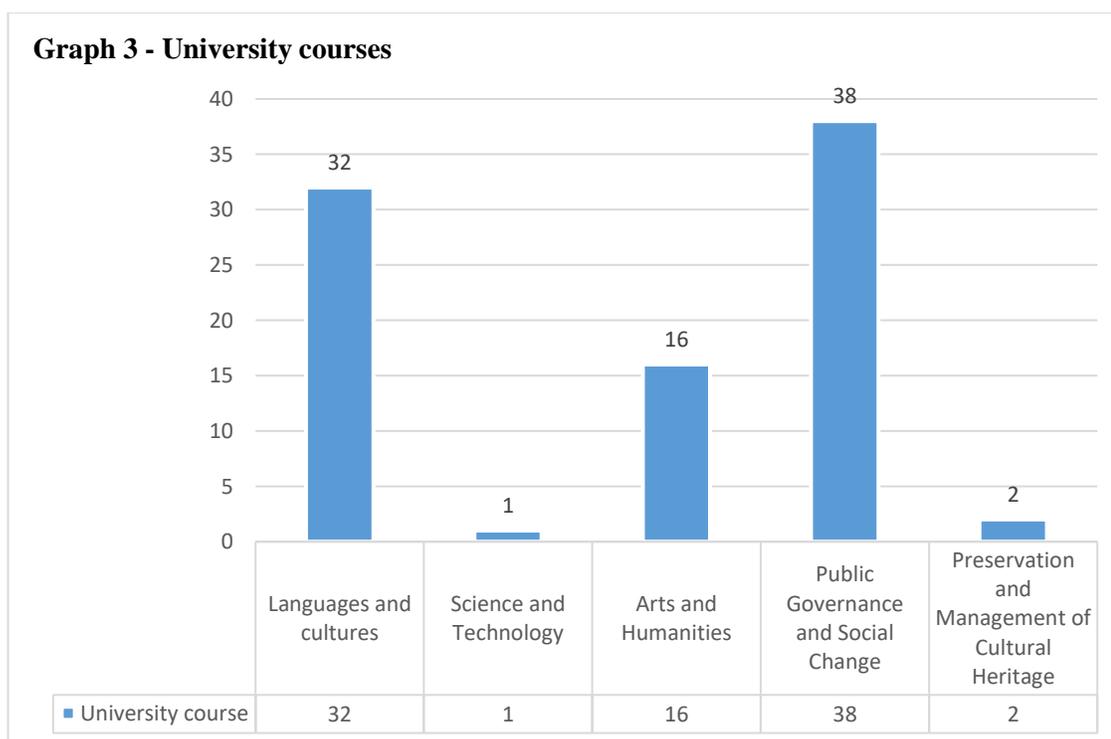
With the purpose of investigating the perception of disability, a questionnaire was created on Google form. The first section of the questionnaire was about personal data. Essentially, the sample is composed of 89 Ca' Foscari students, following both Bachelor and Master Degrees in Venice on different courses, such as: Language Sciences, Preservation and Management of Cultural Heritage, Social Sciences and Social Work, Italian Philology and Literature, Science and Technology and Philosophy. As can be observed in Graph 3 below, Public Governance and Social Change students, who would like to become social workers (42.7% of the sample) are less numerous than others who would like to become teachers (57.3% of the sample). Specifically, there are 32 students who are attending the Faculty of Languages and Cultures, which is 36% of the sample. Then, there are 16 students who are attending the Faculty of Arts and Humanities, which is 18% of the total, 2 students are attending the Faculty of Preservation and Management of Cultural Heritage, which is 2.2% and only one student is attending the Faculty of Science and Technology, representing 1.1% of the sample.

It should be specified that The Faculty of Public Governance and Social Change includes the Social Sciences and Social Work course. Moreover, the Faculty of Languages and Cultures comprises the Language Sciences course and the Faculty of Arts and Humanities includes courses such as Philosophy and Italian Philology and Literature. In addition, 51 students are enrolled in a First Cycle Degree programme (57.3%), 37 students are enrolled in a Second Cycle Degree programme (41.6%) and only 1 student attending single courses (1.1%).

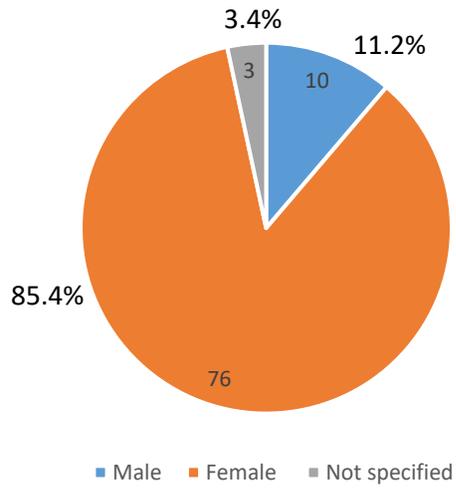
Secondly, the age of the participants range from 18 to 43 years, which means that the average age of Ca' Foscari students who answered the questions is 24,7 years old. Consequently, the sample is limited to a specific social group (Ca' Foscari students) with a certain age range 18-43. Minors did not take part in the study.

Thirdly, as can be observed in Graph 4, there were 89 answers to the question about gender. The majority of participants were female (76 participants), which represents 85.4% of the sample, while the male portion constituted 10 participants, which is 11.2% of the sample. Only 3 participants did not provide information on gender, corresponding to 3.4% of the sample.

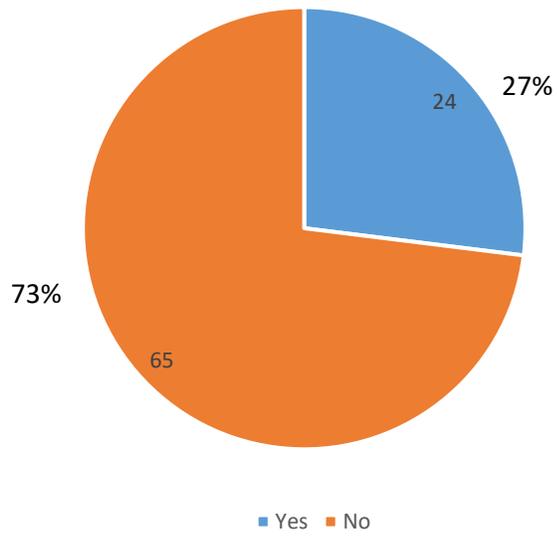
Finally, Graph 5 shows that 24 participants are working students (27% of the sample) whereas 65 students are not working (73% of the sample). The various occupations were investigated, in order to explore what kind of working experience students are living. Results show that the majority of them (11 students) are studying and also working as teachers (one of them in particular is working as a support teacher). The other occupations are: Assistant Communication (1 student), Assistant Communication for students with sensory disabilities (1 student), bus driver (1 student), babysitter (1 student), barista (2 students), waitress (2 students), general employee (2 students), 'Uls' employee (1 student), professional educator (1 student) and socio-welfare operator (1 student).



Graph 4 - Sex



Graph 5 - Are you a working student?



3.3.2 The questionnaire

In order to investigate Ca' Foscari students' perception of disability, it was decided to share the link to the questionnaire (created on Google form) via the WhatsApp and Facebook closed groups platform of Ca' Foscari University. The sample of 89 Ca' Foscari students voluntarily completed the online questionnaire during the academic year 2021/2022, reached through social media platforms.

The questionnaire was based on the work of the Fondazione Censis and Fondazione Cesare Serono (2010); Associazione *Dopo di Noi* – Biella; Fiorucci (2016); Fiorucci (2019); Fiorucci & Pinnelli (2020); Aiello et al. (2016), Sharma, Loreman & Forlin (2012), with particular attention to the *Teacher Efficacy for Inclusive Practices Scale* (TEIP) and *The Sentiments, Attitudes and Concerns about Inclusive Education Scale Revised* (SACIE-R).

The questionnaire, entitled “*Questionario sulla percezione della disabilità*” was divided into four sections (see Appendix A for the questionnaire used to collect student responses). Since the questionnaire was written in Italian, the answers were also in Italian; only open-ended questions have not been translated into English.

The first part of the questionnaire (*Sezione 1 - Dati anagrafici*) was a general information section in which all participants answered six questions on the subject of age, sex, university course, possible occupation. In this section, there were both short-format and closed-format answers. The sample of the university students who took part in the survey answered all the questions, since this part of the questionnaire was mandatory in order to proceed further. Therefore, there were 89 answers in total.

The second part of the questionnaire (*Sezione 2- Aspetti cognitivi: pensieri e credenze*) was about cognitive aspects: thoughts and beliefs. There were thirteen items, two of which were open-ended questions, i.e., “*Cos'è per te la disabilità?*” (In your opinion, what is disability?) and “*Pesando al termine disabilità, scrivi la prima parola che ti viene in mente*” (Thinking about disability, write the first word that comes to your mind). Participants could therefore answer in a free form. Furthermore, there were multiple-choice questions and some of the items were measured by a six-point Likert

scale ranging from “not at all” to “very much”. This section of the questionnaire wanted to investigate perceptions and knowledge of disability. More specifically, there were some questions about different types of disabilities, some questions about the acceptance of people with disabilities (depending on the area of origin), and another important question wanted to investigate whether the personal knowledge of a person with disabilities (a friend, a family member, a classmate etc.) could affect the participants perception of disability. Both the first and the second part of the questionnaire were mandatory and consequently all participants answered all the questions.

The third part of the questionnaire (*Sezione 3 – Aspetti emotivi ed azioni*) was about the emotional aspects and actions. This section was reserved only for the students who would like to become teachers and that attended “24-CFU programme” courses. In this section, there were multiple-choice questions and some of the items were measured by a six-point Likert scale ranging from “strongly disagree” to “strongly agree”. There was also an open-ended question, i.e., “*Quali sono le disabilità che ti aspetti di incontrare più frequentemente nella tua futura pratica professionale?*” (What type of disability are you expecting to find most frequently in your future profession?). The other questions wanted to investigate the sentiments, attitudes and concerns towards disability and also perception of self-efficacy and future goals in education. Moreover, two of the questions explore whether future teachers have already had any experience as support teachers and whether they would like to become/continue to be support teachers.

The last part of the questionnaire, (*Sezione 4 – Aspetti emotive ed azioni*) was again about the emotional aspects and actions. This section was in fact very similar to section three, with a few different questions, because of the fact that this section was reserved only for the students who would like to become social workers. As in the previous section, there were multiple-choice questions and some of the items were measured by a six-point Likert scale ranging from “strongly disagree” to “strongly agree”. There was also the same open-ended question. Added to this there was also the following question: “*Pensi che la tua professione futura richieda un impegno molto intenso dal*

punto di vista fisico?” (Do you think that intense physical effort is a prerequisite for your future profession?). In addition, all questions regarding sentiments, attitudes and concerns towards disability were referred to children and elderly patients with disabilities (and not only to children).

CHAPTER IV

ANALYSIS OF THE QUESTIONNAIRE

The previous chapter was dedicated to the presentation of the exploratory research. The main objective of the thesis, the hypotheses, and in particular, the sample and the structure of the questionnaire were introduced.

The following paragraphs deal with the data analysis, all the questions and answers are presented with the results.

4.1 Cognitive aspects: thoughts and beliefs

In the second part of the questionnaire, there were thirteen questions. As with the first part of the questionnaire, answers were mandatory in order to proceed so therefore the questions were answered by all 89 participants. Consequently, 89 answers have been registered.

4.1.1 The idea of disability.

The first and the second question of this section were open-ended. The purpose was to explore what disability is according to the perspective given by the sample of Ca' Foscari students and also, what is the first word relating to disability that comes to mind.

To sum up, as regards the first question (see Appendix B for more information), the most common definitions were negative, such as: a condition of difficulty; an obstacle in daily life; a different situation to be understood; a limitation, sometimes a barrier; a problem for society and for the families; limited physical and cognitive capacities. For some, on the other hand, disability was also an enriching diversity, a form of positive

diversity; a feature that needs to be appreciated and a way to look at the world through different eyes.

Regarding the second question, the most commonly used words were: difficulty (18 answers), wheelchair (10 answers), assistance (4 answers), diversity (4 answers), architectural barriers (4 answers) and discomfort (4 answers).

The table below (Table 2) summarises some data collected:

1) *Cos'è per te la disabilità? (89 risposte)*

<i>Table 2</i>	<i>CONCEZIONI NEGATIVE</i>	<i>CONCEZIONI POSITIVE</i>	
La maggioranza dei partecipanti considera la disabilità una condizione di difficoltà (20 risposte)	Una <u>condizione</u> di difficoltà . (2 risposte) Una <u>condizione</u> . Una <u>condizione</u> di vita diversa . Una <u>condizione</u> di invalidità . Una <u>condizione</u> che implica la messa in atto di strategie ad hoc Una <u>condizione</u> fisica e/o mentale che presenta più sfide rispetto a quella di chi non la vive, una su tutte: l'inclusione sociale che, se non esiste, rischia di fare sentire certamente il disabile come una persona di serie B... aggiungendo ostacoli e malessere alle già citate difficoltà proprie della malattia. Una <u>condizione</u> che pone dei limiti . Una <u>condizione</u> che obbliga a dover superare degli ostacoli . Una <u>condizione</u> che può essere invalidante e che può limitare l'autonomia di una persona. Una <u>condizione</u> difficile .	Una diversità che arricchisce . Un valore aggiunto , se compreso ed accettato. Un nuovo modo di vedere ed approcciare alle cose. Un modo alternativo di essere. Una forma di diversità positiva . Vedere il mondo con occhi diversi.	La minoranza dei partecipanti considera la disabilità un valore aggiunto (6 risposte)

	<p>È una <u>condizione</u> più o meno grave.</p> <p>Una <u>condizione</u> che rende più difficile o impedisce lo svolgimento di attività che sono svolte dalla maggior parte delle persone che non hanno una disabilità.</p> <p><u>Condizione di ridotta capacità</u> di svolgere un'attività.</p> <p>È una <u>condizione</u> fisica o funzionale che pone la persona in una posizione di svantaggio nell'affrontare la vita quotidiana (sociale, lavorativa ecc.).</p> <p>Una <u>condizione</u> che non sempre e non necessariamente porta all'esclusione e marginalizzazione della persona che ne è affetta, ma che di certo costringe la stessa a vivere con qualche difficoltà in più rispetto alle altre persone.</p> <p>Per me la disabilità è una <u>condizione</u> in cui la persona si può trovare causata dalla combinazione tra menomazione e l'ambiente in cui la persona vive, ricco di risorse ma anche e soprattutto di numerose barriere ed ostacoli.</p> <p>La <u>condizione</u> delle persone che a contatto con l'ambiente hanno delle difficoltà nel svolgere azioni che la maggior parte delle persone svolgono normalmente.</p> <p><u>Condizione</u> di un soggetto che ha una ridotta capacità di interazione con l'ambiente che lo circonda.</p> <p>Una <u>condizione</u> dettata da un contesto non inclusivo che in determinate situazioni di salute sfavorevoli riguarda tutti.</p>		
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2) *Pensando al termine disabilità, scrivi la prima parola che ti viene in mente.*

(89 risposte)

Complessivamente, le parole più utilizzate sono state:

Difficoltà (18 risposte); sedia a rotelle (10 risposte); aiuto (4 risposte); diversità (4 risposte); barriere architettoniche (4 risposte); disagio (4 risposte); limiti (2 risposte); supporto (2 risposte); ostacolo (2 risposte). Tutte le altre risposte si trovano in appendice (see Appendix B).

4.1.2 Initial beliefs.

The following multiple-choice questions wanted to investigate initial thoughts, beliefs and the personal knowledge of people with disabilities.

The first question was: “Think about a person with disabilities. Which is the first one that comes to your mind?”

There were 8 options:

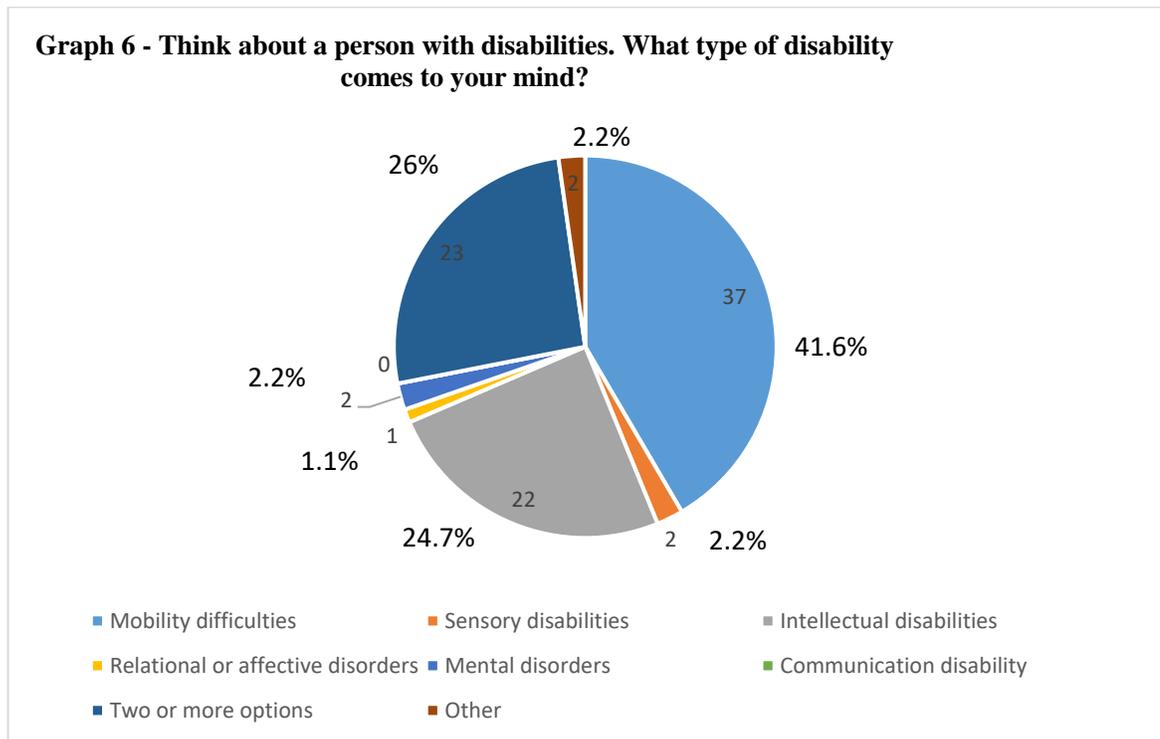
- 1) I think about a person with mobility difficulties (e.g., a person in a wheelchair).
- 2) I think about a person with sensory disabilities (e.g., deaf or blind).
- 3) I think about a person with intellectual disabilities (e.g., mental retardation, dementia, Down Syndrome).
- 4) I think about a person with relational or affective disorders (e.g., Autism).
- 5) I think about a person with mental disorders (e.g., Schizophrenia).
- 6) I think about a person with a communication disability (e.g., absence of verbal language).
- 7) I think about a combination of two or more of the above options.
- 8) Other.

The majority of respondents chose option 1 (41.6%), followed by option 7 (26%) and option 3 (24.7%). Option 2, 5 and 8 were chosen by two participants (2.2% each option). None of them chose option 6.

Those two participants who chose “other” (the last option) answered that:

- 1) Sono sempre abbastanza in difficoltà quando mi dicono che una persona è disabile perché non so bene in quale senso, le persone si riferiscono sempre maggiormente alle persone in sedia a rotelle.
- 2) Avrei pensato ad una disabilità fisica (di vario tipo), ma con lo studio ora includo in questo termine anche una intellettuale o cognitiva.

The following pie-chart (Graph 6) shows all 89 answers. To sum up, when people think of a person with disabilities, they usually think of somebody who is using a wheelchair. This could be due to the fact that a “visible” disease is more noticeable and immediate.



The next question was, “What are your initial thoughts when you see a young or adult person, apparently complete, with mobility difficulties (e.g., wheelchair users, or people who are having difficulty walking?)”.

There were 4 options:

- 1) He/she may have had an accident.
- 2) He/she may have a disease since birth.
- 3) He/she may have contracted a neurological disorder when he/she was a child.
- 4) Other.

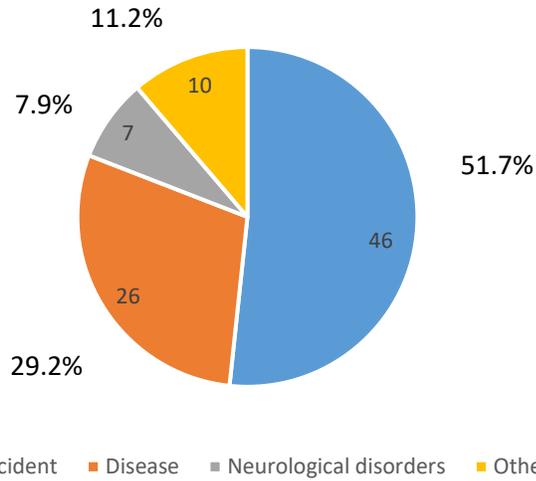
The majority of respondents chose option 1 (51.7%) followed by option 2 (29.2%), option 4 (11.2%) and lastly, option 3 (7.9%). Overall, the data shows that the majority of students believe that a person with mobility difficulties may have had an accident.

Those participants (n =10) who chose “other” answered that:

- 1) Che potrebbe aver bisogno di qualcosa in questo momento.
- 2) Che mi spiace per lei, anche se non dovrei.
- 3) Mi chiedo a cosa possa essere dovuta, ma non faccio supposizioni.
- 4) Le prime due.
- 5) Che per fortuna al giorno d’oggi esistono terapie e tecnologie che rendono più facile la vita di tutti i giorni.
- 6) Non mi pongo domande sulla causa della disabilità (2 answers).
- 7) Potrebbe essere ognuna di queste tre risposte (2 answers).
- 8) Che potrebbe aver bisogno di passare e io potrei trovarmi nel mezzo.

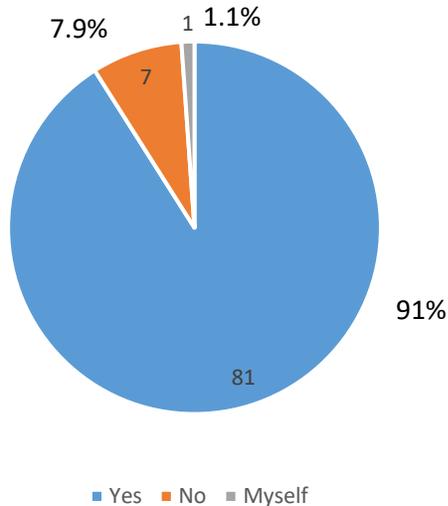
The following pie-chart (Graph 7) shows all 89 answers:

Graph 7 - What are your initial thoughts when you meet a person with mobility difficulties?



Graph 8 shows results to the question: “Do you know people with disabilities? (Relatives or friends)”. Overall, 81 participants, which is the majority of the sample (91%) answered “yes” whereas 7 participants (7,9%) answered “no”. Only one participant (1.1%) claimed herself to be a person with a disability.

Graph 8 - Do you know someone with disabilities?



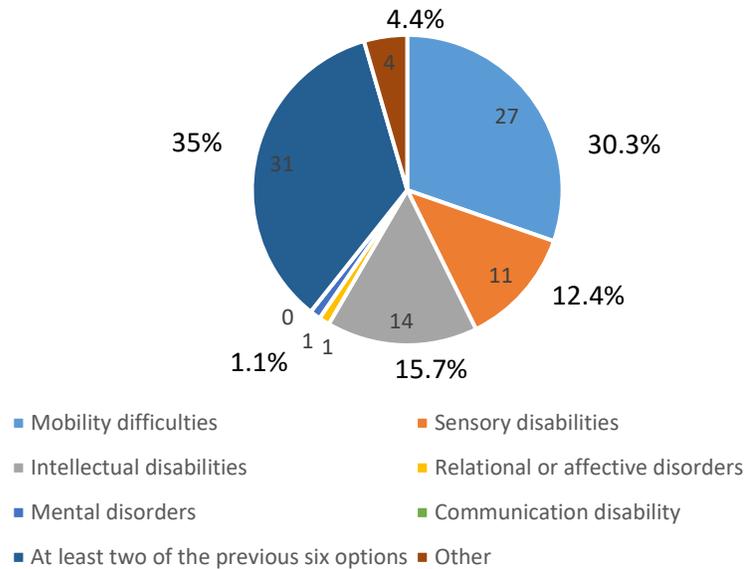
The following question is linked to the previous. The question was: “If yes, with what type of disability?”.

There were 8 options:

- 1) Mobility difficulties
- 2) Sensory disabilities
- 3) Intellectual disabilities
- 4) Relational or affective disorders
- 5) Mental disorders
- 6) Communication disability
- 7) At least two of the previous six options
- 8) Other

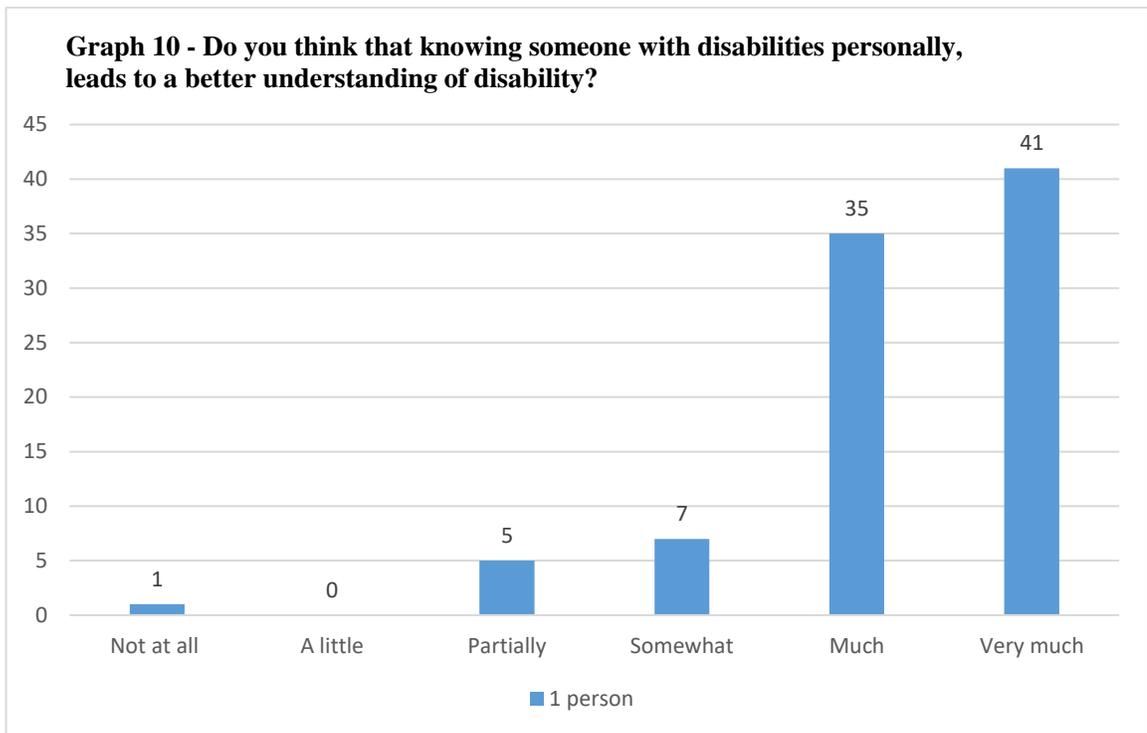
It must be clarified that the participants who answered “other” (4.4%) were 4 of the 7 participants who had answered “no” in the previous question, and therefore they answered “no” again. However, 3 of the 7 participants who had answered “no” in the previous question chose one of the options about this question. Graph 9 summarises the results and shows that the most chosen answer was “at least two of the previous six options” with 35%, followed by “mobility difficulties” with 30.3%, “intellectual disabilities” with 15.7% and “sensory disabilities” with 12.4%. None of them chose “communication disability”. Finally, “relational or affective disorders” and “mental disorders” were both chosen by one participant, with 1.1%.

Graph 9 - If you know people with disabilities, with what type of disability?



The following question was: “Do you think that having a relative or a friend with disabilities may affect people’s emotions and leads to a better understanding of disability?” The item was measured by a six-point Likert scale.

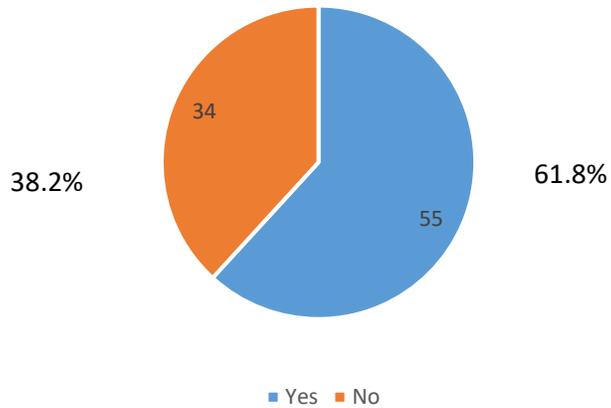
The following graph (Graph 10) shows that 76 of the 89 participants believe that knowing someone with disabilities personally, leads to a better understanding of disability. In fact, the most chosen answer was “*moltissimo*” (very much) with 46.1% followed by “*molto*” (much) with 39.3%. On the contrary, the most negative evaluation “*per niente*” (not at all) was chosen by one participant, with 1.1%. Therefore, the data collected shows that having a relative or a friend with disabilities affects people’s perceptions of disability.



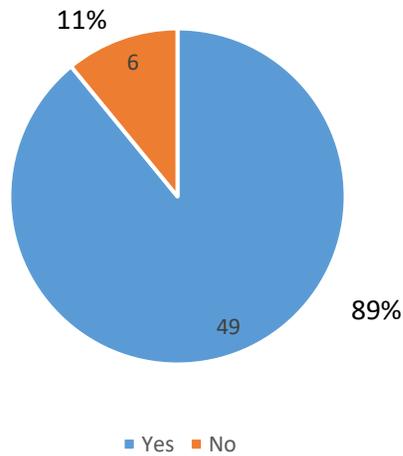
The following questions are linked: “Have you ever had a schoolmate with disabilities?” and “If yes, can you remember her/his name?”.

The majority of the sample (61.8%) answered affirmatively, whereas the minority (38.2%) answered negatively. Among those who answered affirmatively (55 participants), the majority could remember the name of their classmate with disabilities (89%) and the other (11%) did not remember the name of their classmate. The following pie-charts (Graphs 11 and 12) show the results:

Graph 11 - Have you ever had a schoolmate with disabilities?



Graph 12 - If yes, can you remember his/her name?



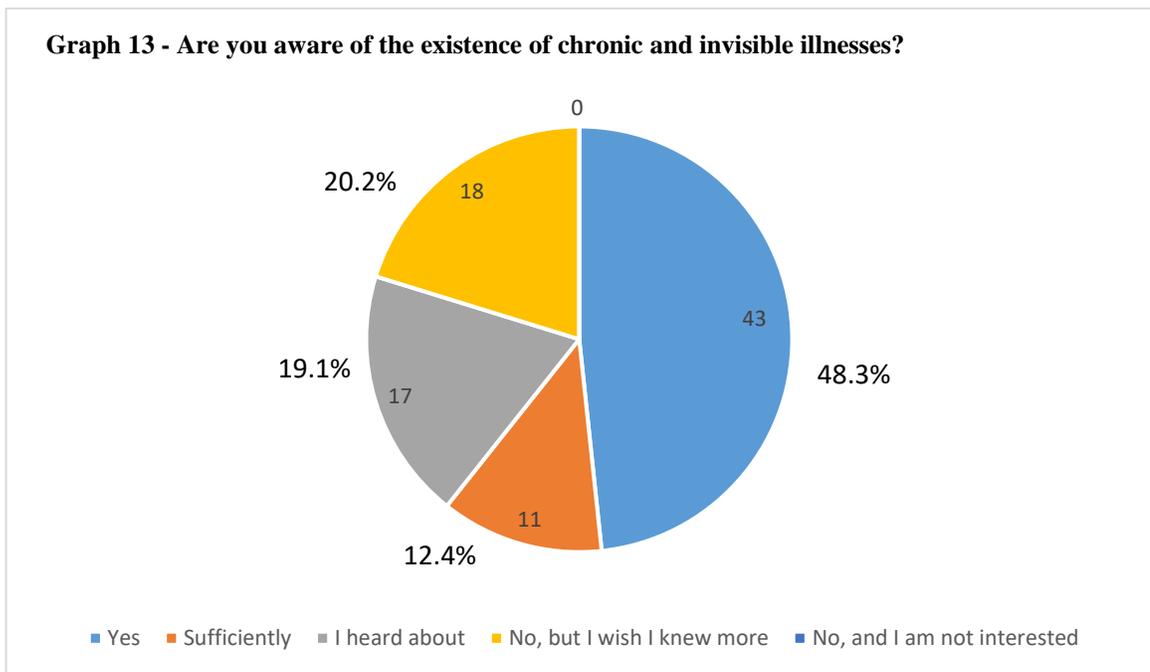
The following pie-chart (Graph 13) displays the results about the following question that investigates whether participants were aware of the existence of “Invisible Bodies Disabilities”, which are debilitating and chronic diseases, plus apparently invisible illnesses (e.g., Crohn’s disease, Ulcerative Colitis and Endometriosis).

There were five options:

- 1) Yes.
- 2) Sufficiently.

- 3) I don't know exactly what they are, but I have heard about that.
- 4) No, but I wish I knew more.
- 5) No, and I am not interested in that topic.

To sum up, the most chosen answer was “yes”, with 48.3%, followed by “No, but I wish I knew more” with 20.2% and “I do not know exactly what they are” with 19.1%. Option 2, i.e., “sufficiently”, was chosen by 12.4% and none of them showed indifference to the theme.

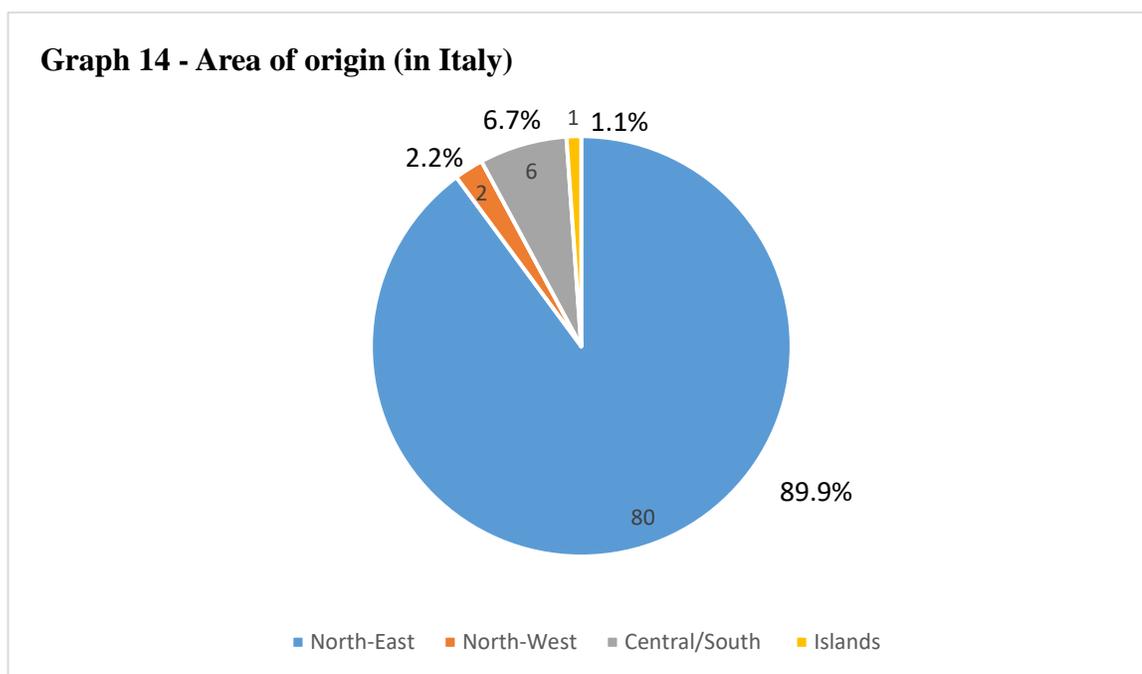


The following two questions looked to investigate where the participants come from and whether people with disabilities are accepted within the society, depending on their area of origin.

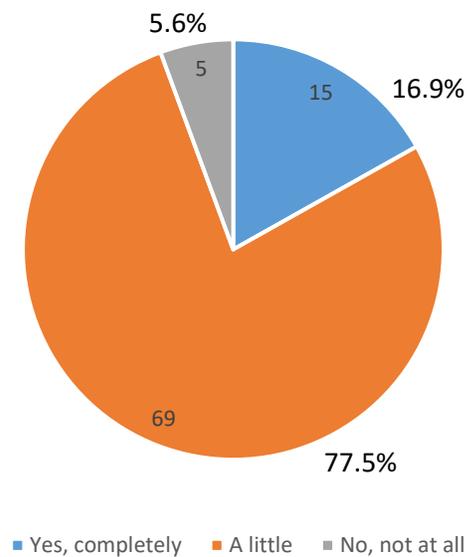
The majority of students come from North-East Italy (80 participants, which represents 89.9% of the students), followed by those who come from Central or South

Italy, with 6.7% and finally from the islands or the Northern-Western part of Italy (3.3%).

According to the majority (77.5%), there is little acceptance of people with disabilities and therefore these people are often marginalised in Italian society. However, 16.9% of respondents believe that people with disabilities are accepted and that there is willingness to help them, whereas other participants believe that there is no acceptance and people with disabilities are discriminated against, since disability is frightening (5.6%). The following pie-charts (Graphs 14 and 15) show the results:



Graph 15 - Is there acceptance of people with disabilities?



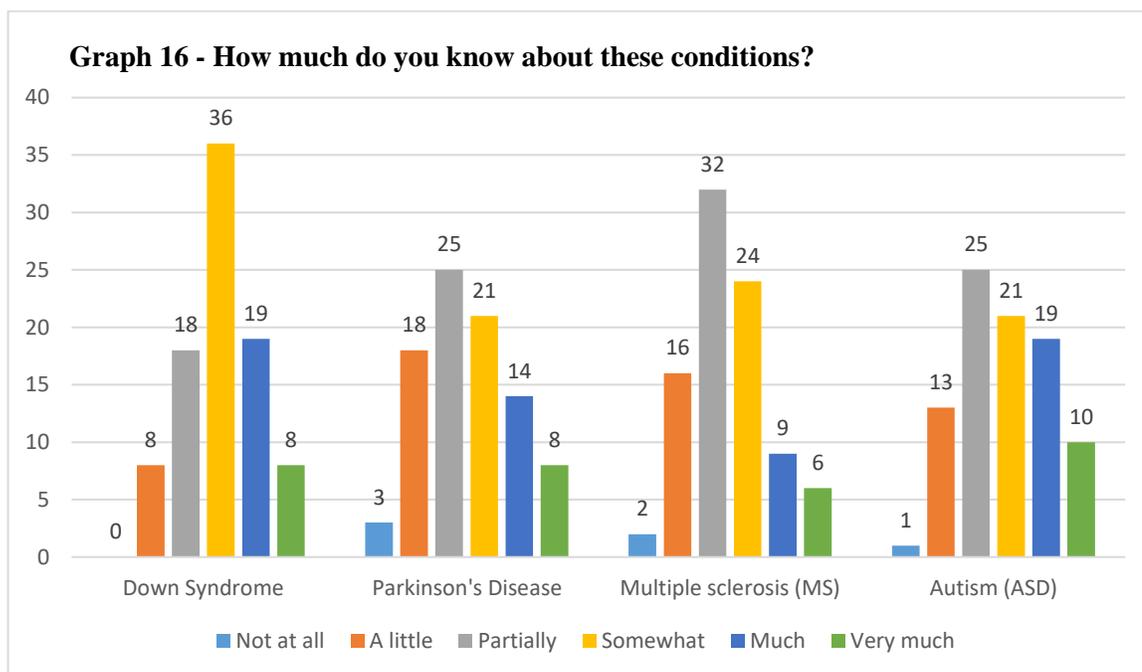
The last question in this section investigates how much participants know about four different conditions: Down Syndrome, Parkinson’s Disease, Multiple Sclerosis and Autism Spectrum Disorder (ASD).

As shown in the chart below (Graph 16), the majority of respondents seem to be most familiar with Down Syndrome, since nobody answered “Not at all”, whereas 8 participants answered “very much” (9%) and 36 participants answered “somewhat” (40.5%).

On the contrary, Parkinson’s Disease seems to be the least known, since 3 participants answered “not at all” (3.4%) and 18 participants answered “a little” (20.2%). Anyway, the majority answered “partially” (28.1%).

With regards to Multiple Sclerosis, 2 participants answered “not at all” (2.2%) and only 6 participants answered “very much” (6.7%). The majority of respondents indicated “partially”, that is 36%.

Lastly, for Autism, only 1 participant answered “not at all” (1.1%) and 10 participants answered “very much” (11.2%). However, the answer selected most was “partially” (28.1%) followed by “somewhat”, with 23.6%.



4.2 Emotional aspects and actions

The last part of the questionnaire was divided into two similar sections: section 3 and section 4. Both section 3 and section 4 of the questionnaire wanted to investigate emotional aspects and actions. More specifically, section 3 was reserved for the students who wish to become teachers whereas section 4 was reserved for students who would like to become social workers. There were the same questions in these two sections, with few differences.

Since section 3 and section 4 were reserved for a specific group of students, they were not mandatory to proceeding. Therefore, there were unanswered questions. 50 students who intend to become teachers in the future (section 3) and 31 future social

workers (section 4) answered the questions. It should be specified that two participants answered all the questions (both sections) because they had had experience as support teachers and would also like to teach in the future, despite the fact that they are enrolled in Social sciences and Social work programme at the moment.

The following pie-charts (Graphs 17 and 18) show the results relative to the question: “How do you feel about meeting a person of your age with disabilities?”.

There were 7 options:

- 1) I take pity on him/her, and I think about his/her difficulties.
- 2) If he/she is my friend, I try to be protective.
- 3) I do not know what to do, I cannot be spontaneous.
- 4) Sometimes, I wish I had their privileges.
- 5) I rarely think about his/her abilities or what he/she can do; I underestimate his or her abilities.
- 6) Some people with disabilities are impolite.
- 7) Other.

In section 3 there were 50 answers, whereas in section 4 there were 31 answers. The majority of future teachers in section 3 chose “I try to be protective”, (28%), followed by “I do not know what to do” (18%), “I take pity on him or her” (14%) and “I rarely think about his/her abilities”, (12%). Those participants who chose “other” (28%), answered:

- 1) Cerco di stare attenta ai suoi bisogni e mi offro di aiutare qualora percepisca sia necessario offrirlo.
- 2) Cerco di comportarmi il più possibile in modo naturale.
- 3) Un misto fra dispiacere e consapevolezza che la disabilità non lo/a definisce e non devo pensarci.
- 4) Dipende dalla natura e dal grado di disabilità: se si tratta, ad esempio, di una persone fortemente autistica non so come comportarmi o come comunicare e mi sento in difficoltà.
- 5) È spesso necessario mantenere una condizione neutra, mostrando però comunque comprensione per la situazione.

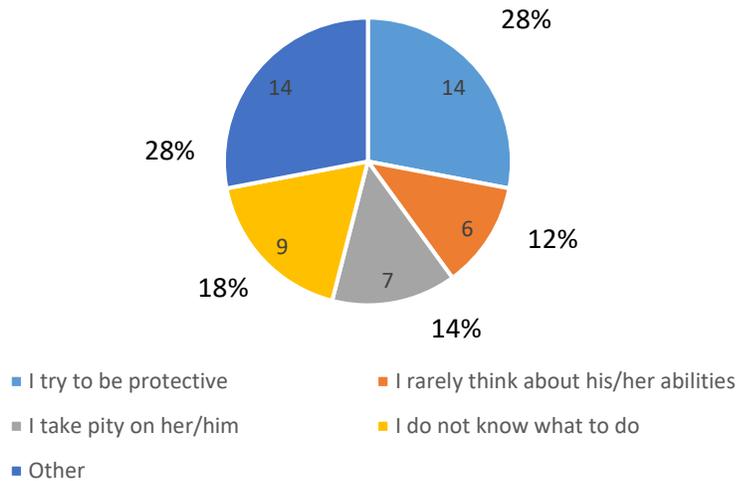
- 6) Penso in che modo coinvolgerlo, considerando il tipo di disabilità.
- 7) Lo/a tratto tranquillamente e se ha bisogno sono disponibile.
- 8) La prima reazione è sempre di confusione e di poca spontaneità, ma cerco sempre di allontanare questo primo pensiero e di trattarli con naturalezza, per quanto questo sia uno sforzo cosciente da parte mia.
- 9) Penso al modo migliore per potermi rapportare efficacemente con lui/lei e a cosa posso fare per metterlo in condizione di potersi rapportare efficacemente con me.
- 10) Non ho un pensiero particolare. Avendo molto a che fare con persone con disabilità, semplicemente “vado oltre”.
- 11) Come se fosse una qualsiasi altra persona, rispettandone le difficoltà e gli spazi, senza provare tuttavia pena per la sua condizione.
- 12) Cerco di essere presente in caso di aiuto, ma non in modo pressante. So che sono capaci di cavarsela da soli quasi sempre.
- 13) Reagisco come con altre persone dando il mio aiuto se necessario.
- 14) Neutra, tendo prima a provare a conoscerla.

The majority of future social workers in section 4 chose “I try to be protective”, (35.5%), followed by “I rarely think about his/her abilities” (16.1%), “I take pity on him or her” (12.9%) and “I do not know what to do” (9.7%). Those participants who chose “other” (25.8%) answered:

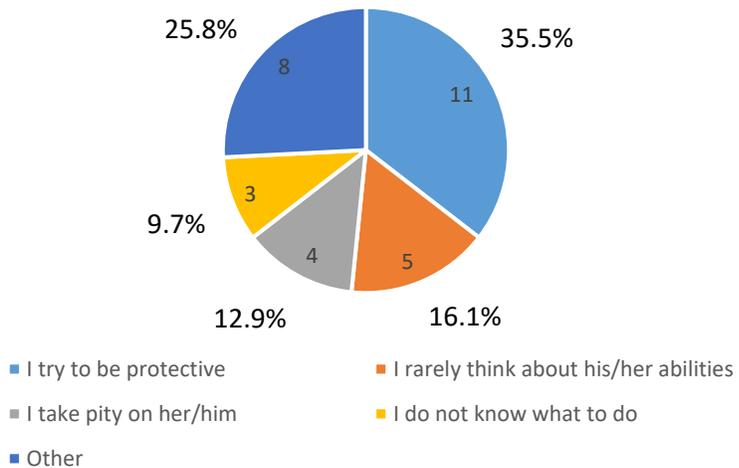
- 1) La tratto come una persona, perché prima della disabilità si deve guardare all'individuo.
- 2) Come qualsiasi altra persona abile e non.
- 3) La tratto come una qualsiasi altra persona e mi rendo molto disponibile ad aiutarla, cercando di non essere entrante.
- 4) Cerco di conoscerlo prima di tutto come persona.
- 5) Non ho avuto molti rapporti con ragazzi disabili, cerco di essere me stessa ma sicuramente sotto certi aspetti è inevitabile avere delle difficoltà a rapportarsi, soprattutto se non si hanno esperienze pregresse.

- 6) Empatica, tento di metterlo a suo agio.
- 7) La maggior parte delle volte mi comporto come mi comporterei con chiunque altro.
- 8) Tendo ad essere empatica, cercando di entrare a far parte del loro mondo.

**Graph 17 - How do you feel about meeting a person with disabilities?
Section 3 - Future teachers (50 answers)**



**Graph 18 - How do you feel about meeting a person with disabilities?
Section 4 - Future social workers (31 answers)**



The following tables (Tables 3 and 4) show participants' responses related to their sentiments toward disability. The items were adapted from the Sentiments, Attitudes, and Concerns about Inclusive Education–Revised (SACIE-R) scale for measuring pre-service teachers' perceptions about inclusion (Forlin et al., 2011).

There were 8 items in Section 3:

- 1) I find it difficult to overcome my initial shock when meeting people with severe physical disabilities.
- 2) I am afraid to look directly at a person with a disability.
- 3) I tend to make contacts with people with disabilities brief and I finish them as quickly as possible.
- 4) I would feel terrible if I had a disability.
- 5) I am concerned that my workload will increase if I have students with disabilities in my class.
- 6) I am concerned that I will be more stressed if I have students with disabilities in my class.
- 7) I am concerned that students with disabilities will not be accepted by the rest of the class.
- 8) I am concerned that I do not have the knowledge and skills required to teach students with disabilities.

The results indicate that the majority of future teachers did not find it difficult to overcome their initial shock when meeting people with disabilities (30%), were not afraid to look directly at a person with disability (40%) and did not tend to make contacts with them brief (46%). Moreover, the majority of future teachers agreed or partially agreed with the idea that they would feel terrible if they had a disability. In addition, they were not concerned that their workload will increase and that they would be more stressed if they had students with disabilities in class, with 38% and 32% respectively. However, they were concerned that students with disabilities may not be accepted by the class (36.7%), and partially agreed with the assumption that they do not have the knowledge and skills required to teach (36%).

Table 3. Participants' responses related to their sentiments toward disability. Section 3 – Future teachers.

<i>ITEMS</i>	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Partially disagree</i>	<i>Partially agree</i>	<i>Agree</i>	<i>Strongly agree</i>	<i>Number of participants</i>
I find it difficult to overcome my initial shock when meeting people with severe physical disabilities	9 18%	15 30%	11 22%	11 22%	3 6%	1 2%	50
I am afraid to look directly at a person with a disability	20 40%	14 28%	9 18%	5 10%	1 2%	1 2%	50
I tend to make contacts with people with disabilities brief and I finish them as quickly as possible.	23 46%	11 22%	8 16%	6 12%	2 4%	0 0%	50
I would feel terrible if I had a disability	1 2%	6 12%	6 12%	13 26%	13 26%	11 22%	50
I am concerned that my workload will increase if I have students with disabilities in my class	19 38%	9 18%	5 10%	10 20%	7 14%	0 0%	50
I am concerned that I will be more stressed if I have students with disabilities in my class	16 32%	14 28%	5 10%	11 22%	4 8%	0 0%	50
I am concerned that students with disabilities will not be accepted by the rest of the class	1 2.4%	7 14.2%	7 14.2%	12 24.4%	18 36.7%	4 8.1%	49
I am concerned that I do not have the knowledge and skills required to teach students with disabilities	0 0%	6 12%	4 8%	18 36%	16 32%	6 12%	50

There were 8 items also in section 4. Items 1, 2, 3 and 4 were the same. On the contrary, the others were different, because they wanted to investigate whether future

social workers were concerned that they may work with adults and children with disabilities, or with seniors and children with mental disorders.

The results indicate that the majority of future social workers did not find difficult to overcome their initial shock when meeting people with disabilities (38.7%), were not afraid to look directly at a person with disability (58%) and did not tend to make contacts with them brief (51.6%). Moreover, the majority of future social workers agreed with the idea that they would feel terrible if they had a disability (33.3%). In addition, they were not concerned that they might work with adults or children with disabilities or with seniors and children with mental disorders, since the majority of them chose the option “strongly disagree”.

Table 4. Participants’ responses related to their sentiments toward disability. Section 4 – Future social workers.

<i>ITEMS</i>	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Partially disagree</i>	<i>Partially agree</i>	<i>Agree</i>	<i>Strongly agree</i>	<i>Number of participants</i>
I find it difficult to overcome my initial shock when meeting people with severe physical disabilities	12 38.7%	12 38.7%	3 9.7%	3 9.7%	1 3.2%	0 0%	31
I am afraid to look directly at a person with a disability	18 58%	7 22.6%	6 19.4%	0 0%	0 0%	0 0%	31
I tend to make contacts with people with disabilities brief and I finish them as quickly as possible.	16 51.6%	10 32.3%	4 12.9%	1 3.2%	0 0%	0 0%	31
I would feel terrible if I had a disability	2 6.7%	3 10%	6 20%	6 20%	10 33.3%	3 10%	30
I am concerned that I may work with adults with disabilities	16 53.4%	10 33.3%	3 10%	1 3.3%	0 0%	0 0%	30
I am concerned that I may work with children with disabilities.	17 54.8%	6 19.4%	6 19.4%	2 6.4%	0 0%	0 0%	31

I am concerned that I may work with seniors with mental disorders.	15 48.4%	5 16.1%	7 22.6%	4 12.9%	0 0%	0 0%	31
I am concerned that I may work with children with mental disorders.	15 48.4%	4 12.9%	10 32.3%	1 3.2%	1 3.2%	0 0%	31

When asked, “Do you think that people with disabilities need more attention and need to be treated differently?”, the majority of future teachers responded “yes” (70%), followed by “no” (30%). As concerns future social workers, “yes” was the answer most selected (59.4%), followed by “no” (40.6%).

The following tables (Tables 5 and 6) show participants’ responses related to their sentiments toward a person with disabilities.

There were 7 items:

- 1) Sympathy
- 2) Desire to help
- 3) Admiration
- 4) Tranquillity
- 5) Fear
- 6) Apprehension
- 7) Indifference.

The results (see table 5) indicate that the majority of future teachers feel sympathy for people with disabilities, desire to help and admiration, since they chose the option “much”. The most chosen option for the feelings of tranquillity and apprehension were “partially” and the most chosen answer for the feeling of fear was “somewhat”. Finally, the majority of future teachers chose “not at all” for the feeling of indifference.

Table 5. Participants’ responses related to their sentiments toward a person with disabilities. Section 3 – Future teachers.

<i>SENTIMENTS</i>	<i>Not at all</i>	<i>A little</i>	<i>Partially</i>	<i>Somewhat</i>	<i>Much</i>	<i>Very much</i>	<i>Number of participants</i>
Sympathy	1 2%	0 0%	4 7.8%	10 19.6%	27 53%	9 17.6%	51
Desire to help	0 0%	2 4%	4 7.8%	8 15.7%	25 49%	12 23.5%	51
Admiration	0 0%	2 4%	4 7.8%	8 15.7%	17 33.3%	20 39.2%	51
Tranquillity	1 2%	13 25.5%	17 33.3%	9 17.6%	7 13.8%	4 7.8%	51
Fear	6 11.7%	7 13.8%	10 19.6%	18 35.3%	8 15.6%	2 4%	51
Apprehension	1 2%	7 13.8%	13 25.5%	9 17.6%	10 19.6%	11 21.5%	51
Indifference	40 78.3%	8 15.7%	2 4%	1 2%	0 0%	0 0%	51

The results (see table 6) indicate that the majority of future social workers feel sympathy for people with disabilities, desire to help and admiration, since they chose the options “much” and “very much”. The most chosen options for the feeling of tranquillity were “somewhat” and “very much”. The majority of future social workers chose the options “a little” and “somewhat” for the feeling of fear. The most chosen answer for the feeling of apprehension was “somewhat” and for the feeling of indifference was “not at all”.

Table 6. Participants’ responses related to their sentiments toward a person with disabilities. Section 4 – Future social workers.

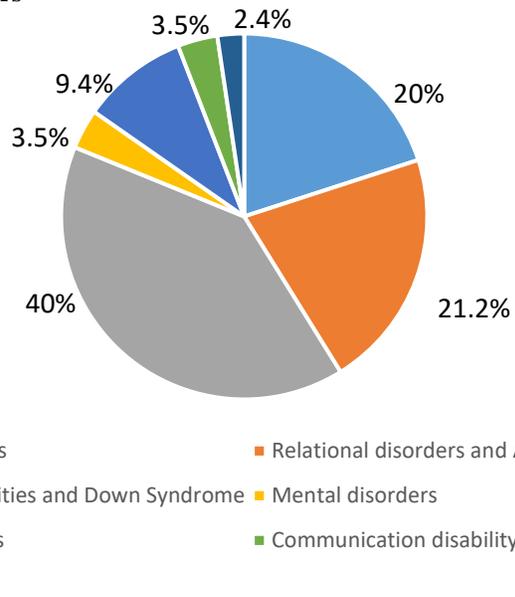
<i>SENTIMENTS</i>	<i>Not at all</i>	<i>A little</i>	<i>Partially</i>	<i>Somewhat</i>	<i>Much</i>	<i>Very much</i>	<i>Number of participants</i>
Sympathy	0 0%	0 0%	1 3.2%	8 25.8%	14 45.2%	8 25.8%	31
Desire to help	0 0%	1 3.2%	1 3.2%	6 19.3%	13 42%	10 32.3%	31

Admiration	0 0%	1 3.2%	2 6.4%	4 12.9%	9 29.1%	15 48.4%	31
Tranquillity	2 6.4%	4 12.9%	6 19.3%	7 22.6%	5 16.2%	7 22.6%	31
Fear	5 16.2%	7 22.6%	5 16.2%	7 22.6%	4 12.9%	3 9.6%	31
Apprehension	2 6.4%	7 22.6%	7 22.6%	9 29.1%	4 12.9%	2 6.4%	31
Indifference	25 80.7%	4 12.9%	2 6.4%	0 0%	0 0%	0 0%	31

Another important question was: “What types of disability do you expect to find in your future job?”. In section 3, there were 53 answers and participants wrote more than one disability, since it was an open-ended question. Overall, the majority of future teachers answered “Intellectual disabilities and Down Syndrome” (40%), followed by “Relational disorders and Autism” (21,2%), “Mobility difficulties” (20%) and “Sensory disabilities” (9.4%).

In section 4, there were 30 answers and participants indicated more than one disability. On average, the majority of future social workers answered “Mobility difficulties” (32%), followed by “Intellectual disabilities” (23.4%) and “Mental disorders” (14.9%). The following pie-charts (Graphs 19 and 20) summarise the results.

**Graph 19 - What types of disabilities do you expect to find in your future job?
Section 3 - Future teachers**



**Graph 20 - What types of disabilities do you expect to find in your future job?
Section 4 - Future social workers**

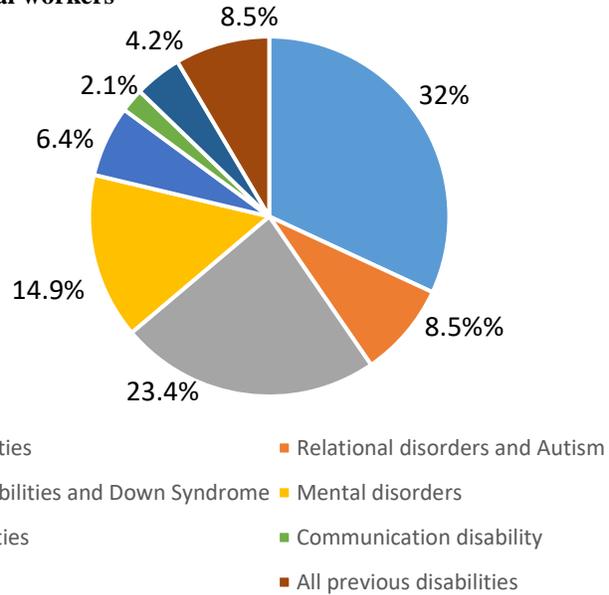


Table 7 includes the results of the future teachers' responses about their concerns regarding people with specific disabilities, and table 8 includes the results of the future social workers' responses about the same issue. All the statements were taken from Fiorucci & Pinnelli (2020) and therefore are reported in Italian.

There were 7 statements:

- 1) Non saper comunicare con gli alunni sordi o non verbali
- 2) Non saper gestire problematiche comportamentali (ADHD, DOP, Autismo, ecc.)
- 3) Affrontare casi molto difficili (Autismo, paralisi cerebrali, quadri sindromici complessi, ecc.)
- 4) Non conoscere la LIS o altri codici gestuali
- 5) Trovarmi in disaccordo con i colleghi
- 6) Trovarmi in disaccordo con le famiglie
- 7) Sentirsi inadeguato

The results (table 7) indicate that the majority of future teachers partially agreed (29.5%) or agreed (27.4%) with Statement 1 (*Non saper comunicare con gli alunni sordi o non verbali*) and also they agreed (36%) or partially agreed (26%) with Statement 2 (*Non saper gestire problematiche comportamentali*). Also, more than half of the future teachers strongly agreed (46%) or agreed (30%) with Statement 3 (*Affrontare casi molto difficili*) and strongly agreed (26%) or agreed (24%) with Statement 4 (*Non conoscere la LIS o altri codici gestuali*). The majority of participants disagreed or partially disagreed regarding their concerns about Statement 5 (*Trovarmi in disaccordo con i colleghi*) and Statement 6 (*Trovarmi in disaccordo con le famiglie*) with 26%. A high percentage of them strongly agreed (32%) with Statement 7 (*Sentirmi inadeguato*).

Table 7. Participants' responses related to their concerns regarding specific disabilities. Section 3 – Future teachers.

<i>CONCERNS</i>	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Partially disagree</i>	<i>Partially agree</i>	<i>Agree</i>	<i>Strongly agree</i>	<i>Number of participants</i>
1) Non saper comunicare con gli alunni sordi o con gli alunni non verbali	3 5.9%	6 11.8%	4 7.8%	15 29.5%	14 27.4%	9 17.6%	51
2) Non saper gestire problematiche comportamentali (ADHD, DOP, Autismo, ecc.)	0 0%	1 2%	9 18%	13 26%	18 36%	9 18%	50
3) Affrontare casi molto difficili (Autismo, paralisi cerebrali, quadri sindromici complessi, ecc.)	0 0%	1 2%	5 10%	6 12%	15 30%	23 46%	50
4) Non conoscere la LIS o altri codici gestuali	6 12%	7 14%	5 10%	7 14%	12 24%	13 26%	50
5) Disaccordo con i colleghi	5 10%	13 26%	8 16%	10 20%	7 14%	7 14%	50
6) Disaccordo con le famiglie	3 6%	6 12%	13 26%	12 24%	11 22%	5 10%	50
7) Sentirsi inadeguato	0 0%	5 10%	9 18%	7 14%	13 26%	16 32%	50

The results (table 8) indicate that the majority of future social workers partially agreed (42%) or agreed (25.8%) with Statement 1 (*Non saper comunicare con gli alunni sordi o non verbali*) and also they agreed and partially disagreed (26.7%) with Statement 2 (*Non saper gestire problematiche comportamentali*). Also, the majority of the future social workers agreed (32.2%) with Statement 3 (*Affrontare casi molto difficili*) and agreed (43.3%) with Statement 4 (*Non conoscere la LIS o altri codici gestuali*). The majority of participants partially disagreed (32.2%) regarding their concerns about Statement 5 (*Trovarmi in disaccordo con i colleghi*) and partially

agreed (32.2%) with Statement 6 (*Trovarmi in disaccordo con le famiglie*). A high percentage of them agreed (35.5%) with Statement 7 (*Sentirmi inadeguato*).

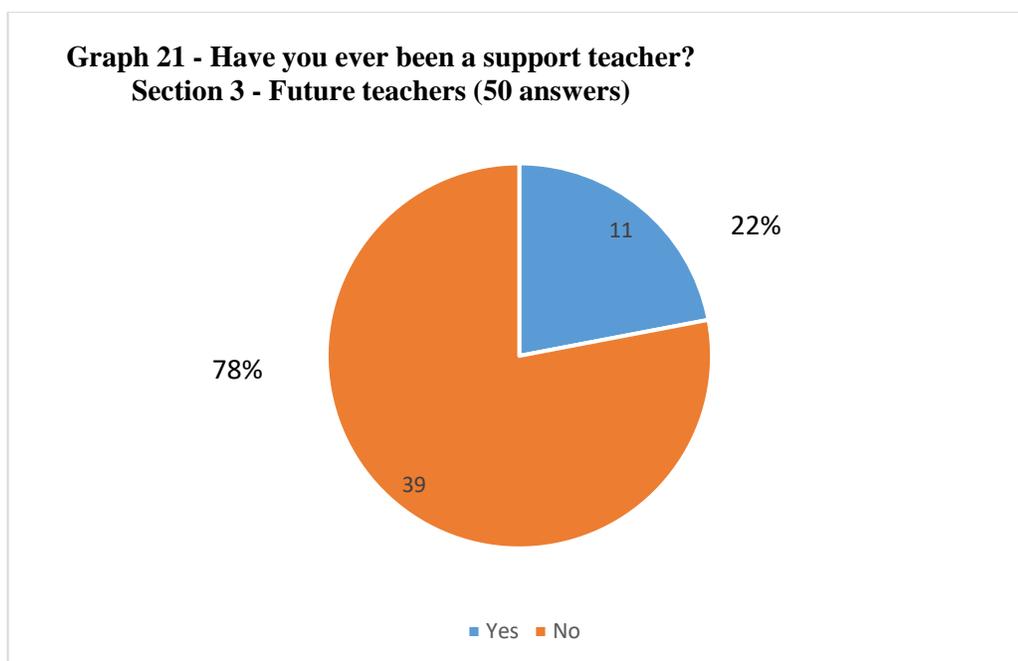
Table 8. Participants' responses related to their concerns regarding specific disabilities. Section 4 – Future social workers.

<i>CONCERNS</i>	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Partially disagree</i>	<i>Partially agree</i>	<i>Agree</i>	<i>Strongly agree</i>	<i>Number of participants</i>
1) Non saper comunicare con gli alunni sordi o con gli alunni non verbali	0 0%	3 9.7%	1 3.2%	13 42%	8 25.8%	6 19.3%	31
2) Non saper gestire problematiche comportamentali (ADHD, DOP, Autismo, ecc.)	0 0%	3 10%	8 26.7%	7 23.3%	8 26.7%	4 13.3%	30
3) Affrontare casi molto difficili (Autismo, paralisi cerebrali, quadri sindromici complessi, ecc.)	2 6.4%	2 6.4%	5 16.2%	7 22.6%	10 32.2%	5 16.2%	31
4) Non conoscere la LIS o altri codici gestuali	2 6.7%	1 3.3%	4 13.3%	2 6.7%	13 43.3%	8 26.7%	30
5) Disaccordo con i colleghi	7 22.6%	3 9.7%	10 32.2%	9 29.1%	1 3.2%	1 3.2%	31
6) Disaccordo con le famiglie	3 9.7%	5 16.2%	8 25.8%	10 32.2%	4 12.9%	1 3.2%	31
7) Sentirsi inadeguato	1 3.2%	4 12.9%	4 12.9%	8 25.8%	11 35.5%	3 9.7%	31

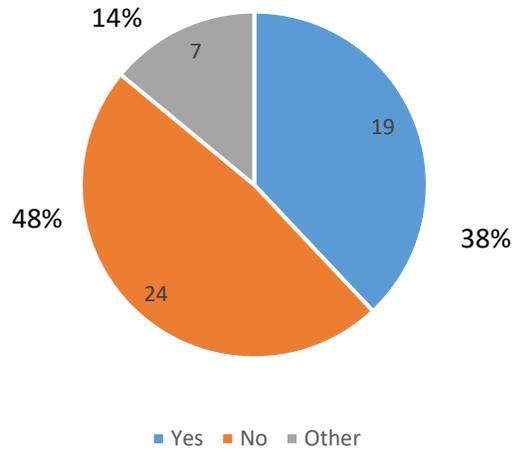
In Section 3, there were two questions that wanted to investigate whether future teachers have already had any experience as a support teacher (there were 50 answers) and whether they would like to become or continue to be a support teacher (50 answers).

The following pie-charts (Graphs 21 and 22) show the results. The majority of the future teachers have never had any experience as support teacher (78%) whereas 22% have been support teachers. However, the majority of future teachers would not like to become (or continue to be) a support teacher (48%) whereas 38% answered that they would like to become support teachers. Moreover, 14% of the sample chose “other” and answered:

- 1) Preferirei insegnare la mia materia, ma se dovessi continuare con il sostegno lo farei abbastanza volentieri.
- 2) Fare sostegno non è la mia scelta primaria, ma non escludo in futuro un'esperienza in quest'ambito (3 answers).
- 3) Non lo so perché finora ho lavorato solo con casi di disabilità sensoriale non grave, non so se sarei in grado di affrontare altre disabilità, sicuramente avrei bisogno di una adeguata preparazione.
- 4) Non saprei, non avendo esperienze ho motivi sia per il sì che per il no (2 answers).



Graph 22 - Would you like to become/continue to be a support teacher? Section 3 - Future teachers (50 answers)



In Section 4, there was a question that wanted to investigate whether future social workers think that intense physical effort will be required in their future profession. There were 31 answers. The following pie-chart (Graph 23) shows the results. The majority of future social workers answered “no” (74.2%) and 25.8% answered “yes”.

Graph 23 - Do you think that intense physical effort will be required in your future job? Section 4 - Future social workers (31 answers)

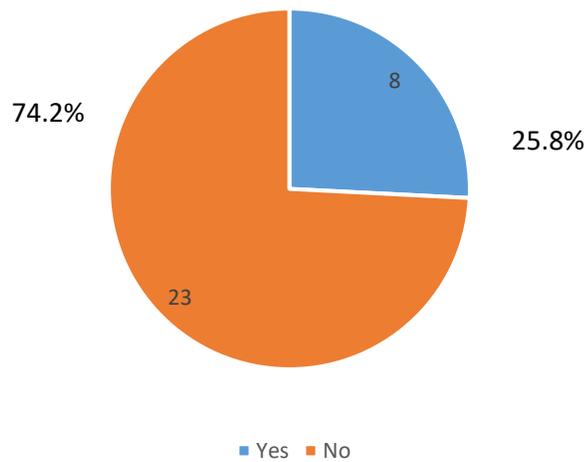


Table 9 includes the results of the future teachers' responses about their beliefs of self-efficacy, and table 10 includes the results of the future social workers' responses about the same issue. All the items were taken from the original study on the TEIP scale (Sharma et al., 2012).

As can be seen in table 9, the majority of participants partially disagreed (32%) with Item 1 (I am confident in designing learning tasks) and they partially agreed with item 2 (I am confident in my ability to prevent disruptive behaviour) and item 4 (I am confident in my ability to get parents involved in school activities) with 30.6% and 44% respectively. Also, they disagreed (32%) with item 3 (I am confident when dealing with students who are physically aggressive) and the majority of future teachers agreed (38%) with item 5 (I can collaborate with other professionals).

Table 9. Participants' responses related to their beliefs of self-efficacy. Section 3 – Future teachers.

<i>ITEMS</i>	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Partially disagree</i>	<i>Partially agree</i>	<i>Agree</i>	<i>Strongly agree</i>	<i>Number of participants</i>
1) I am confident in designing learning tasks so that the individual needs of students with disabilities are accommodated	5 10%	5 10%	16 32%	15 30%	9 18%	0 0%	50
2) I am confident in my ability to prevent disruptive behaviour in the classroom before it occurs.	1 2%	11 22.4%	14 28.6%	15 30.6%	6 12.2%	2 4.2%	49
3) I am confident when dealing with students who are physically aggressive.	7 14%	16 32%	11 22%	12 24%	2 4%	2 4%	50
4) I am confident in my ability	0 0%	4 8%	13 26%	22 44%	7 14%	4 8%	50

to get parents involved in school activities of their children with disabilities.							
5) I can collaborate with other professionals (e.g., itinerant teachers or speech pathologists) in designing educational plans for students with disabilities.	1 2%	3 6%	3 6%	10 20%	19 38%	14 28%	50

As can be seen in table 10, the majority of future social workers partially agreed or agreed (both with 35.5%) with item 1 (I am confident in designing learning tasks) and they also partially agreed (41.9%) with item 2 (I am confident in my ability to prevent disruptive behaviour). The majority of the participants partially disagreed (51.6%) with item 3 (I am confident when dealing with students who are physically aggressive), they partially agreed or agreed (32.3%) with item 4 (I am confident in my ability to get parents involved in activities) and finally the majority of them agreed (38.7%) with item 5 (I can collaborate with other professionals).

Table 10. Participants' responses related to their beliefs of self-efficacy. Section 4 – Future social workers.

<i>ITEMS</i>	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Partially disagree</i>	<i>Partially agree</i>	<i>Agree</i>	<i>Strongly agree</i>	<i>Number of participants</i>
1) I am confident in designing learning tasks so that the individual needs of individuals with disabilities are accommodated.	1 3.2%	3 9.7%	5 16.1%	11 35.5%	11 35.5%	0 0%	31

2) I am confident in my ability to prevent disruptive behaviour before it occurs.	1 3.2%	3 9.7%	10 32.3%	13 41.9%	4 12.9%	0 0%	31
3) I am confident when dealing with individuals who are physically aggressive.	0 0%	7 22.6%	16 51.6%	6 19.4%	1 3.2%	1 3.2%	31
4) I am confident in my ability to get parents involved in activities of their children with disabilities.	0 0%	2 6.4%	5 16.1%	10 32.3%	10 32.3%	4 12.9%	31
5) I can collaborate with other professionals (e.g., itinerant teachers or speech pathologists) in designing educational plans for students with disabilities.	1 3.2%	1 3.2%	4 12.9%	4 12.9%	12 38.7%	9 29.1%	31

The last question wanted to explore how students got closer to the world of disability. There were 51 answers in Section 3 (future teachers) and 32 answers in Section 4 (future social workers).

The options were:

- 1) The courses for teaching (24-CFU programme).
- 2) The modules of your Degree programme.
- 3) I already knew the world of disability from my own experience.
- 4) Personal interest.
- 5) Other.

As can be seen in the following pie-charts (Graphs 24 and 25), the majority of future teachers chose option 3 (I already knew the world of disability) with 39.2%, followed by option 1 (the courses for teaching) with 27.5% and option 5 (other) with 19.6%. More specifically, those participants (n = 10) who chose “other” answered:

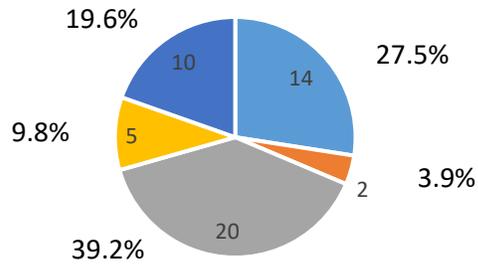
- 1) Tirocinio/esperienza lavorativa (4 answers)
- 2) Esperienza di insegnamento
- 3) Lavoro a scuola da anni, ho avuto varie classi con alunni che hanno il sostegno.
- 4) Volontariato (2 answers)
- 5) Conoscenze personali, formazione lavorativa, interesse personale
- 6) Corso di Laurea precedente, in Educazione Professionale.

Finally, regarding future social workers, the majority of them (50%) chose option 3 (I already knew the world of disability), followed by option 2 (the modules of your Degree programme) with 28.1% and option 5 (other) with 15.6%. Nobody chose option 1 (the courses for teaching).

Those participants (n = 5) who chose “other” answered:

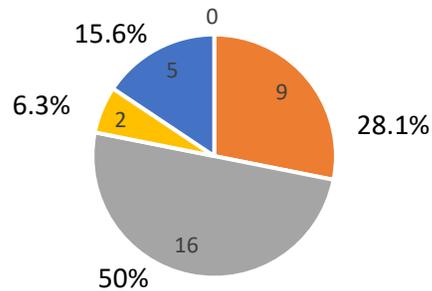
- 1) Laurea Triennale in Educazione Professionale e lavoro come Educatrice.
- 2) Sono 4 anni che frequento un'associazione che si occupa di queste tematiche
- 3) Tutte le precedenti.
- 4) Partecipo ad una associazione di volontariato per disabili (La Rosa Blu)
- 5) Conoscevo il problema per conoscenze personali e per interesse personale ho sempre approfondito tale tematica.

**Graph 24 - How did you get closer to the world of disability?
Section 3 - Future teachers (51 answers)**



- The courses for teaching (24-CFU programme)
- The modules of your Degree programme
- I already knew the world of disability from my own experience
- Personal interest
- Other

**Graph 25 - How did you get closer to the world of disability?
Section 4 - Future social workers (32 answers)**



- The courses for teaching (24-CFU programme)
- The modules of your Degree programme
- I already knew the world of disability from my own experience
- Personal interest
- Other

CHAPTER V

DISCUSSION AND CONCLUSION

After presentation of the data collected, the following chapter provides insights into Ca' Foscari students' perceptions, sentiments, concerns and attitudes towards disability, as well as a discussion of the results obtained. Particularly, differences and common points between future teachers and future social workers studying in Venice are underlined. Finally, limits encountered and further research proposals are provided, followed by the conclusion.

5.1 Research Question 1

This study aimed at the understanding of Ca' Foscari students' perception of disability, since future teachers and future social workers will come into contact with individuals with disabilities. According to Babik and Gardner (2021), "Perception of disability is an important construct affecting not only the well-being of individuals with disabilities, but also the moral compass of the society. Negative attitudes toward disability disempower individuals with disabilities and lead to their social exclusion and isolation" (p.1).

It was hypothesised that Ca' Foscari students who would like to become teachers or social workers demonstrate a good knowledge of disability, and that they are able to define it, which is considered an added value.

Previous research found that teacher training is significant, since teachers educated in Special Education tend to be more positively disposed towards people with disabilities and also that a healthy society promotes social inclusion (Galaterou & Antoniou, 2017; Babik & Gardner, 2021). Moreover, the focus of many programmes in the 21st century is to value difference and to celebrate diversity. A study conducted by Forlin & Chambers (2011) showed that where inclusive practices are a relatively

new phenomenon (e.g., in Asian territories) teachers have a high level of discomfort towards people with disabilities. Nevertheless, Taylor & Ringlaben (2012) stated, “However, there is limited information about how these new teacher educator programs influence pre-service teachers’ confidence or attitudes toward inclusive education as future teachers” (p.16). Generally, there are not only personality factors affecting perception of disability, which is also influenced by the level of society and school environments; moreover, individuals with severe disabilities seem to be perceived more negatively (Babik & Gardner, 2021). Regarding social workers, Gilson and DePoy (2002) stated, “While an individual’s anomalous physical, behavioural, psychological, cognitive, or sensory conditions may be acknowledged, they are not necessarily perceived as undesirable, in need of remediation, or even relevant to disability” (p. 160). In the authors’ opinion, the main issue is that social work schools still teach the medical model approach, which considers disability a feature of an individual, instead of the social model, which provides an alternative way of viewing disability, in terms of disabling environments and not as a problem inside a person. Anyway, a study conducted by Kennedy (2012) showed that for the clinical social workers with experience, the person comes first. In fact, Kennedy (2012) stated, “Throughout the interviews, clinicians had difficulty discussing their client in terms of their disability because they viewed the client as an individual with numerous attributes, in addition to his/her disability” (p. 78).

However, despite educational programs and university courses that pay greater attention to providing more awareness, knowledge and appreciation of disability, some pre-service teachers may maintain negative attitudes, beliefs and prejudices towards individuals with disabilities.

The hypothesis was partially supported. In particular, the results of this study demonstrated two things. First, the participants were all able to provide a definition of disability, but the most common definitions of disability were negative and therefore disability is still considered a condition of difficulty and an insidious obstacle in daily life by the majority of the participants (both future teachers and social workers). Although the participants will be working in close contact with people with disabilities

and are following Degree courses in order to become professionals who are sensitive to the needs of individuals with disabilities, only a minority of them consider disability as an added value. Consequently, the majority of both future teachers and social workers consider disability as a limitation, with no substantial difference. Second, the word *disability* was associated with negative connotations by the majority of the participants and linked to images that recall a sense of limitation (e.g., wheelchair, diversity, architectural barriers, discomfort, etc.). Overall these results are in accordance with findings reported by Fiorucci (2019) who found that the disability representations are associated with images of limitation. In addition, Rizzo et al. (2021), emphasized that:

Teachers [...] who are in the initial stages of their training seem to implement stereotypes and prejudices. This seems to indicate that if, on the one hand, the social representation of disability, still stereotyped and protopathic, can influence the individual representations of the construct, it is the active experience with the event that allows for a better representation of the same, with a consequent reduction of the prejudice (p. 10).

In fact, almost all participants are still studying or in the initial stages of their training and therefore, in accordance with the literature, they seem to implement stereotypes and prejudices. As a consequence, the perceptions of future teachers and social workers regarding disability, and the focus of attention is diverted to the deficit and in the individual condition of disability, in accordance with previous studies (Pinnelli & Fiorucci, 2020; Rizzo et al., 2021; Gilson & DePoy, 2002).

Fiorucci (2016) stated, *“La disabilità, sebbene sia percepita dagli insegnanti come un aspetto ancora saldamente connesso alla certificazione e al deficit, raccoglie ampi consensi e specifiche attenzioni modificando e animando tutto il contesto scuola”* (p.31). This is completely in line with the current study, since none of the participants showed indifference to the theme, despite the common and initial negative perception of disability. Moreover, the majority of them (77.5%) suggest that there is little acceptance of people with disabilities in Italy, as they are perceived as dangerous or unpredictable and therefore often marginalised by the Italian society.

In addition, this study highlights that little is known about the existence of invisible illnesses; in fact, not even half of the participants answered affirmatively to the question. More specifically, 20.2% of the participants are not aware of the existence of chronic and invisible illnesses and 19.1% of the participants have vaguely heard about them.

Finally, in line with previous studies (Vianello et al., 2015; Campbell et al., 2003), the participants showed a greater general and initial knowledge of Down syndrome compared to other diseases (e.g., Parkinson's Disease, Multiple Sclerosis and Autism). To sum up, the data indicates that, in general, the majority of respondents do not have a deep knowledge of disability. Despite their studies and the attention to the topic that all participants showed, they are not completely aware of the existence of some diseases; disability is perceived as something which is limiting and not an added value.

5.2 Research Question 2

Social workers and teachers collaborate in order to maximize students' achievement in schools. This study investigated whether these two groups of students studying in Venice share the same sentiments, attitudes and concerns towards disability.

It was hypothesised that Ca' Foscari students who would like to become teachers or social workers have the same sentiments, attitudes and concerns towards disability.

In general, the findings were positive, even though some items related to concerns were different. First of all, the majority of both future teachers and future social workers answered "I try to be protective", when meeting a person with disabilities. This means that the concept of disability moves towards a direction aimed at compassion and protection. This is in line with previous studies (AlMahdi & Bukamal, 2019; Fiorucci, 2019; Rizzo et al., 2021) which have shown that the sentiments and the attitudes towards people with disabilities are generally positive and compassionate, and suggesting that protection plays a greater role. Furthermore, results showed that the majority of the two groups of students do not find it difficult to overcome their initial

shock when meeting people with severe physical disabilities; moreover, they are not afraid to look directly at a person with a disability and they also do not tend to make contacts with people with disabilities brief. In addition, both groups of students agree with the fact that they would feel terrible if they had a disability, which is completely in line with the study conducted by Fiorucci (2019).

Secondly, results showed that the majority of future teachers and future social workers feel sympathy, desire to help and, above all, show admiration for people with disabilities. Moreover, none of the participants showed indifference. On the contrary, future social workers showed a higher level of tranquillity and a lower level of apprehension than future teachers.

Thirdly, the current study shows that the future teachers and the future social workers also share the same concerns, since both groups partially agree with the statement “*Non saper comunicare con i soggetti sordi o non verbali*”; moreover, the majority of them agree or strongly agree with the statements “*Non conoscere la LIS o altri codici gestuali*” and “*Affrontare casi molto difficili*”. Particularly, this last item is in accordance with Fiorucci (2019), who stated, “*L’aspetto che incide maggiormente è la gravità e la tipologia della disabilità: a una maggiore complessità del deficit, di solito, corrispondono atteggiamenti di ritrosia e inadeguatezza*” (p. 273). Furthermore, the data highlights that both groups are not particularly worried about being in disagreement with colleagues or families, even though they are both worried about feeling inadequate. On the contrary, there is a little difference regarding the statement “*Non saper gestire problematiche comportamentali*”: the majority of future teachers agree and are worried about how to manage behavioural problems whereas the majority of future social workers either agree or partially disagree.

It must also be specified that some of the items in the questionnaire were different and, consequently, also the answers were different. To sum up, regarding the concerns raised in this study, it has emerged that the majority of future teachers are not concerned that their workload will increase if they have students with disabilities in class, as well as they are not concerned that they will be more stressed if they have students with disabilities in class (and this is in line with a study conducted by Fiorucci in 2019).

Nevertheless, they are concerned that students with disabilities will not be accepted by the rest of the class and they are partially concerned that they do not have the knowledge and skills required to teach students with disabilities. This result is in line with the study done by AlMahdi & Bukamal (2019). On the contrary, future social workers are not concerned that they may work with adults or children with disabilities, nor that they may work with seniors or children with mental disorders.

Finally, this study highlights similar positions regarding beliefs of self-efficacy. In fact, the majority of future teachers and future social workers do not have much confidence in their abilities. More specifically, they are partially confident in their ability to prevent disruptive behaviour in the classroom, and the majority of them are partially confident in the ability to get parents involved. Anyway, both groups of students agree with the statement “I can collaborate with other professionals”. Furthermore, the majority of future teachers do not feel confident in preventing disruptive behaviour in the classroom, whereas the majority of future social workers are partially confident. Lastly, the majority of future teachers are uncertain about the ability in designing learning tasks, whereas the majority of future social workers are confident in designing learning tasks.

5.3 Research Question 3

It is interesting and relevant to understand how future teachers and future social workers approach the world of disability and, in other words, how did they get closer to this world.

It was hypothesized that Ca' Foscari students who would like to become teachers or social workers approached the world of disability with prior experience, personal interest and knowledge. The results of the study related to the research question indicated that the majority of both future teachers and social workers were already aware of the world of disability. Moreover, the current study highlights that the main

factors that have a direct impact and have brought the participants even closer to the world of disability are volunteering experiences, internship or work experience and University information-based courses, confirming this hypothesis. It must be underlined that none of the participants showed indifference to the theme and therefore, several factors, such as any knowledge or prior positive experience, personal interest and intrinsic motivation towards people with disabilities promote the implementation of inclusion and at the same time motivate teachers and social workers to do a good job.

However, the results also showed that future teachers got closer to the world of disability thanks to the courses for teaching; future social workers, on the contrary, got closer to the world of disability through the modules of their Degree programme.

5.4 Research Question 4

Over the years, a number of studies have investigated the importance of the contact with people with disabilities in order to reduce prejudice. In general, direct contact with people with disabilities seems to be a significant factor in determining positive attitudes towards disability; in particular, teachers who had a direct contact or a personal experience with individuals with disabilities seem to have fewer concerns (Gilmore & Cuskelly, 2014; Vianello et al., 2015; Fiorucci, 2016). Moreover, according to Babik & Gardner (2021), face-to-face interactions as well as contact and friendship with peers with disabilities appears to reduce prejudices already at an early age. In particular, Barr & Bracchitta (2012) stated, “Having friends with disabilities seems to be a critical relationship needed to diminish misconceptions about disabilities as we get older as it would expose a friend without a disability to a more realistic view of what individuals with disabilities can do” (p. 15).

The current study wanted to investigate whether the participants believe that knowing someone with disabilities personally (e.g., a family member, a friend, etc.)

may lead to a better understanding of disability and higher levels of acceptance. It was hypothesized that the participants believe that knowing someone with disability personally, leads to a better understanding.

The findings were positive and the hypothesis resulted to be correct, since the large majority of the sample answered affirmatively, without any difference between the two groups of students. Consequently, both future teachers and future social workers agree or strongly agree with the fact that having a friend or a relative with disabilities promotes acceptance, awareness and understanding of disability. This finding is also supported by other results, which showed that 91% of the participants know someone with disabilities personally; moreover, 61.8% of them have also had a schoolmate with disabilities and 89% of the participants still remember his/her name. Although there is no evidence that this aspect may have influenced the choice of the participants to initiate studies in order to become a teacher or a social worker who will work with people with disabilities daily, this may be an interesting topic that requires further study.

5.5 Limits of the study and suggestions for further research

As with the majority of studies, the design of the current study is subject to limitations. A major possible weakness of this work is that the findings are based on a small sample of participants collected at a single, public Italian university. In fact, the students who participated in the research were all Ca' Foscari students, studying in Venice; consequently, they have all received the same educational model and it may not be possible to generalize the results to students at other institutions. However, although the results provided may not be representative of the Italian situation, the data may be of help to underline that even though progress has been made, there is still much to do to achieve non stereotyped ways of thinking about disability in Italy.

Moreover, the majority of participants were female, within a certain age range 18-43. Previous studies have shown not only that younger teachers are more inclusive and available, but also that female pre-service teachers provide more positive responses to the SACIE-R scale than male (Barr & Bracchitta, 2012; Fiorucci, 2019; Loreman & Earle, 2007). Despite these findings, there is no evidence that younger females have more positive attitudes than males, since no comparison has been done between male and female participants in the current research. It is recommended therefore to expand the study, in order to have a better representation of the sample in general and to investigate potential gender differences; in fact, it would be intriguing to explore whether the perception of disability changes between male and female students. In addition, it would be interesting to compare the data collected with information gathered in other Italian universities, as well as to explore whether Italian students studying in Venice have the same perception of disability compared with international students studying in Venice.

Another limitation of this research concerns the fact that all the participants were Italian students and it is important to consider that the Italian scenario is different. Further research should also explore common points and differences between future teachers and future social workers in Italy and abroad, considering that there is a lack of previous research studies on this topic.

Also, the approach utilised suffers from the limitation that the participants may have answered the questions in a way that makes them look good, on the basis of social desirability. In fact, Kastner, Reppucci and Pezzoli (1979) stated, “disability surveys tend to elicit responses biased towards socially or politically correct views” (as cited in Campbell, Gilmore & Cuskelly, 2014, p.5). Therefore, this is a limitation of all studies.

Furthermore, the results of the present study are also limited due to the fact that there was no direct observation. Thus, it was not possible to see how the participants effectively interact and behave with people with disabilities in general.

Finally, as underlined in the previous paragraph, this study did not investigate whether the fact of knowing someone with disabilities personally and having higher levels of acceptance may influence the choice of working in close contact with

individuals with disabilities. A further study may also explore this aspect in depth and verify the eventual correlation.

5.6 Conclusion

The present thesis had the aim of exploring Ca' Foscari students' perception of disability, by making a comparison between two groups of students who will work in close contact with people with disabilities: future teachers and future social workers. Moreover, this work investigated the sentiments, the concerns, the beliefs and the attitudes of future teachers and future social workers towards disability, since there is little known about this topic in Italy.

The sample of 89 Ca' Foscari Italian students (the majority of them come from North-East Italy) voluntarily responded to an online questionnaire during academic year 2021/2022. From the general information section findings, it has emerged that the percentage of female students was very high (85.4%) compared to the percentage of male students (11.2%). In addition, 3.4% of the participants did not provide any information on gender. It has also emerged that the average age of the participants was 24.7 years old and the sample was composed of more students that would like to become teachers (57.3%) than social workers (42.7%).

One of the most important points to highlight from this study is that the majority of both future teachers and future social workers consider disability as a condition of difficulty and an insidious obstacle in daily life. Despite specific educational programs, university courses and the promotion of inclusive policies that try to overcome either conscious or unconscious prejudices against people with disabilities in society, only a minority of the participants consider disability as an added value and do not consider disability as a feature of the individual, linked to negative connotations. Moreover, according to the majority of the participants (77.5%), there is still little acceptance of people with disabilities, who are often marginalised within Italian society.

Overall, the results have also shown many communalities between the two groups of students. Firstly, the majority of both future teachers and future social workers have the same initial beliefs, since the first person with disabilities that comes to their mind, when they have to think about, it is a person with mobility difficulties (e.g., an individual in a wheelchair). Moreover, their initial thought when they see a person with mobility difficulties is that he/she has had an accident.

Conversely, in their future jobs, the majority of future teachers expect to find mostly students with intellectual disabilities and Down syndrome, whereas future social workers expect to find most people with mobility difficulties.

Secondly, concerning the knowledge of some specific diseases, it has emerged that not even half of the participants are completely aware of the existence of chronic and invisible illnesses. Moreover, the majority of them only partially know of some diseases, such as Multiple Sclerosis, Autism and Parkinson's Disease; in particular, this last mentioned was found to be the least known among the participants. On the contrary, Down Syndrome resulted as the most well-known of the diseases mentioned.

Another important result to underline is that 91% of the participants know people with disabilities (relatives or friends) and both future teachers and future social workers believe that knowing someone with disabilities personally, leads to a better understanding, with a very high percentage (85.4% of participants strongly agree).

A number of common features between the two groups of students has also emerged from the emotional aspects and actions section. In fact, the majority of both future teachers and social workers try to be protective, when meeting a person with disabilities. In addition, some of them try to behave naturally, but at the same time are prepared to offer their support. Secondly, both future teachers and social workers do not find it difficult to overcome their initial shock, when meeting people with severe physical disabilities. Also, they are not afraid to look directly at a person with disabilities and do not tend to make contact with people with disabilities brief. Furthermore, the two groups of students agree with the fact that they would feel terrible if they had a disability, as well as they both believe that people with disabilities need

more attention and that they need to be treated differently (future teachers showed slightly higher percentages).

Thirdly, it has emerged that the two groups of students share the same sentiments towards people with disabilities, i.e., those of sympathy, fear, but at the same time desire to help and admiration for individuals with disabilities. Conversely, future teachers have demonstrated higher levels of apprehension and lower levels of tranquillity than future social workers.

Another important point to highlight from this study is that both future teachers and future social workers share the same beliefs of self-efficacy. Although the majority of the participants showed high confidence levels in collaborating with other professionals, the majority of them have low confidence levels in their abilities in general. The only difference between the two groups of students concerns the ability in designing learning tasks, since future social workers resulted to be more confident than future teachers. Moreover, with regard to the concerns of future teachers and future social workers, it has emerged that there are many similarities between the two groups of students. Overall, they both have expressed the same concerns, (e.g., about the communication with deaf people, difficult situations to face, as well as the feeling of inadequacy). However, it must be underlined that future teachers have showed slightly higher levels of concern than future social workers. On the contrary, future social workers partially agree with concerns to do with being in disagreement with the families of individuals with disabilities, whereas future teachers partially disagree and are less worried about it.

Finally, it emerged that none of the participants show indifference to the theme, and the majority of both future teachers and social workers already knew the world of disability. However, while future teachers have found the courses for teaching and the psycho-pedagogical preparation useful, in order to get closer to world of disability, future social workers have found the modules of their Degree programme useful.

To sum up, this study found that the two groups of Ca' Foscari students that would like to become teachers or social workers have the same perception of disability and that the topic is very significant for all of them. More specifically, the two groups of

students share most of the concerns, beliefs, sentiments and attitudes towards disability, even though, in general, future social workers seem to be slightly more confident about themselves.

Overall, younger teachers and social workers appear to be very inclusive, but the biggest fear is the same: being inadequate and having to manage difficult cases. As seen in the previous chapters, working in close contact with people with disabilities is a difficult job; as it has been indicated in the literature, not only the experience of contact and educational programs are important, but also the emotional aspects and personal interest in the topic play a decisive role. The findings in this study suggest that an important next step may be to develop new strategies in order to reduce prejudices and increase pre-service teachers and social workers' self-confidence.

To conclude, Ca' Foscari University should increase both theory and practice, in order to continue to raise awareness and understanding of disabilities. More can be done, since the students have shown a good predisposition towards inclusion and strong interest in disability and all its related issues; on the other hand, they have also shown a lack of knowledge of chronic and invisible illnesses, as well as little knowledge of some disabilities (e.g., Parkinson's Disease). As it has been underlined, fieldwork experiences and the contact with individuals with disabilities have a relevant influence on the perceptions and attitudes towards such individuals. For this reason, more experience of direct contact with people with disabilities should be planned and, in case of difficulties, the university should also promote some lectures or classroom meetings with people with disabilities or important associations that deal with disabilities in Italy. In parallel, it would be useful to provide students with knowledge and some practical advice and suggestions. Finally, tasks requiring reflection and activities dedicated to teamwork and collaboration would be helpful, in order to share personal experience. An important purpose of Ca' Foscari University may be to promote and sustain understanding of all disabilities, both visible and invisible. A specific course which includes additional education around all disabilities may be very beneficial for all Ca' Foscari students.

REFERENCES

- Aiello, P. & Sharma, U. (2018). Improving intentions to teach in inclusive classrooms: the impact of teacher education courses on future Learning Support Teachers. *Form@re - Open Journal Per La Formazione in Rete*, 18(1), 207-219. <http://dx.doi.org/10.13128/formare-22605>
- Aiello, P., Pace, E. M., Dimitrov, D. M., & Sibilio, M. (2017). A study on the perceptions and efficacy towards inclusive practices of teacher trainees. *Italian Journal of Educational Research*, X(19), 13–28. Retrieved from <https://ojs.pensamultimedia.it/index.php/sird/article/view/2542>
- Aiello, P., Sharma, U., Di Gennaro, D., Dimitrov, D., Pace, E. M., Zollo, I. & Sibilio, M. (2017). Uno studio sui sentimenti, gli atteggiamenti e le preoccupazioni degli insegnanti italiani verso l'inclusione scolastica. *Rivista Formazione, Lavoro, Persona*, VII(20), 10-24. Retrieved from <https://forperlav.unibg.it/index.php/fpl/article/view/285>
- Aiello, P., Sharma, U., Dimitrov, D. M., Di Gennaro, D. C., Pace, E. M., Zollo, I., & Sibilio, M. (2016). Indagine sulle percezioni del livello di efficacia dei docenti e sui loro atteggiamenti nei confronti dell'inclusione. *L'Integrazione scolastica e Sociale*, 15(1), 64-87. Retrieved November 11, 2021, from <https://rivistedigitali.erickson.it/integrazione-scolastica-sociale/it/visualizza/pdf/1233>
- AlMahdi, O., & Bukamal, H. (2019). Pre-Service Teachers' Attitudes Toward Inclusive Education During Their Studies in Bahrain Teachers College. *SAGE Open*. 1-14. <https://doi.org/10.1177/2158244019865772>
- Aristotele (1973). *Opere* (pp.258-259). Bari, Laterza.
- Arvelo-Rosales, C. N., Alegre de la Rosa, O. M., & Guzmán-Rosquete, R. (2021). Initial Training of Primary School Teachers: Development of Competencies for Inclusion and Attention to Diversity. *Educational Sciences*, 11(8), 413. <https://doi.org/10.3390/educsci11080413>
- Associazione Dopo di Noi. (n.d.). Incontri e confronti per una nuova cultura: Indagine sulla percezione della disabilità. Retrieved November 7, 2021, from <https://www.dopodinoi.biella.it/blog/>
- Au, K.W., & Man, D.W.K. (2006). Attitudes toward people with disabilities: a comparison between health care professionals and students. *International Journal of Rehabilitation Research*, 29(2), 155-160. <https://doi.org/10.1097/01.mrr.0000210048.09668.ab>

- Babik, I. & Gardner, E. S. (2021). Factors Affecting the Perception of Disability: A Developmental Perspective. *Frontiers in Psychology*, 12(702166). 1-26. <https://doi.org/10.3389/fpsyg.2021.702166>
- Baguisa, L. R., & Ang-Manaig, K. (2019). Knowledge, skills and attitudes of teachers on inclusive education and academic performance of children with special needs. *PEOPLE: International Journal of Social Sciences*, 4(3), 1409-1425. <https://dx.doi.org/10.20319/pijss.2019.43.14091425>
- Balboni G., & Pedrabissi L. (2000). Attitudes of Italian teachers and parents toward school inclusion of students with mental retardation: The role of experience. *Education and Training in Mental Retardation and Development Disabilities*, 35(2), 148-159.
- Bandura, A. (1986). *Social Foundations of Thought and Action: A Social Cognitive Theory*. Englewood Cliffs, NJ: Prentice Hall.
- Banks, L. M., Walsham, M., Neupane, S., Neupane, S., Pradhananga, Y., Maharjan, M., Blanchet, K. & Kuper, H. (2019). Access to Social Protection Among People with Disabilities: Mixed Methods Research from Tanahun, Nepal. *The European Journal of Development Research*, 31, 929-956. <https://doi.org/10.1057/s41287-019-0194-3>
- Barr, J. J., & Bracchitta, K. (2012). Attitudes Toward Individuals With Disabilities: The Effects of Age, Gender, and Relationship. *Journal of Relationships Research*, 3, 10-17. <https://doi.org/10.1017/jrr.2012.1>
- Bean, K. F., & Hedgpeth, J. (2014). The Effect of Social Work Education and Self-Esteem on Students' Social Discrimination of People with Disabilities. *Social Work Education*, 33(1), 49-60. <https://doi.org/10.1080/02615479.2012.740454>
- Benassi, D., Bertotti, T., Campanini, A. & Rossi, P. (2021). Social Work and social workers in Italy. *Trabajo Social Global – Global Social Work* 11, 1-29. <https://dx.doi.org/10.30827/tsg-gsw.v11.20913>
- Berryman J. D., Neal W. R. Jr. (1980). The cross validation of the attitudes toward mainstreaming scale (ATMS). *Educational & Psychological Measurement*, 40, 469-474. <https://doi.org/10.1177/-001316448004000227>
- Bronstein, L. R., & Abramson, J. S. (2003). Understanding Socialization of Teachers and Social Workers: Groundwork for Collaboration in the Schools. *Families in Society*, 84(3), 323–330. <https://doi.org/10.1606/1044-3894.110>
- Butt, R. (2016b). Teacher Assistant Support and Deployment in Mainstream Schools. *International Journal of Inclusive Education*, 20(9), 995-1007. <https://doi.org/10.1080/13603116.2016.1145260>

- Campbell, J., Gilmore, L. & Cuskelly, M. (2003). Changing student teachers' attitudes towards disability and inclusion. *Journal of Intellectual & Developmental Disability*, 28(4), 369-379.
- Cario, M. (2014). Breve storia della disabilità. *Educare.it*, 7. Retrieved December 6, 2021, from <https://www.educare.it/j/temi/disabilita/studi-e-articoli/2793-breve-storia-della-disabilita>
- Chadd, E. H., & Pangilinan, P. H. (2011). Disability attitudes in health care: A new scale instrument. *American Journal of Physical Medicine and Rehabilitation*, 90(1), 47–54.
- Cheatham, L. P., Abell, N., & Kim, H. (2015). Development and validation of the social worker's attitudes toward disability scale. *Journal of Social Work Education*, 51(2), 379–397.
- Cottini, L. (2018). *Didattica speciale e inclusione scolastica*. Carocci Editore.
- EC (European Commission) (2007). 392 final: *Communication from the Commission to the Council and the European Parliament. Improving the quality of teacher education*. Retrieved February 10, 2022 from <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52007DC0392&from=EN>
- European Agency for Development in Special Needs Education (2012). *Profile of Inclusive Teachers*, Odense, Denmark: European Agency for Development in Special Needs Education.
- Eurydice (2022). Initial education for teachers working in early childhood and school education. Retrieved February 15, 2022, from <https://eacea.ec.europa.eu/national-policies/eurydice>
- Facchini, C., & Campanini, A. (2013). Values and Motivations in BA Students of Social Work: the Italian Case. *Social Work & Society*, 11(1), 1-17. Retrieved April 11, 2022, from <http://nbn-resolving.de/urn:nbn:de:hbz:464-sws-472>
- Falanga, R., De Caroli, M.E., & Sagone, E. (2020). Is it possible to enhance positive attitudes towards people with disability? A training with Italian university students. *New Trends and Issues Proceedings on Humanities and Social Sciences*, 7(3), 27–33.
- Falanga, R., De Caroli, M.E., & Sagone, E. (2011). ATTITUDES TOWARDS DISABILITY: THE EXPERIENCE OF “CONTACT” IN A SAMPLE OF ITALIAN COLLEGE STUDENTS. *International Journal of Developmental and Educational Psychology*, 4(1), 91-99. Retrieved from <https://www.redalyc.org/articulo.oa?id=349832331009>

- Fiorucci, A. (2016). L'inclusione a scuola. Una ricerca sulle percezioni di un gruppo di insegnanti in formazione e in servizio. *Form@re – Open Journal per la formazione in rete*, 16(3), 20-34. <http://dx.doi.org/10.13128/formare-19109>
- Fiorucci, A. (2018). Le rappresentazioni della disabilità visiva di un gruppo di futuri insegnanti: una ricerca sul contributo della formazione iniziale e dell'esperienza del contatto. *Italian Journal of Special Education for Inclusion*, 6(2), 161-178.
- Fiorucci, A. (2019). *Cultural Models Of Disability. An Exploratory Qualitative Study On The Pre-Service Teachers' Attitudes And Social Representations*. In END 2019. Proceedings of International Conference on Education and New Developments, Porto, Portogallo, pp. 69-73. <https://doi.org/10.36315/2019v1end015>
- Fiorucci, A. (2019). Inclusione, disabilità e formazione docenti. Uno studio sulla rilevazione degli atteggiamenti e dei fattori associati in un gruppo di futuri insegnanti. La scala OFAID. *Italian Journal of Special Education for Inclusion*, 7(2), 271-293. <https://doi.org/10.7346/sipes-02-2019-21>
- Fiorucci, A., & Pinnelli, S. (2020). Supporto alla disabilità e promozione dell'inclusione: una ricerca sugli atteggiamenti e sulle preoccupazioni di un gruppo di futuri docenti. *L'Integrazione Scolastica e Sociale*, 19(1), 68-80. <https://doi.org/10.14605/ISS1912009>
- Fondazione Censis, Fondazione Cesare Serono. (2010). *Le disabilità oltre l'invisibilità istituzionale. Il ruolo delle famiglie e dei sistemi di welfare*. Primo rapporto di ricerca. Le disabilità tra immagini, esperienze e emotività. Retrieved November 7, 2021, from <http://www.condicio.it>
- Forlin, C., & Chambers, D. (2011). Teacher preparation for inclusive education: Increasing knowledge but raising concerns. *Asia-Pacific Journal of Teacher Education*, 39(1), 17–32. <https://doi.org/10.1080/1359866X.2010.540850>
- Forlin, C., Earle, C., Loreman, T. & Sharma, U. (2011). The Sentiments, Attitudes and Concerns about Inclusive Education Revised (SACIE-R) scale for measuring pre-service teachers' perceptions about inclusion. *Exceptionality Education International*, 21(3), 50-65. <https://doi.org/10.5206/eei.v21i3.7682>
- Friedlander, H. (1997). *Le origini del genocidio nazista*. Roma, Editori Riuniti.
- Galaterou, J., & Antoniou, A. S. (2017). Teachers' Attitudes towards Inclusive Education: The Role of Job Stressors and Demographic Parameters. *International Journal of Special Education*, 32(4), 643-658. Retrieved April 22, 2022, from <https://files.eric.ed.gov/fulltext/EJ1184123.pdf>

- Garwood, J. D., Van Loan, C. L., & Werts, M. G. (2018). Mindset of Paraprofessionals Serving Students with Emotional and Behavioural Disorders. *Intervention in School and Clinic, 53*(4), 206-211. <https://doi.org/10.1177/1053451217712958>
- Gaspari, P. (2016). Il docente specializzato di sostegno: problemi e prospettive in ottica inclusiva. *Italian Journal of Special Education for Inclusion, 4*(2), 31-44.
- Gilson, S. F., & DePoy, E. (2002). Theoretical approaches to disability content in social work education. *Journal of Social Work Education, 38*(1), 153–165.
- Goulden, A. (2020). Disability Competency in Social Work Education: Tools for Practice Teaching. *The Journal of Practice Teaching and Learning, 17*(2), 61-77. <https://doi.org/10.1921/jpts.v17i2.1175>
- Gui, L. (2005). La figura dell'assistente sociale. In *Rassegna bibliografica infanzia e adolescenza, 6*(3).
- Hayashi, R., & Kimura, M. (2004). Attitudes toward persons with disabilities among Japanese social work students. *The Review of Disability Studies, 1*(1), 60-69.
- Holler, R. & Werner, S. (2018). Perceptions towards disability among social work students in Israel: Development and validation of a new scale. *Health and Social Care in the community, 26*(3), 423-432. <https://doi.org/10.1111/hsc.12555>
- ISTAT. (2019). *Conoscere il mondo della disabilità. Persone, relazioni, e Istituzioni*. Retrieved from <https://www.istat.it/it/archivio/236301>
- ISTAT. (2020). *L'inclusione scolastica degli alunni con disabilità. Anno scolastico 2018-2019*. Retrieved from <https://www.istat.it/it/files//2020/02/Alunni-con-disabilita-2018-19.pdf>
- Itard, J. M. (2007). *Il fanciullo selvaggio dell'Aveyron*. Roma, Armando.
- Kennedy, J. F. (2012). Social workers' changing perceptions of disability through working with clients with disabilities. *Masters Thesis*. Smith College, Northampton, MA. <https://scholarworks.smith.edu/theses/637>
- Laging, M. (2021). *Social Work Education in Europe*. Switzerland, Springer Nature.
- Lascioli, A. & Pasqualotto, L. (2021). *Il piano educativo individualizzato su base ICF. Strumenti e prospettive per la scuola*. Carocci Editore.
- Legrenzi, P. & Jacomuzzi, A. (2020). *Fondamenti di psicologia generale* (2nd ed.). Bologna, Il Mulino.
- Leonardi, M. (2003). ICF: La Classificazione Internazionale del Funzionamento, della Disabilità e della Salute dell'Organizzazione Mondiale della Sanità. Proposte di lavoro e di discussione per l'Italia. *Giornale Italiano Di Medicina Riabilitativa, 17*, 53-59.

- Loreman, T., & Earle, C. (2007). The Development of Attitudes, Sentiments and Concerns about Inclusive Education in a Content-Infused Canadian Teacher Preparation Program. *Exceptionality Education Canada*, 17(1/2), 85-106. Retrieved May 3, 2022, from <https://www.researchgate.net/publication/234771149>
- Mainhard, T., Oudman, S., Hornstra, L., Bosker, R.J., & Goetz, T. (2018). Student emotions in class: The relative importance of teachers and their interpersonal relations with students. *Learning and Instruction*, 53, 109-119. <https://doi.org/10.1016/j.learninstruc.2017.07.011>
- Martin, A.J., Strnadová, I., Hájková, V., Němec, Z., & Květoňová, L. (2019). Teaching assistants working with students who have a disability: The role of adaptability in enhancing their workplace outcomes. *International Journal of Inclusive Education*. <https://doi.org/10.1080/13603116.2018.1563646>
- McManus, J. L., Feyes, K. J., & Saucier, D. A. (2010). Contact and knowledge as predictors of attitudes toward individuals with intellectual disabilities. *Journal of Social and Personal Relationships*, 28(5), 579–590. <https://doi.org/10.1177/0265407510385494>
- Mega, C., Castellini, K., e Vianello, R. (1997). Gli atteggiamenti degli insegnanti verso gli allievi con handicap: dalla scuola media a quella superiore. In R. Vianello e C. Cornoldi. *Metacognizione e sviluppo della personalità. Ricerche e proposte di intervento*. (pp.265-279). Bergamo: Junior.
- Miller, M. M. (2002). Attitudes of allied health students toward persons with disabilities. *Arete*, 25(2), 12-24. Retrieved from EBSCOhost.
- Montesano, L., Straniero, A., & Valenti, A. (2021). Belief system of the specialised teachers for students with disabilities. A survey conducted at the University of Calabria. *Form@re - Open Journal Per La Formazione in Rete*, 21(1), 69-84. <https://doi.org/10.13128/form-10655>
- Nota, L., Ginevra, M. C., & Soresi, S. (2015). *Tutti diversamente a scuola. L'inclusione scolastica nel XXI secolo*. Padova, CLEUP.
- O. M. S., (2004). *ICF, versione breve. Classificazione Internazionale del Funzionamento, della Disabilità e della Salute*. Trento, Erickson.
- Ouane, A. (2008, November 25-28). Creating education systems which offer opportunities for lifelong learning. [Paper presentation]. In *Inclusive education: the way of the future*. UNESCO International Conference on Education, Geneve. Retrieved from

http://www.ibe.unesco.org/fileadmin/user_upload/Policy_Dialogue/48th_ICE/CONFINTED_48_Inf_2_English.pdf

Pinnelli, S., & Fiorucci, A. (2019). Disabilità e inclusione nell'immaginario di un gruppo di insegnanti in formazione. Una ricerca sulle rappresentazioni. *MeTis. Mondi educativi. Temi, indagini, suggestioni*, 9(1), 538-556.

Rasmitadila & Goldstein, B. L. (2017). The Role of Special Assistant Teacher to Help Special Needs Student through Instructional Interactions in an Inclusive Classroom. *International Journal Of Special Education*, 32(3), 485-506.

Ridarick, T., & Ringlaben, R. (2013). *Elementary special education teachers' attitudes regarding inclusion*. Retrieved February 11, 2022 from <https://www.lynchburg.edu>

Rizzo, S., Frolli, A., Cavallaro, A., Sinigaglia, G., & Scire, S. (2021). Social Representation of Disability and Teachers. *Education Sciences*, 11(6), 266. <https://doi.org/10.3390/educsci11060266>

Sakarneh, M., & Nair, N.A. (2014). Effective teaching in inclusive classroom: Literature Review. *Journal of Education and Practice*. 5(24), 28-34. Retrieved from <https://www.iiste.org/Journals/index.php/JEP/article/view/15252>

Schianchi, M. (2012). *Storia della disabilità. Dal castigo degli dei alla crisi del welfare*. Roma, Carocci Editore.

Schwartz, C., & Armony-Sivan, R. (2001). Students' Attitudes to the Inclusion of people with Disabilities in the Community. *Disability & Society*, 16(3), 403-413. <https://doi.org/10.1080/09687590120045978>

Sedran, D. (2004). *Il disabile. Persona e risorsa*. Perugia, Morlacchi Editore.

Serrelli, E. (2018). Cosa vuol dire disabilità oggi?. *Diversity-Management.it, Wise Growth*. Retrieved December 14, 2021, from <https://www.diversity-management.it/2018/12/05/cosa-vuol-dire-disabilita-oggi-aggiorniamo-il-pensiero-che-sta-dietro-al-linguaggio/>

Servidio, R., & Marcone, R. (2020). Classical and modern prejudice towards individuals with intellectual disabilities: A study on a sample of Italian university students. *The Social Science Journal*, 1-13. <https://doi.org/10.1080/03623319.2020.1799176>

Sharma, U., Forlin, C., & Loreman, T. (2008). Impact of training on pre-service teachers' attitudes and concerns about inclusive education and sentiments about persons with disabilities. *Disability & Society*, 23(7), 773-785. <https://doi.org/10.1080/09687590802469271>

- Sharma, U., Loreman, T. & Forlin, C. (2012). Measuring teaching efficacy to implement inclusive practices. *Journal of Research in Special Education Needs*, 12(1), 12–21. <https://doi.org/10.1111/j.1471-3802.2011.01200.x>
- Sicora, A. (2015). Social work education and practice in Italy: emerging issues, challenges and concerns. In *Visioni LatinoAmericane, Social work around the world. Colors and shapes in a complex mosaic*, 13, 45-64.
- Simeonsson, R. J., Lollar, D., Hollowell, J., & Adams, M. (2000). Revision of the International Classification of Impairments, Disabilities, and Handicaps: developmental issues. *Journal of Clinical Epidemiology*, 53(2), 113-24. [https://doi.org/10.1016/S0895-4356\(99\)00133-X](https://doi.org/10.1016/S0895-4356(99)00133-X)
- Stanley, P. (2000). Students with disabilities in higher education: a review of the literature. *College Student Journal*, 34(2). Alabama: Project Innovation publisher.
- Talarico, F. (2017). Capitolo 16: Classificazione funzionale e valutazione multidimensionale in ambito sanitario e socio-assistenziale. In: *Governare l'Assistenza Primaria: Manuale per Operatori di Sanità Pubblica*. Retrieved from <https://www.aprirenetwork.it/2017/12/10/cap-16-classificazione-funzionale-e-valutazione-multidimensionale-in-ambito-sanitario-e-socio-assistenziale/>
- Tarditi, R. (2007). L'olocausto delle diversità. *A-Rivista Anarchica*, 37. Retrieved from <http://www.arivista.org/riviste/Arivista/331/dossier6.htm>
- Taylor, R., & Ringlaben, R. P. (2012). Impacting Pre-service Teachers' Attitudes toward Inclusion. *Higher Education Studies*, 3(2), 16-23. <http://dx.doi.org/10.5539/hes.v2n3p16>
- Trevithick, P. (2000). *Social Work Skills*. Buckingham, Philadelphia: Open University Press.
- United Nations. (2006). Convention on the Rights of Persons with Disabilities. Retrieved January 18, 2022, from https://www.un.org/disabilities/documents/convention/convention_accessible_pdf.pdf
- Vianello, R., Lanfranchi, S., Moalli, E., & Pulina, F. (2015). Tutti in classe normale: le opinioni degli insegnanti, dei compagni e dei genitori. In Vianello R. & Di Nuovo S., *Quale scuola inclusiva in Italia? Oltre le posizioni ideologiche: risultati della ricerca* (pp. 17-33). Trento: Erickson.
- World Health Organization. (1980). International Classification of Impairments, Disabilities, and Handicaps. Retrieved January, 14, 2022 from http://apps.who.int/iris/bitstream/handle/10665/41003/9241541261_eng.pdf?sequence=1

World Health Organization. (1999). International Classification of Functioning and Disability, Beta-2 Draft, Full Version, Geneva. Retrieved January 14, 2022, from https://apps.who.int/iris/bitstream/handle/10665/65990/WHO_HSC_ACE_99.2.pdf?sequence=1

World Health Organization. (2007). International classification of functioning, disability and health: children and youth version: ICF-CY. World Health Organization. Retrieved January 14, 2022, from <https://apps.who.int/iris/handle/10665/43737>

Yuker, H. E., Block, J. R., & Young, J. H. (1966). *The measurement of attitude toward disabled persons* (Human Resources Study No. 7). Albertson, NY: Human Resources Center.

APPENDICES

APPENDIX A: the questionnaire.

Questionario sulla Percezione della Disabilità

PROGETTO DI RICERCA

Corso di Laurea Magistrale in Scienze del Linguaggio - Università Ca' Foscari, Venezia

Conduzione: dott.ssa Giulia Guerra

Supervisione: Proff. Monica Banzato e Francesca Coin

Gentile collega, se frequenti un corso di laurea presso l'Università Ca' Foscari di Venezia in Politiche Pubbliche e Cambiamenti Sociali e vorresti diventare un giorno operatore o assistente sociale, oppure se frequenti un altro corso di laurea, sempre presso l'Università Ca' Foscari, e stai seguendo o hai già seguito uno o più corsi validi per ottenere i 24 CFU in quanto il tuo obiettivo è quello di diventare insegnante, ti chiedo di compilare il seguente questionario.

Di seguito troverai alcune domande inerenti alla tua percezione della disabilità. Sono anonime e richiedono pochi minuti. Saresti così gentile da compilarlo con sincerità e attenzione?

Il questionario fa parte della ricerca per la mia Tesi Magistrale sulla percezione della disabilità che hanno i futuri insegnanti ed assistenti sociali, ed è all'interno di essa che pubblicherò i risultati raccolti. Esso è SUDDIVISO IN 4 SEZIONI: LE PRIME DUE SONO UGUALI PER TUTTI, poi ti chiedo di compilare LA TERZA SEZIONE SE VORRESTI DIVENTARE INSEGNANTE oppure LA QUARTA SEZIONE SE VORRESTI INVECE DIVENTARE ASSISTENTE SOCIALE.

Il presente questionario è utilizzabile solo ed esclusivamente da me che lo somministro e dalle docenti al fine di raccogliere informazioni.

Non ci sono risposte giuste o sbagliate, mi interessa solo la tua percezione soggettiva.

I dati verranno raccolti in forma anonima, non verranno divulgati a terzi e saranno trattati nel pieno rispetto della privacy, come previsto dal D.lgs 163/2017, Ex art. 13 D.L. 196/2003 ed ex art. 13 Regolamento Europeo 2016/679, esclusivamente per scopi di ricerca e didattici.

Sezione 1 - DATI ANAGRAFICI

La tua età*

Sesso*

- Maschio
- Femmina
- Preferisco non specificarlo

Altro:

Corso universitario che frequenti*

- Politiche Pubbliche e Cambiamenti Sociali (che comprende anche Scienze della Società e del Servizio Sociale)
- Economia e Management
- Lingue e Culture
- Scienze e Tecnologia
- Arti e Discipline Umanistiche
- Studi Internazionali e Globalizzazione
- Conservazione e Gestione dei Beni Culturali

Altro:

Frequenti un corso di laurea triennale o magistrale?*

- Triennale
- Magistrale

Altro:

Sei studente lavoratore?*

- Sì
- No

Se sì, qual è la professione?

Sezione 2 - ASPETTI COGNITIVI: PENSIERI E CREDENZE

Cos'è per te la disabilità?*

Pensando al termine disabilità, scrivi la prima parola che ti viene in mente.*

Se pensi ad una persona con disabilità, a quale disabilità pensi prima?*

- Penso ad una persona con difficoltà di movimento (in sedia a rotelle o limitata nella mobilità)
- Penso ad una persona con disabilità sensoriale (ad esempio sorda o cieca)
- Penso ad una persona con disabilità intellettiva (ritardo mentale, demenza, sindrome di Down...)
- Penso ad una persona con disabilità relazionale e affettiva (autismo)
- Penso ad una persona con disabilità psichica (ad esempio, con schizofrenia)

- Penso ad una persona con disabilità comunicativa (assenza di linguaggio verbale)
- Penso ad una persona con una combinazione di due o più delle precedenti

Altro:

Qual è il tuo primo pensiero di fronte ad una persona giovane o adulta, apparentemente integra, con disabilità motoria (costretta sulla sedia a rotelle o con bisogno di stampelle/bastone o con difficoltà di camminare)?*

- Che potrebbe aver avuto un incidente
- Che potrebbe avere una malattia dalla nascita
- Che potrebbe aver contratto una malattia neurologica da bambino

Altro:

Conosci qualcuno con disabilità? (Parenti o amici)*

- Sì
- No
- Io stesso/a sono un soggetto con disabilità

Se sì, con che tipo di disabilità?*

- Motoria
- Sensoriale
- Intellettiva
- Relazionale
- Psicica
- Comunicativa

Plurima (almeno due delle precedenti)

Altro:

Pensi che il fatto di avere familiari, parenti o amici con disabilità, renda le persone più sensibili a questa tematica? Rispondi indicando quanto sei d'accordo con questa affermazione, segnando l'opzione che ritieni più veritiera, in una scala di valori da 1 a 6, dove 1 indica "per niente" e 6 indica "moltissimo".*

Per niente 1 2 3 4 5 6 Moltissimo

Hai mai avuto un compagno di classe con disabilità?*

Sì

No

Se sì, ti ricordi come si chiamava?

Sì

No

Sei a conoscenza dell'esistenza delle "Invisible Body Disabilities", ovvero malattie croniche invalidanti e disabilitanti, ma apparentemente non visibili, quali ad esempio il Morbo di Crohn, la Colite Ulcerosa e l'Endometriosi?*

Sì

Abbastanza

Non so esattamente di cosa si tratti, ma ne ho sentito parlare

No, ma vorrei saperne di più

No, e al momento sinceramente non mi interessa approfondire

Altro:

Specifica la tua zona di provenienza*

- Nord Ovest
- Nord Est
- Centro - Sud
- Isole

Ora segna la risposta più rappresentativa: trovi che ci sia accettazione delle persone con disabilità nella società, in base alla tua zona di provenienza?*

- Sì, molto: c'è disponibilità all'aiuto e al sostegno per queste persone, che in genere sono bene accettate
- Sì, poco: c'è accettazione soprattutto a parole, nei fatti si tratta di persone spesso emarginate
- No, per nulla: la disabilità fa paura, e queste persone si ritrovano quasi sempre discriminate e sole

Sindrome di Down; Malattia di Parkinson; Sclerosi Multipla; Autismo. Sapresti spiegare, anche approssimativamente, cosa sono le 4 condizioni cliniche specificate? Indicalo segnando il grado della tua conoscenza con una scala di valori da 1 a 6, dove 1 significa "per niente" e 6 "moltissimo".*

- Sindrome di Down..... Per niente 1 2 3 4 5 6 Moltissimo
- Malattia di Parkinson..... Per niente 1 2 3 4 5 6 Moltissimo
- Sclerosi Multipla..... Per niente 1 2 3 4 5 6 Moltissimo
- Autismo..... Per niente 1 2 3 4 5 6 Moltissimo

Sezione 3 - ASPETTI EMOTIVI ED AZIONI

RISPONDI ALLE SEGUENTI DOMANDE PRESENTI IN QUESTA SEZIONE
SOLO SE STAI FREQUENTANDO O HAI FREQUENTATO IL PF 24 CFU E
VORRESTI DIVENTARE INSEGNANTE DOPO LA LAUREA

Come ti senti principalmente di fronte ad un ragazzo/ragazza, della tua stessa età, con disabilità?

- Mi impietosisco e penso alle sue difficoltà.
- Se sono suo amico tendo a proteggerlo.
- Non so come reagire e rapportarmi, non riesco ad essere spontaneo.
- Penso che, molte volte, hanno dei privilegi che anch'io vorrei avere.
- Raramente mi viene da pensare alle sue abilità, potenzialità o a quello che sa fare, piuttosto tendo a pensare a tutto quello che non riesce a fare.
- Alcuni ragazzi con disabilità sono maleducati.

Altro:

Indica i tuoi sentimenti, attitudini e preoccupazioni riguardanti la disabilità, in una scala di valori compresa da 1 a 6, dove 1 indica “totalmente in disaccordo” e 6 indica “totalmente d'accordo”.

-Trovo difficile superare lo shock iniziale quando incontro persone con serie disabilità fisiche

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Ho paura di guardare in volto una persona con disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Tendo ad avere contatti di breve durata con le persone con disabilità e ad interromperli il prima possibile

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Mi sentirei malissimo se avessi una disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono preoccupato del fatto che, se avrò studenti disabili nella mia classe, la mia mole di lavoro aumenterà

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono preoccupato del fatto che, con studenti disabili nella mia classe, sarò più stressato

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono preoccupato del fatto che gli studenti disabili non saranno accettati dal resto della classe.

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono preoccupato del fatto che non ho le conoscenze e le abilità necessarie per insegnare a studenti con disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

Pensi che le persone con disabilità richiedano più attenzioni e cure e non debbano quindi essere trattate alla pari degli altri?

Sì

No

Rifletti sui sentimenti che provi solitamente di fronte ad un soggetto con disabilità, poi indica quanto riflettono il tuo stato d'animo i sentimenti sotto elencati, in una scala di valori compresa tra 1 e 6, dove 1 indica "per niente" mentre 6 indica "moltissimo".

-Solidarietà (per tutte le difficoltà e problemi)

Per niente 1 2 3 4 5 6 Moltissimo

-Desiderio (di rendermi utile e aiutare)

Per niente 1 2 3 4 5 6 Moltissimo

-Ammirazione (per la forza di volontà e determinazione che la persona dimostra)

Per niente 1 2 3 4 5 6 Moltissimo

-Tranquillità (perché ho spesso a che fare con persone con disabilità)

Per niente 1 2 3 4 5 6 Moltissimo

-Paura (all'idea di poter trovare me o qualcuno della mia famiglia nelle medesime condizioni)

Per niente 1 2 3 4 5 6 Moltissimo

-Timore (di poter involontariamente offendere o ferire con parole o comportamenti inopportuni)

Per niente 1 2 3 4 5 6 Moltissimo

-Indifferenza (il problema non mi tocca)

Per niente 1 2 3 4 5 6 Moltissimo

Quali sono le disabilità che ti aspetti di incontrare più frequentemente nella tua futura pratica professionale?

Indica le tue preoccupazioni e paure relative a specifiche disabilità, in una scala di valori compresa tra 1 e 6, dove 1 indica “totalmente in disaccordo” mentre 6 indica “totalmente d'accordo”.

-Non saper comunicare con gli alunni sordi o non verbali

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Non saper gestire problematiche comportamentali (ADHD, DOP, Autismo, ecc)

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Affrontare casi molto difficili (Autismo, paralisi cerebrali, quadri sindromici complessi ecc.)

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Non conoscere la LIS o altri codici gestuali

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Trovarmi in disaccordo con i colleghi

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Trovarmi in disaccordo con le famiglie

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sentirmi inadeguato

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

Hai avuto esperienze come docente di sostegno?

Sì

No

Ti piacerebbe diventare/continuare ad essere docente di sostegno?

Sì

No

Altro:

Indica la tua percezione di autoefficacia, in una scala di valori compresa da 1 a 6, dove 1 indica “totalmente in disaccordo” e 6 indica “totalmente d'accordo”.

-Sono sicuro di essere in grado di pianificare attività di apprendimento in modo da rispondere ai bisogni individuali degli studenti con disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono sicuro di essere in grado di prevenire comportamenti di disturbo in classe prima che essi si realizzino

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono sicuro di essere in grado di gestire studenti che sono fisicamente aggressivi

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono sicuro di essere in grado di coinvolgere i genitori di bambini con disabilità nelle attività scolastiche

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono in grado di collaborare con altri professionisti (insegnanti di sostegno, logopedisti, ecc.) nella redazione di piani educativi per studenti con disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

Ti sei avvicinato maggiormente al mondo della disabilità attraverso:

I corsi validi per ottenere i 24 cfu

I corsi previsti dal tuo indirizzo di studi

Conoscevo già il problema della disabilità per conoscenze personali (io stesso, familiari o amici)

Interesse personale

Altro: _____

Sezione 4 - ASPETTI EMOTIVI ED AZIONI

RISPONDI ALLE SEGUENTI DOMANDE PRESENTI IN QUESTA SEZIONE SOLO SE STAI FREQUENTANDO UN CORSO DI LAUREA IN POLITICHE PUBBLICHE E CAMBIAMENTI SOCIALI E VORRESTI DIVENTARE UN OPERATORE O ASSISTENTE SOCIALE DOPO LA LAUREA.

Come ti senti principalmente di fronte ad un ragazzo/ragazza, della tua stessa età, con disabilità?

Mi impietosisco e penso alle sue difficoltà.

- Se sono suo amico tendo a proteggerlo.
- Non so come reagire e rapportarmi, non riesco ad essere spontaneo.
- Penso che, molte volte, hanno dei privilegi che anch'io vorrei avere.
- Raramente mi viene da pensare alle sue abilità, potenzialità o a quello che sa fare, piuttosto tendo a pensare a tutto quello che non riesce a fare.
- Alcuni ragazzi con disabilità sono maleducati.

Altro:

Indica i tuoi sentimenti, attitudini e preoccupazioni riguardanti la disabilità, in una scala di valori compresa da 1 a 6, dove 1 indica “totalmente in disaccordo” e 6 indica “totalmente d’accordo”.

-Trovo difficile superare lo shock iniziale quando incontro persone con serie disabilità fisiche

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Ho paura di guardare in volto una persona con disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Tendo ad avere contatti di breve durata con le persone con disabilità e ad interromperli il prima possibile

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Mi sentirei malissimo se avessi una disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono preoccupato del fatto che potrei lavorare con adulti disabili.

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono preoccupato del fatto che potrei lavorare con minori disabili.

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono preoccupato del fatto che potrei lavorare con anziani con problemi di salute mentale

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

-Sono preoccupato del fatto che potrei lavorare con minori con problemi di salute mentale

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d'accordo

Pensi che le persone con disabilità richiedano più attenzioni e cure e non debbano quindi essere trattate alla pari degli altri?

Sì

No

Rifletti sui sentimenti che provi solitamente di fronte ad un soggetto con disabilità, poi indica quanto riflettono il tuo stato d'animo i sentimenti sotto elencati, in una scala di valori compresa tra 1 e 6, dove 1 indica "per niente" mentre 6 indica "moltissimo".

-Solidarietà (per tutte le difficoltà e problemi)

Per niente 1 2 3 4 5 6 Moltissimo

-Desiderio (di rendermi utile e aiutare)

Per niente 1 2 3 4 5 6 Moltissimo

-Ammirazione (per la forza di volontà e determinazione che la persona dimostra)

Per niente 1 2 3 4 5 6 Moltissimo

-Tranquillità (perché ho spesso a che fare con persone con disabilità)

Per niente 1 2 3 4 5 6 Moltissimo

-Paura (all'idea di poter trovare me o qualcuno della mia famiglia nelle medesime condizioni)

Per niente 1 2 3 4 5 6 Moltissimo

-Timore (di poter involontariamente offendere o ferire con parole o comportamenti inopportuni)

Per niente 1 2 3 4 5 6 Moltissimo

-Indifferenza (il problema non mi tocca)

Per niente 1 2 3 4 5 6 Moltissimo

Quali sono le disabilità che ti aspetti di incontrare più frequentemente nella tua futura pratica professionale?

Indica le tue preoccupazioni e paure relative a specifiche disabilità, in una scala di valori compresa tra 1 e 6, dove 1 indica “totalmente in disaccordo” mentre 6 indica “totalmente d’accordo”.

-Non saper comunicare con i soggetti sordi o non verbali

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Non saper gestire problematiche comportamentali (ADHD, DOP, Autismo, ecc)

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Affrontare casi molto difficili (Autismo, paralisi cerebrali, quadri sindromici complessi, ecc)

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Non conoscere la LIS o altri codici gestuali

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Trovarmi in disaccordo con i colleghi

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Trovarmi in disaccordo con le famiglie

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Sentirmi inadeguato

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

Pensi che la tua professione futura richieda un impegno molto intenso dal punto di vista fisico?

Sì

No

Indica la tua percezione di autoefficacia, in una scala di valori compresa da 1 a 6, dove 1 indica “totalmente in disaccordo” e 6 indica “totalmente d’accordo”.

-Sono sicuro di essere in grado di pianificare attività di apprendimento in modo da rispondere ai bisogni individuali dei soggetti con disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Sono sicuro di essere in grado di prevenire comportamenti di disturbo prima che essi si realizzino

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Sono sicuro di essere in grado di gestire soggetti che sono fisicamente aggressivi

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Sono sicuro di essere in grado di coinvolgere i genitori di bambini con disabilità nelle attività

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

-Sono in grado di collaborare con altri professionisti (insegnanti di sostegno, logopedisti, ecc.) nella redazione di piani educativi per soggetti con disabilità

Totalmente in disaccordo 1 2 3 4 5 6 Totalmente d’accordo

Ti sei avvicinato maggiormente al mondo della disabilità attraverso:

I corsi validi per ottenere i 24 cfu

I corsi previsti dal tuo indirizzo di studi

Conoscevo già il problema della disabilità per conoscenze personali (io stesso, familiari o amici)

Interesse personale

Altro: _____

APPENDIX B: The idea of disability.

3) Cos'è per te la disabilità?(89 risposte)

Una condizione di difficoltà. (2 risposte)

Una difficoltà più per chi si relaziona con la persona disabile che per la stessa.

Una diversità che arricchisce.

Una persona che fa qualcosa in modo diverso dagli altri.

Una "deviazione" dello sviluppo normotipico.

Una condizione tale per cui chi ne è portatore ha dei bisogni ulteriori rispetto a coloro che sono definiti "normodotati".

Una difficoltà di carattere somatico o psicologico che non necessariamente deve essere d'ostacolo allo sviluppo integrale dell'individuo.

Una condizione che implica la messa in atto di strategie ad hoc.

Una caratteristica fisica o mentale che contraddistingue un determinato individuo.

Si tratta di un handicap, un ostacolo che in un modo o nell'altro rende più complesso ad una persona svolgere certe attività, a livello motorio, sensoriale o cognitivo. Tuttavia non penso si tratti e non debba essere trattata come una caratteristica della persona e quindi essere fonte di compatimento o discriminazione.

Un valore aggiunto, se compreso ed accettato.

Una limitata capacità fisica o cognitiva derivante da un handicap che può essere più o meno grave.

Una caratteristica di una persona.

Una condizione psichica o fisica legata a una menomazione individuale e a barriere che dipendono dalla società.

Avere qualcosa che manca.

Una condizione.

Una condizione di vita differente.

Una diversità che va compresa.

Una forma particolare di vita.

Una condizione di invalidità.

Una differenza.

Un limite.

Persone inabili.

Sono tutti quegli impedimenti, restrizioni o carenze, conseguenti o meno da una menomazione, che portano difficoltà nel poter svolgere determinate attività.

Un nuovo modo di vedere ed approcciare alle cose.

Una condizione fisica e/o mentale che presenta più sfide rispetto a quella di chi non la vive, una su tutte: l'inclusione sociale che, se non esiste, rischia di fare sentire certamente il disabile come una persona di serie B... aggiungendo ostacoli e malessere alle già citate difficoltà proprie della malattia.

Una condizione che pone dei limiti.

Uno stato di difficoltà in cui versa una persona.

Una condizione che obbliga a dover superare degli ostacoli.

Una condizione che può essere invalidante e che può limitare l'autonomia di una persona.

Una difficoltà.

Un problema da affrontare che non sempre si risolve.

Una condizione difficile.

Un modo alternativo di essere.

Difficoltà fisiche e psichiche che non permettono la totale autosufficienza, anche se solo ristretta a determinati e specifici ambiti.

Una limitazione nella capacità/possibilità di svolgere determinate azioni.

Uno svantaggio.

La disabilità deriva dalla menomazione fisica o psichica (per esempio un arto non funzionante). In sé la disabilità si presenta quando ci sono delle barriere che pongono limiti alla persona con una menomazione.

È un problema a livello psicologico o fisico che presenta un soggetto, che necessita di cure e accortezze adeguate.

Spesso un ostacolo.

Una forma di diversità positiva.

Un problema.

Una mancanza fisica o mentale.

Avere problemi fisici/psicologici/ cognitivi.

Un problema che non sempre viene risolto.

È una condizione più o meno grave.

Spesso è un limite.

Una condizione che rende più difficile o impedisce lo svolgimento di attività che sono svolte dalla maggior parte delle persone che non hanno una disabilità.

Più in generale ritengo che una persona disabile sia una persona limitata nelle scelte e nelle opportunità a causa della società che gliele impone.

Condizione di ridotta capacità di svolgere un'attività.

È una condizione fisica o funzionale che pone la persona in una posizione di svantaggio nell'affrontare la vita quotidiana (sociale, lavorativa ecc.).

Un fattore non controllabile dalla persona che influisce sulle abilità psicofisiche.

Una condizione che non sempre e non necessariamente porta all'esclusione e marginalizzazione della persona che ne è affetta, ma che di certo costringe la stessa a vivere con qualche difficoltà in più rispetto alle altre persone.

Un problema che riguarda tutti.

Un'eccezione più o meno penalizzante a quella che viene indicata come normalità di vivere.

Una difficoltà riscontrabile in aspetti appartenenti alla vita quotidiana ritenuti molto elementari. Il disabile, sia fisico che mentale, può non essere in grado di svolgere mansioni da noi ritenute banali o di comportarsi adeguatamente nei vari contesti sociali, ma dimostrare delle capacità fuori dal comune.

Una situazione che ti porta a vivere in un modo più complicato la vita quotidiana.

Per me la disabilità è una condizione in cui la persona si può trovare causata dalla combinazione tra menomazione e l'ambiente in cui la persona vive, ricco di risorse ma anche e soprattutto di numerose barriere ed ostacoli.

La capacità ridotta o l'incapacità di svolgere certi compiti a causa di problematiche fisiche o psichiche.

Un insieme di limiti.

Avere abilità differenti rispetto a "tutti", che spesso non vengono riconosciute e coltivate.

Deficit di abilità.

Restrizione o limitazione nel fare un'azione.

La difficoltà o l'incapacità di compiere delle azioni considerate normali dalla società.

Un modo diverso di funzionamento del corpo o cognitivo rispetto alle persone.

Una caratteristica che va valorizzata.

La perdita di una determinata funzione che limita la persona.

Difficile rispondere a tale domanda, soprattutto sinteticamente, ma proverò affrontare la risposta in base alle mie esperienze e osservazioni personali (al momento sono digiuno di trattazioni accademiche sull'argomento). Ad ogni modo credo sia un macroinsieme dove si inseriscono situazioni tra loro anche profondamente diverse. In generale, comunque, sono portato a individuare la disabilità come un indicatore medico e sociale di svariate difficoltà che una persona può presentare in relazione a un'esistenza costruita per un idealtipo "sano", un normodotato ideale (nel senso che è proprio un'idea platonica) che rappresenta la somma delle "statistiche medie" della popolazione umana considerata sana da un punto di vista clinico. Chi presenta caratteristiche altre, che non gli permettono di affrontare la vita pensata (sbrigativamente) per l'idealtipo con i ritmi, i modi e gli obiettivi prefissati dalla comunità in cui si trova a vivere (indipendentemente dalla loro validità) presenta una qualche forma di disabilità. Quindi se, ad esempio, uno scrittore del romanticismo tedesco fosse stato magicamente catapultato in una società di raccoglitori-cacciatori dell'Amazzonia, la sua totale inadeguatezza alla vita pensata per l'idealtipo amazzonico sarebbe probabilmente considerata dai suoi rappresentanti (vuoi per motivi di prestanza fisica, di capacità di orientarsi nell'ambiente, di reazioni emotive) probabilmente come una disabilità, ovvero una diversità che lo mette in difficoltà ad affrontare quel tipo di vita. I

raccoglitori-cacciatori, invece, sarebbero molto più vicini a tale idealtipo (anche se mai completamente aderenti, poiché ogni persona è portatrice di differenze personali uniche) e si considererebbero tra loro "normali", rafforzando così l'immagine co-costruita dell'idealtipo amazzonico, espunte le piccole e trascurabili anomalie individuali delle persone in carne e ossa; il romantico tedesco, presumibilmente, presenterebbe una quantità e una qualità di anomalie personali tali da rendere i suoi comportamenti non assimilabili a tale idea "di come affrontare la vita per non soccombere o rimanere indietro in quel contesto". Credo poi che, essendo ogni disabilità composta da componenti qualitative e quantitative, alcune disabilità siano un po' più afferenti al quantitativo (penso a quelle fisiche, cioè quante cose riesci a fare rispetto a un corpo "normodotato"), mentre altre siano più di tipo qualitativo (e allora penso a quelle della mente in senso lato, quindi a come fai le cose rispetto a un "normodotato"). Da ciò l'importanza di discutere assieme ai portatori di handicap su cosa sia l'inclusione sociale e sulle molteplici strade da percorrere per inverarla, abbandonando l'idea che la società e la pratica sociale escano immutate da tale confronto. Fine del papiro.

Un problema con cui convivere.

La condizione delle persone che a contatto con l'ambiente hanno delle difficoltà nel svolgere azioni che la maggior parte delle persone svolgono normalmente.

Un deficit di tipo motorio, psichico, sensoriale o di altro genere cui una persona può essere affetta anche sin dalla nascita.

Una condizione che può essere sia fisica che mentale in cui le persone, o dalla nascita o per via di un un'incidente, si ritrovano a vivere e che rende loro più difficile vivere la loro vita in maniera autosufficiente.

La disabilità è una condizione dell'essere.

Difficoltà a svolgere autonomamente processi considerati "normali" o quotidiani.

Un problema per il soggetto e la sua famiglia.

Un termine ombrello che implica una difficoltà.

Un limite di tipo fisico o mentale che può potenzialmente rafforzare alcuni aspetti dell'individuo.

Condizione di un soggetto che ha una ridotta capacità di interazione con l'ambiente che lo circonda.

Una limitazione.

Avere un handicap.

Un'incapacità o una grave difficoltà nello svolgimento di un compito.

Un campo ancora troppo sconosciuto.

Una parola che a livello etimologico comunica mancanza, ma che non riflette appieno la condizione di una persona. Lavorando con bambini "disabili" ho capito che quello che a loro "manca" viene compensato con altre caratteristiche importanti che fanno dimenticare la loro mancanza.

In senso generale, lo considero una condizione di svantaggio dovuta a un deficit di diversa natura (fisico, oppure mentale o sociale, anche se propriamente è meglio definire questo ultimo caso un handicap)

Dei problemi fisici o mentali.

Vedere il mondo con occhi diversi.

Una persona limitata nello svolgere attività intellettive e/o fisiche.

Una condizione dettata da un contesto non inclusivo che in determinate situazioni di salute sfavorevoli riguarda tutti.

