

**Youth Club/Organisation participants verses non-participants:
Comparing socialisation, inclusion skills, and attitudes towards
their peers with disabilities.**

Hayley Burke

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Supervisor: Emma Harkin

Head of Department: Dr. S. Eccles

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Department of Psychology

DBS School of Arts

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Abstract:

The aim of the study is to examine the difference of children who participate in youth Club/organisation verses non-users. The variables include the comparison of socialisation, inclusion, and attitudes towards their peers with disabilities. The methods consisted of a quantitative, question design between participants (n=70), aged between seven and eleven years (m= 8.91)

The materials used consisted of: Children's attitudes towards Down Syndrome (1993), Children's Social Distance from Handicapped Persons Scale and McGill Friendship Questionnaire-RA (1997)

The result of one hypothesis was proven, hypothesis 2. In addition, other significant results arose such as the impact on gender towards attitudes towards children with disabilities and gender in relation to inclusion. Scores on friendship remained positive regardless of participation in clubs/organisations.

Chapter 1:

Introduction

The title for this research project is *Youth Club/organisation user's verses non-users:*

Comparing socialisation, inclusion skills, and attitudes towards their peers with disabilities.

The primary objective of this study is to examine the difference between participants in youth clubs/organisations, their socialisation skills, inclusion, and attitudes of children with disabilities compared to non-users. Socialisation can also be identified as friendships, throughout the essay socialisation and friendships will be classified as similar variables.

Carl Jung, 1875-1961, emphasises the importance of the persona. The persona is a mask that represents our public image that individuals show to the public. The mask that we

can show can either be positive or negative impressions. The mask plays a role in manipulation of people's opinions and behaviours. (Orr, P, 2012)

In Ireland, discrimination is identified as the “*differential treatment of individuals or groups based on arbitrary or ascriptive criteria....disability*” (Eurofound, 2009). According to the National Disability Authority in Ireland, a survey conducted in 2006, the awareness of people with physical and mental illness has increased from its previous research conducted in 2001. This is a positive outcome in addition; the awareness of the National Disability Authority itself has risen by 20%. (NDA, 2006)

The Department of Justice and Law Reform state that they work towards awareness campaigns “*to promote awareness-raising activities in relation to people with disabilities.*” This event falls on the first week in December each year, United Nation's International Day for Persons with Disabilities. (NDA, 2011) Referring to the target sample of participants that will be researched, do they or will they understand the purpose of this campaign?

The research will cover four main topics 1) youth clubs and organisations, 2) socialisation and friendships, 3) inclusion and 4) attitudes towards children with disabilities. In each topic, there will be a definition, benefits, and disadvantages with accompanying theories and previous research.

1.0 Youth clubs and organisations

1.1 What are youth clubs and organisations?

Recreational activities such as youth clubs and organisations are formally organized and structured. Clubs and organisations can be considered to have similar characteristics however, they have significant differences. A youth club consists of a group of children who

are associated through a shared interest or activity whereas youth organisations are internationally recognised.

Clubs and organisations are developed within communities and both have supervision from adults. There can also be registration fees to cover expenses such as hall rentals and insurance, and in some clubs and organisations, uniforms have to be purchased. Parents and guardians must complete forms regarding their children's information, contact details, and health. The duration allocated to meetings and frequency of the meetings is dependent on the particular club and organisations, some may require two meetings a weeks or weekend outings.

The adults and supervisors are labelled as leaders or coaches for examples in scouting Ireland the adults are called leaders and in soccer clubs, they are called coaches. Note that the leaders and coaches are often giving up their time as volunteers and are not paid. They are known to participate for the enjoyment and the passing of knowledge and skills down to others.

According to Citizens information, "*Youth clubs are local groups for young people, usually aged between 12 and 18 years, with a number of adult leaders. Youth club programmes include recreational and educational activities and give young people experience of organising their own activities in a democratic way.*" However, this is not the case as in some clubs such as Beavers have members as young as six years participating, (Scouting Ireland, 2013)

In Ireland, there are specific youth clubs that deal with particular issues such as drugs and alcohol abuse; Foróige, a national voluntary organisation that receives core funding from the Department of Education and Skills, runs these. However, there are clubs that are set up in communities meeting the needs for recreational use such as drama, soccer, GAA and dancing to name a few. Foróige is not aimed toward the age group that is being examined during this

project however it is important to highlight that the government recognises the need for youth organisations that implement and prevent severe problems arising within the teenage population. (Foróige)

1.2 Types of youth clubs in Ireland and worldwide

There are many clubs in Ireland, as well as universal recognised, such as sports clubs, speech, drama, and music. Sports clubs, which are considered most popular, are; Basketball, Sailing, Gaelic Athletic Association, Golf, Horse riding, Tennis, Rugby and Soccer. They are all popular with both girls and boys of any age. Music consists of children singing and playing musical instruments such as guitar and the piano. Speech and drama consists of acting, dancing, singing, and performing.

1.3 Types of youth organisations in Ireland and worldwide

The World Organisation of Scout Movement is considered one of the largest youth organisations in the world consisting of over 30 million participants in 161 countries. In Ireland, there are nearly 500 groups throughout the country. For such a small population, Ireland has a large amount of groups. (WOSM, 2011)

Youth Organisations that are known commonly and widely known are World Association of Girl Guides and Girl Scouts, World Alliance of Young Men's Christian Associations (YMCA), World Young Women's Christian Association (YWCA), International Federation of Red Cross and Red Crescent Societies, International Award Association and International Youth Foundation. (Fletcher, A., 2005)

The benefits to children who participate in clubs and organisations will be discussed in section 2.3 under the benefits of socialisation.

2.0 Socialisation and friendships

According to Donohoe and Gaynor, 2007, socialisation can be divided into two main stages. The first being primary agents, within this stage children begin to develop the basic patterns of acceptable behaviours, appropriate language and social skills. They learn these skills through three core groups, parents, close family members, and main carers. Within the Child Care Act 1991, it highlights the importance of socialisation and it provides staff-child ratios in early childcare settings to optimise the benefits of socialisation development.

The second stage is secondary agents, which is where children are exposed to the wider community such as neighbours, friends, schools and clubs. Children begin to adapt to the wider world and learn how to relate to a variety of individuals in the community in different situations. Peer and friends have a huge influence in this area of development. (Donohoe, J., & Gaynor, F., 2007 pg. 179-180) This stage is where the focus lies. The primary stage is where children learn socialisation and develop friendships, which are essential in order for them to develop and maintain these skills throughout life.

Social learning theory plays a role in this research as it explains that learning is not completed by the individuals and the environment alone but with the interaction of peers. Social learning has an influence on attitudes and behaviours. Bandura (1977) discusses that children will model their behaviour through role models, i.e. a sports star or a celebrity that they observe. This can lead to positive reinforcement as well as punishment depending on the desired behaviour. This has a link with Skinner's Operant Conditioning (1957). Rewarding for positive behaviour that will continue rather than a punishment that will cease. Rewarding a child can have a positive outlook on future behaviours and attitudes towards people and situations.

2.1 What is socialisation?

John B. Watson and B.F. Skinner believed that learning occurs through applying reinforcement to an individual's behavioural. Environmental variables influence an individual's immediate behaviour. The behaviours changed because the environment reinforces certain behaviours and ignores others such as unwanted or negative behaviour.

Both emphasise the importance that learning occurs in the absence of rewards. Observational learning and vicarious conditioning take place. Observational learning occurs when a child mimics or models others such as a sports star or a celebrity, someone the child looks up to. Vicarious conditioning is the emotional reaction of a child when they witness an adult, for example a parent, experience a reward or a punishment of behaviour. The child learns that by performing that behaviour they will either be rewarded or punished.

Behaviour can be explained in terms of interaction between the individual and the environment as well as other individuals. An individual influences the environment and the environment influences the individual, in turn, we choose how to behave in particular

situations. Socialisation and friendships are developed through this process of social learning theory.

Within the research gathered there has been a key issue and concern that has risen within two key areas of research and it is the area of socialisation that is dependent on adults and the influences and impact that they have on socialisation. Socialisations concerning adults are within the family environment (Modell et al. 1997) cited in Solish, A., Perry, A., and Minnes, P., 2010) for those with disabilities are a large percentage of 73%. Odom, S.L, (2002) key findings within the study focuses on the impact of inclusion that is dependent on the level of disabilities the individual has and the role of the mentor's interaction within the social activity.

2.2 What are the benefits and limitations of socialisation?

There are many benefits of socialisation and friendships that can develop in early childhood which include a wide range such as quality of life, social and emotional development, companionship, intellectual growth, and social support (Price & Ladd 1986; Geisthardt et al. 2002 cited in Solish, A., Perry, A., and Minnes, P., 2010) Companionship and friendship is key and is the main benefit for socialisation.

In addition, individuals who participate in activities, which include social interactions, benefit by developing friendship, skills in socialisation, long-term mental and physical health and well as self-worth (Modell et al 1997; King et al. 2003; Weiss et al. 2003; Cowart et al. 2004; Buttimer & Tierney 2005; Law et al. 2006) Cited in Solish, A., Perry, A., and Minnes, P., 2010) The above two points are repeating the same points of benefits of socialisation.

An obvious disadvantage of socialisation could be considered the opposite, which is isolation. Lack of friends and friendships, few social activities and loneliness are common problems that individuals with disabilities face during their life span (Newton & Horner 1993

cited in Solish, A., Perry, A., and Minnes, P., 2010). Individuals without disabilities also face the same problems.

2.4 How to promote socialisation?

Promotion of friendship development in children with disabilities the need for social interaction is a key factor according to Kampert and Goreczny, 2007. (Cited in Solish, A., Perry, A., and Minnes, P., 2010) A recommended method of promoting socialisation and friendships is through “*participation in formal and informal activities with peers*” (Solish, A., Perry, A., and Minnes, P., 2010)

2.5 Do age and gender have an impact on socialisation?

According to a study by Van Biesen.D., Busciglio, A., and Vanlandewijck, Y. of attitudes towards inclusion of children with disabilities: they implemented an “A Paralympic School Day” within Flemish elementary school children. The study compared pre and post CAIPR-R questionnaires of three schools, the results showed that gender had an impact on both attitudes and socialisation; it confirmed that girls are more positive attitudes towards disabilities than boys are and have better socialisation skills.

However, the study is focused towards physical education in an educational setting and included other variables such as previous exposure and competitive aspect on attitudes. It highlighted that attitudes towards disabilities changed due to the implementation of a programme of inclusion. Gender has an impact of socialisation when it comes to inclusion of individuals with disabilities. Age was not a variable that had an impact on socialisation. The variable of previous exposure is an import factor to consider that can be noted within attitudes towards disabilities; this factor can be examined within the questionnaires given to the children.

2.6 Developmental stages of socialisation and friendships

At the age of two years, children begin to demand one on one attention from caregivers and shows affection. With regards to play children copy others especially adults and older children, this refers back to Bandura's modelling. Children mainly play beside other children rather than with but they begin to include others in games such as chasing. They also become excited with other children around.

Aged three years children begin to play with others over short periods. Again, they still copy adults and friends, they show affection towards others without being prompted to do so, they show concerns for a crying friend. While playing games children take turns.

Aged four years children develop imagination and show fantasy elements in play. They become more creative in make believe. While playing with others they cooperate well and would rather play than be by themselves.

Aged 5 years fantasy play is more prominent. They want to please friends and be like their friends, again modelling occurs. While playing they follow and agree with rules. (United Cerebral Palsy, My Child without limits, 2013)

Children with special needs such as Attention Deficit Hyperactivity Disorder and Autism need extra help in developing social skills. Due to the individual disorders characteristics of hyperactivity, impulsivity, and lack of knowledge and awareness of social cues poor relationships develop. Therefore, children do not learn or develop social skills through experience or the environment. They have difficulty processing information from the environment and have difficult self-expressing this can lead to isolation. (Myers, R., 2012)

3.0 Inclusion:

The UN Convention on the Rights of the Child, Article 23, states that “*A mentally or physically, disabled child should enjoy a full and decent life in conditions that ensure dignity, promote self-reliance, and facilitate the child’s active participation...*” In addition. ... “*Learn life and social development skills to facilitate their full and equal participation in education in education and as members of the community.*” according to Article 24, UN Convention on the Rights of Persons with Disabilities. This statement can be universally used for children who are non-disabled.

The vast amount of research that was examined focused on the educational setting of inclusion of children with disabilities rather than inclusion within a recreational setting. However, educational settings can set an example for recreational settings on how they promote inclusion. Inclusive education, again the word education is used, “*encourages the acceptance of children with disabilities by their non-disabled peers, and can bring about social benefits for all pupils.*” (Vignes, C.; Coley, N. et al, 2008, pg182)

This is an important statement as it highlights the idea of social benefits of both able bodied and disabled students working together. Negative peer attitudes can lead to a “*major barrier to full social inclusion of students with disabilities in schools.*” (Vignes, C.; Coley, N. et al, 2008, pg182) Therefore, it is important to promote positive attitudes towards children with disabilities and to measure the attitudes of youth organisation users and non-

users. The recommendation that could arise is the implementation of an awareness campaign.

Miller and Katz (2002) defined inclusion as: *“a sense of belonging: feeling respected, valued for who you are; feeling a level of supportive energy and commitment from others so that you can do your best.”* Inclusion involves *“valuing all individuals, giving equal access and opportunity to all, and removing discrimination and other barriers to involvement”* (Inclusion, 2013)

3.1 What are the benefits of inclusion?

The benefits of inclusion are mainly aimed towards inclusion of children with disabilities as previously stated. United Cerebral Palsy of Middle Tennessee provides benefits of inclusion *“for children with disabilities”* and *“inclusion for typically developing peers.”* Inclusion, for individuals with disabilities, is a sense of belonging into a group; it can provide a safe environment and a stimulating environment for growth and development. Inclusion allows an individual to form an identity within the community. The main benefit of inclusion, which is reported throughout research, is the development of social skills and friendships, which provides peer role models.

Benefits of inclusion, for typically developing peers, can provides opportunities to experience diversity of society, develops an appreciation that everyone has unique characteristics and abilities, develops sensitivity toward others' limitations, increases abilities to help others and develop a capacity for empathy. All of the above points have a positive effect in order to allow children to develop positive attitudes towards children with disabilities. They promote a wide range of benefits individually and collectively. (United Cerebral Palsy, 2013)

Nordstrom states that children with disabilities who participate in inclusion with their peers engage in *“more peer interaction and more advanced play, gain more in social skills,*

are less lonely and depressed, receive more social support and develop more long lasting relations”

Inclusion can also face difficulties and challenges for children with disabilities, such as becoming less engaged in interaction, have low sociometric status and few friends. (Yude, Goodman, and McConachie 1998; Nakken and Piji 2002; Diamond and Innes 2001; Nowicki and Sandieson 2002; Skar 2002; Odem et al 2004) Cited in Nordstrom, I, 2011)

3.2 How to promote inclusion and how to apply to everyone?

In order for inclusion to be promoted the concept of social inclusion as “*the goal and the process of developing the talents, skills and capabilities of children to participate in the social and economic mainstream of community life by providing the opportunities and removing the barriers for children*” (Freiler 2000). These goals must be met in order for successful inclusion to develop. Leaders and coaches must learn the concept and benefits, as well as the disadvantages, of inclusion in order to promote a positive environment for everyone involved.

The Youth Council for Northern Ireland (2007) state that encouraging participation and inclusion for young people with disabilities is done through a number of processes. The organisation of disability awareness training for young people, volunteers and staff within organisations, this in turn can create positive attitudes. The recruitment of volunteers that can provide a positive role model is essential. Ensuring that the location of the facility can facilitate access for physically impaired users.

4.0 Attitudes towards peers with disabilities.

According to Massie, 2006, “*Attitudes to disability are the major barrier to disabled peoples’ full participation...From pity, awkwardness, fear, to low expectations about what disabled people can contribute, stereotypical, and negative attitudes hold people back.*”

Throughout the research, there has been an influence and links with inclusion, socialisation, and friendships. Attitudes and behaviour are developed and influenced through the Social Learning theory, which has been discussed previously in section 2.0.

4.1 What are attitudes?

Attitudes are very complicated to define as there is no common or universal definition, they can be classified under three components affective, behavioural and cognitive. Attitudes can be defined as “*combinations of beliefs and feelings that predispose a person to behave in a certain way*” (Gleitman 1991 cited by Eby et al, 1998 cited in (Solish, A., Perry, A., & Minnes, P., 2010)). Triandis et al, (1984, p.21) cited in Solish, A., Perry, A., and Minnes, P., 2010) states, “*an attitude is an idea (cognitive component) charged with emotion (affective component) which predisposes a class of actions (behavioural component) to a particular class of social situations.*”

Variables that can affect positive attitudes can include gender differences, (Sliniger, 2000 cited in (Van Biesen, D., Busciglio, A., & Vanlandewijck, Y.)) and previous exposure to people with disabilities for example family members and friends (Block, 1995 cited in (Van Biesen, D., Busciglio, A., & Vanlandewijck, Y.)).

4.2 What are disabilities?

According to Disabled World, they state, “*a disability is a condition or function judged to be significantly impaired relative to the usual standard of an individual or group.*” The term is used to label individuals who are experiencing a limited functioning which include a range of “*physical impairment, sensory impairment, cognitive impairment, intellectual impairment, mental illness, and various types of chronic disease.*”

4.3 How are they linked?

Attitudes and disability are linked together through both positive and negative feedback that children learn from an early age i.e. from their parents. Attitudes are involved in everything that we do as human beings; they determine and govern our behaviours within the environment.

4.4 Negative and positive attitudes and the impact that they have?

Attitudes towards children with disabilities tend to be less positive than towards other children, thus forming social barriers. (Pivik, McComas, & Laflamme, 2002. Cited in Nordstrom, 2011) however, information and increased education and knowledge regard disabilities, according to Roberts & Smith, 1999, do not have an influence on positive attitudes or promote interaction. One would suggest that from an early age and being taught about diversity, inclusion children would gain positive attitudes, therefore the idea of previous exposure, and experience with disabilities must be acknowledged.

It is important to teach children and to show them how to interact with individuals that are different to them, as they do not understand. Previous exposures towards people with disabilities have no significant a role to play here. Surprisingly, Van Biesen.D., Busciglio, A., and Vanlandewijck, Y. study shows that previous experience to disabilities whether it was a family or friend and in class exposure had no significant impact on attitudes. However, one would think that it does have an impact, as children have an understanding, can show compassion, and in turn can be role models for other students. A reason for this finding

could be justified that it was a new programme that was implemented and was still in the experimental stages.

Nordstrom states that others accept children with disabilities however not in the same way as children without disabilities. They are met “*with respect and consideration,*” but experience as a person of need of support from others to function rather than their peers. However, non-disabled children can exclude children with disabilities from inclusion due to the fact they have a lack of interest, not as an active rejection. Coping mechanisms that children with disabilities form for example a report from an eleven-year-old boy acted as a ball boy while other children were playing football, this way he was part of the game, participating to a degree.

Conclusion:

The literature, which has been previously quoted, has given a wide range of information regarding youth clubs and organisations, socialisation, inclusion and children’s attitudes

towards their peers with disabilities. There was an overwhelming amount of literature based around the four themes however, the difficulty with the literature was requiring the research based around social settings of inclusion rather than educational settings. Unfortunately, there was little available. The focuses were on children with disabilities more so than children without disabilities.

Selecting the literature that was appropriate to the topic was mainly from the United States of America or the United Kingdom, there is very little research conducted in the Republic of Ireland. Within the research gathered there is a limited amount found on inclusion and attitudes towards peers with disabilities in a social context, the main focus is on educational setting. The aim for this research section was to evaluate the previous research based around participants and non-participants within a recreational setting of a youth club and organisations, in addition evaluating and comparing their socialisation and friendships skills, as well as inclusion and attitudes of disabilities of their peers. Each variable provided a broad range of information that had to be condensed in order to select the relevance information. However, there was little information to link the variables together for recreational settings as previously stated the focus was on educational settings. This is where the gap lies. In order for this to be met, research must be conducted with sample groups to gather statistical explanation.

Note that there is more research to this topic that needs to be conducted in order to gather a wide range of knowledge.

Aims, Objectives and Implications:

The reason why this research is being conducted is due to the vast amount of youth clubs and organisation that children participate in throughout Ireland. Within the clubs and organisation there are many different personalities and individuals that children and adults

interact with in a social setting compared to being in an educational setting. Clubs and organisations allow children to form a different identity, than the identity that they form in school. The settings can be less strict and formal with different expectations placed upon the children by the adults, allowing them to express themselves differently.

The main objective is to examine if there is any sign of discrimination towards disabilities and prevent discrimination and bullying for the future, in order to highlight an awareness campaign. In addition, to examine the differences in socialisation and friendships, and inclusion strategies of participants compared to non-users. The main goal of the project is to highlight the benefits of children who participate in youth clubs and organisations.

The research will be beneficial to parents and to youth club and organisations leaders. The research will aim to highlight the importance for children that they gain from the experience of youth clubs and organisations, building on their socialisation skills and friendships, which will benefit them throughout their adult life. Children's attitudes towards disabilities that are positive due to being in a youth organisation will remain positive throughout their lives; they may never know what it is to experience discrimination towards others: not only in relation to disabilities but also to ethnic minorities, travellers and others who regularly experience discrimination.

Hypotheses:

As previously stated, the main aim for this research project is to compare the socialisation skills, inclusion strategies, and attitudes towards peers with disabilities, between two groups of children aged between eight and twelve years, those who are youth organisation users and

those who are non-users. The aim is to determine a significant difference between the two sample groups: those who are members of a youth organisation verse those who are not.

1. Children who are involved in youth organisations have a high standard of socialisation skills due to the regular interaction with their peers compared to those who are non-users of youth organisations who have a lower standard.

2. Children who are involved in youth organisations have a wide range of inclusion strategies to deal and cope with a variety of situations compared to those who are non-users who have a limited range.

3. Children who are involved in youth organisation have a more positive attitude towards their peers who have a disability, physical and/or mental, due to the variety of children who are members of the organisations. Those who are non-users have a neutral and/or more negative attitude towards peers due to the lack of interaction in a social setting.

Chapter 2:

Methodology

Participants:

The participants (n=70) that have been used throughout the research are boys (n=34), and girls (=36), aged between seven and ten years, mean 8.91. The sample was sought out through a number of sources in order to make them a random sample. The sample group was obtained through a local co-educational national school run under Church of Ireland Management, situated in North Dublin, and an after school service and friends and family.

The total amount of participants that participated within clubs were $n= 55$ and those who do not participate in clubs were a total of $n= 15$. In an ideal situation there would be an even number of half-and-half, however due to the fact that it was random sampling there is no specific way in obtaining an even number.

Design:

The design that was used to gather the appropriate information was a quantitative, question design between participants. The participants that were used were a random sample.

The predictor variables for the first hypothesis is that children who are involved in youth organisations have a high standard of socialisation skills due to the regular interaction with their peers, whereas the criterion variables is that those who are non-users of youth organisations have a lower standard.

The predictor variable for the second hypothesis is that those children who are involved in youth organisations have a wide range of inclusion strategies to deal and cope with a variety of situations whereas the criterion variable is those who are non-users have a limited range of inclusion strategies.

The predictor variable for the third hypothesis is that children who are involved in youth organisation have a positive attitude towards their peers who have a disability, physical and/or mental, due to the variety of children who are members of the organisations. The criterion variable is that those who are non-users have a neutral and/or negative attitude towards peers due to the lack of interaction in a social setting.

Materials:

The questionnaire booklet was designed in order to gain the relevant information for the variables, and in addition, a cover page containing questions in order to gain the appropriate demographic (See Appendix A). The questions that were used were Children's attitudes

towards Down Syndrome, section one by Hugh Gash (1993), the second; Children's Social Distance from Handicapped Persons Scale (1983) and the third; McGill Friendship Questionnaire-RA (1997).

Children's' Attitudes towards Down Syndrome: (See Appendix B)

Children's Attitudes towards Down Syndrome, by Hugh Gash (1993) was taken from Measurement Instrument Database for the Social Sciences. Section one was used, as section two was not necessary for my variable. There were twenty questions asked within this questionnaire. The background to the development of the measurement was to integrate children with disabilities into the community. Children's' Attitudes towards Down Syndrome Scale (CADS) was developed in order to measure people's attitudes in order to eliminate discrimination and bullying.

Gash's questionnaires had to be slightly altered in order to suit my variables of attitudes towards disabilities; the word "down syndrome" was replaced with "disability." The questions were still comprehensible to the children. Another modification of the questionnaire was the addition of "maybe" into the choice of yes and no. For example, here are two questions that were asked: Would you make him/her your best friend? In addition, would you feel afraid of him/her because they had a disability?

The scoring of the yes and no answers, equate to the higher the "yes" answers the more positive the attitudes towards children with disabilities, the more "no" answers the more negative attitudes towards children with disabilities. The addition of "maybe" had to be included while reporting the findings, as the participants had mixed answers. . The maximum possible score for a positive attitude is 52, and the minimum score is 34, the range is 18.

Research conducted by Hugh Gash; S. Guardia Gonzales; M. Pires; C. Rault in 2000, examined eight hundred and five children from France, Ireland, Portugal, and Spain.

The results shown that there were developmental changes as well as differences in age. Girls and children from non-inclusive schools showed to be more sociable towards children with Down syndrome. Other factors that appeared within the results were the country and the school type.

Children’s Social Distance from Handicapped Persons Scale: (See Appendix C)

Children’s Social Distance from Handicapped Persons Scale was used to measure inclusion. It contains ten questions regarding inclusion towards children with disability, used on children aged between seven-twelve years. Ann Hazzard, Ph.D. used this measure to “*assess children's knowledge about and affective attitudes toward disabled persons.*” (Hazzard, 1983). Hazzard gave the questionnaire 367 elementary school children in 1983 in the United States of America. The results showed that “*children with more experience and girls expressed greater willingness to interact with disabled peers.*”

The scoring again is similar to the Children’s’ Attitudes towards Down Syndrome, the higher the score of “yes,” it is likely that the participant has a positive attitudes regarding inclusion compared to a participant who answered “no.” The addition of “maybe” had to be included while reporting the findings, as the participants had mixed answers. The maximum possible score for a positive inclusion strategy is 30, and the minimum score is 16, the range is 14.

The types of questions being asked, for example: It would be okay if a child with a disability slept over at my house, and, it would be okay if a child with a disability borrowed my bike.

McGill Friendship Questionnaire-RA: (See Appendix D)

McGill Friendship Questionnaire-RA (1997) was developed to from previous questionnaires developed by McGill such as "the Friendship Questionnaire" and the "Friendship Qualities scale." This questionnaire set is to examine feelings toward a friend and the satisfaction with that friendship.

The scale ranges from negative four through to positive four, with headings of very much disagree, somewhat disagree, somewhat agree and very much agree. For the purpose of the data analysis input, ranges from -4 to -2 were grouped under very much disagree, ranges -1 and 0 were grouped into somewhat disagree, ranges 1 and 2 were grouped as somewhat agree and three and four were labelled as very much agree. The maximum possible score for a friendship satisfaction is 49, and the minimum score is four, the range is 45. The types of statements being asked are, for example: I am happy with my friendship with ____, and, I hope ____ and I will stay friends.

Research has shown that girls have higher positive feelings towards best friends and higher satisfaction. According to Mendelson and Abound (2012), McGill Friendship Questionnaires are reliable and valid assessments of friendship. In terms of this research, it will evaluate friendship in terms of socialisation.

Procedure:

The procedure that was conducted in order to conduct the researched involved a number of stages. First, a research proposal was submitted into the ethics board, in Dublin Business School, in order for approval to be given on the topic. Once the board approved the proposal, the following step was to obtain a statutory of declaration in order to grant approval that the researcher was eligible to use children as participants. Consent had to be granted from principals in order to gain access to the schools. Questionnaires had to be approved by supervisor before they could be distributed.

Cover letters (See Appendix E) and a copy of the questionnaires were sent to the principals in order for them to grant permission to their schools. Once that was granted the questionnaires were distributed, teachers were also given cover letters (See Appendix F). On the front of the questionnaires, there was a child friendly cover letter for them to understand what is being asked of them. (See Appendix G) The questionnaires were dropped into the school and verbal instructions were also given to the teachers in order for them to explain to the participants. The demographic cover sheet (See Appendix A), consisted of age, gender, types of clubs, participants whether yes or no and various other questions.

However before they were sent out to the participants, a small pilot study was conducted in order to ensure that they were clear, precise, and easy to complete without help from an adult.

Ethical Considerations:

The first consideration was confidentiality. Confidentiality that was used from the participants was that they did not provide their names or the schools in which they attended, as they were under age. Permission from parents was not needed with regards to the school and after school service as the principal acted as locus parentis. However, concerning the family and friends, permission had to be granted.

The information that was gathered from the participants was one hundred per cent confidential, as the researcher was the only person who has access to it, as well as the supervisor. The principals of the schools and parents understood that the examiners might need to view my collected data.

Using the information correctly was a major ethical concern, the information used within this thesis is used correctly, and none of it has been distorted. Distorting the information would be easy to do in order to get the answer you want instead of getting the

truth from your research. Therefore, one must find the truth in order to use as recommendations and future research ideas.

Storage of the information is important to protect the data that has been recovered, in order to do that the data was stored in a cabinet, which was locked; the data imputed on the computer is stored on a USB key with a password.

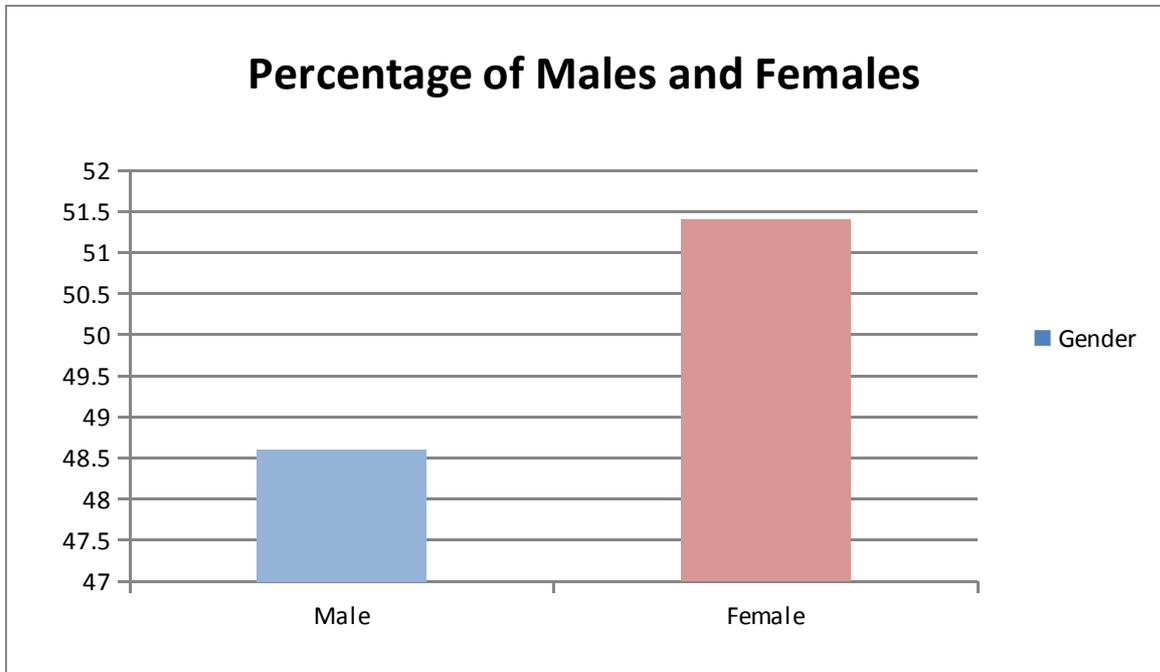
Chapter 3:

Results

Within this chapter, the results will be discussed in relation to the hypothesis and the demographic. Independent sample T-tests, Pearson Correlation and graphs will be used in order to present the findings. SPSS version 18 was used in order to gather the appropriate data.

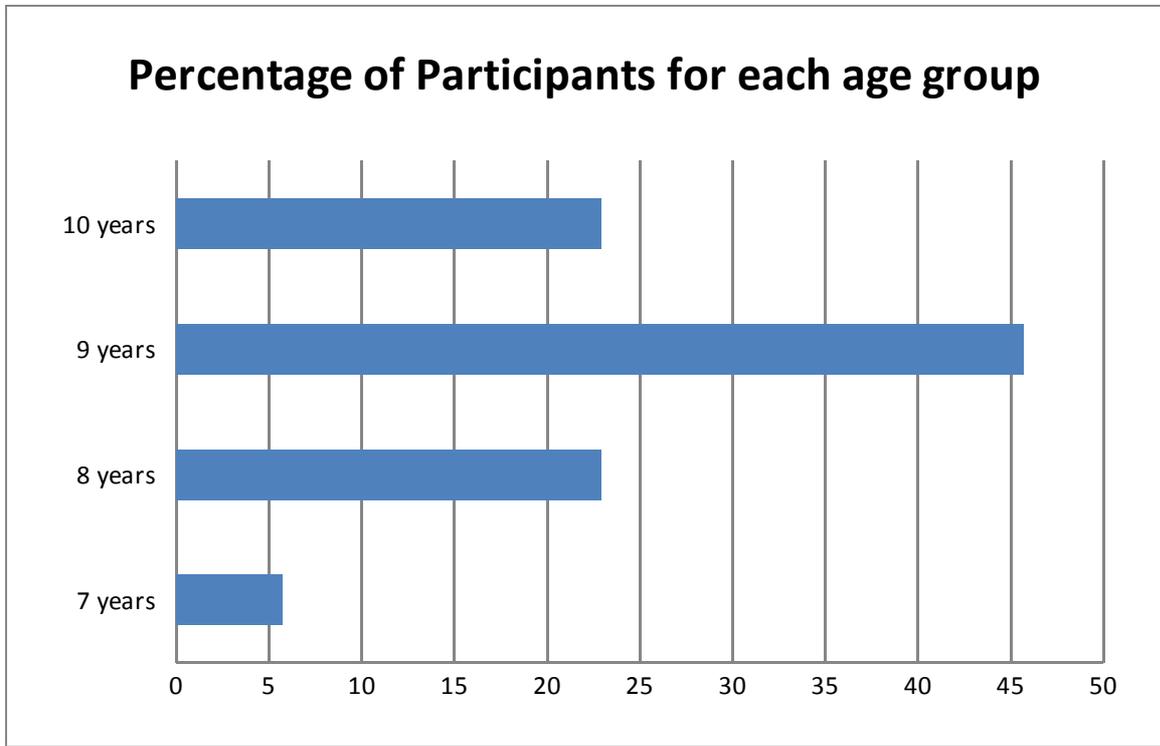
Demographic descriptive statistics:

Table 1: Bar chart in relation to gender of participants within the study



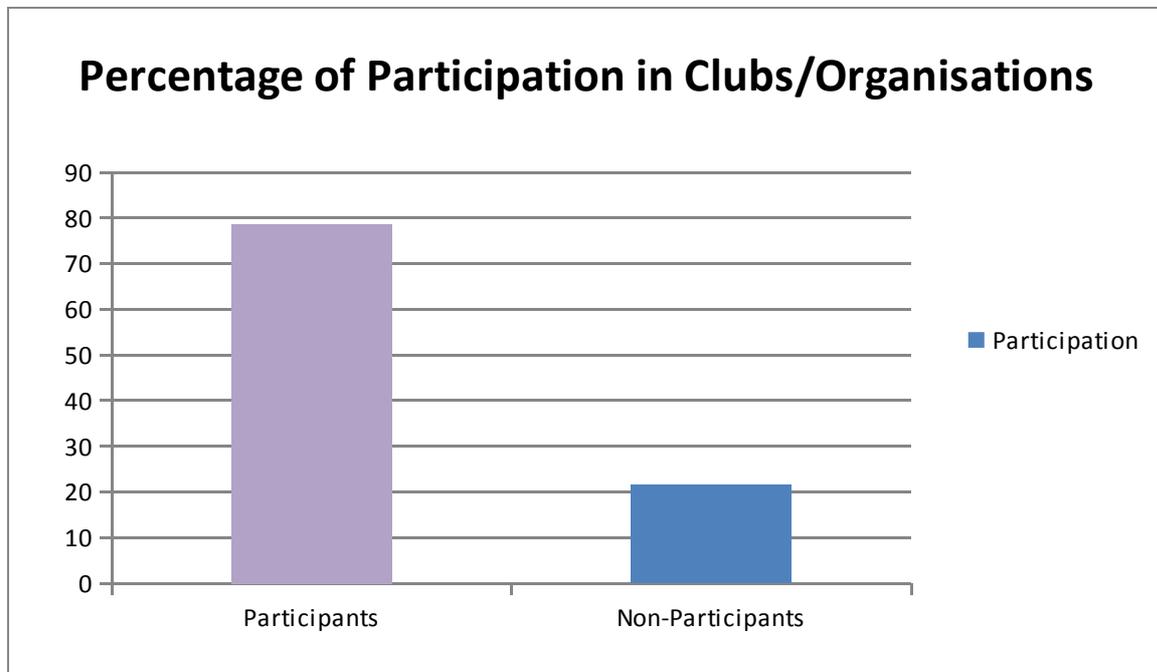
As seen from table 1, the breakdown of females (n=36) and males (n=34) participant's within the study.

Table 2: Histogram showing ages of participants



As seen from table 2, the ages ranged from seven years up to ten years, with the mean age of 8.91.

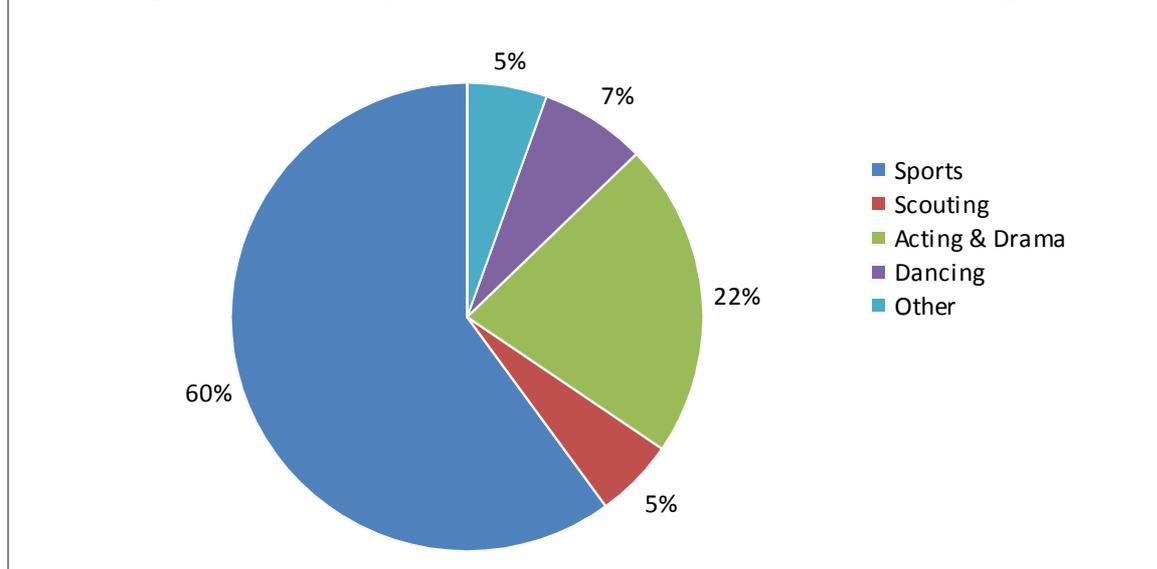
Table 3: Bar Chart on number in relation to participation and non-participation



As seen from table 3, the breakdown of participants (n=55) and non-participants (n=15) who took part within the study.

Table 4: Percentage of participants involved in each club/organisation

Percentage of Participants involved in each Club/Organisation



A total of (N=55) of participants were involved in clubs/organisations, and Table 4, shows a pie chart of the types of clubs and organisations that these participants were involved in. As seen above sports are the most popular type of activity that children participate at 60%. The second most popular activity is acting and drama at 22%.

Table 5a: Breakdown of the percentage of boys in each club/organisations

Boys and Clubs/Organisations

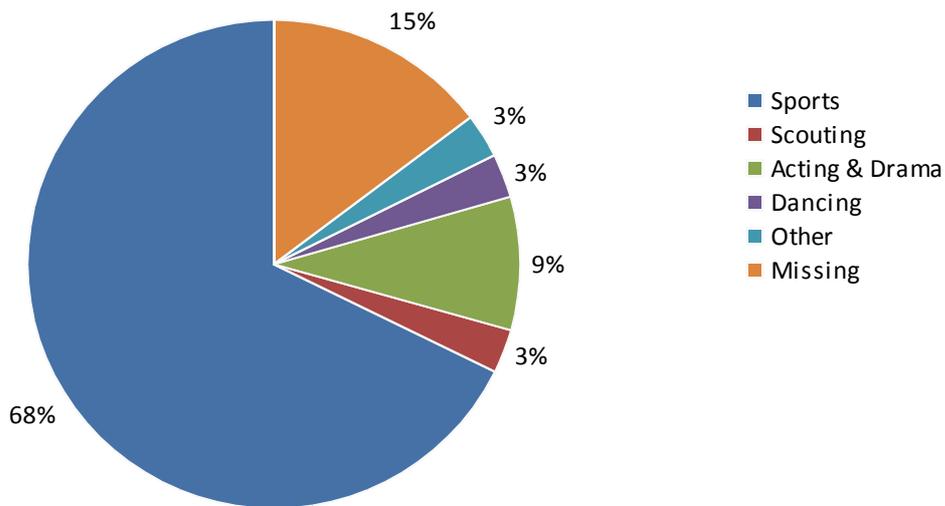
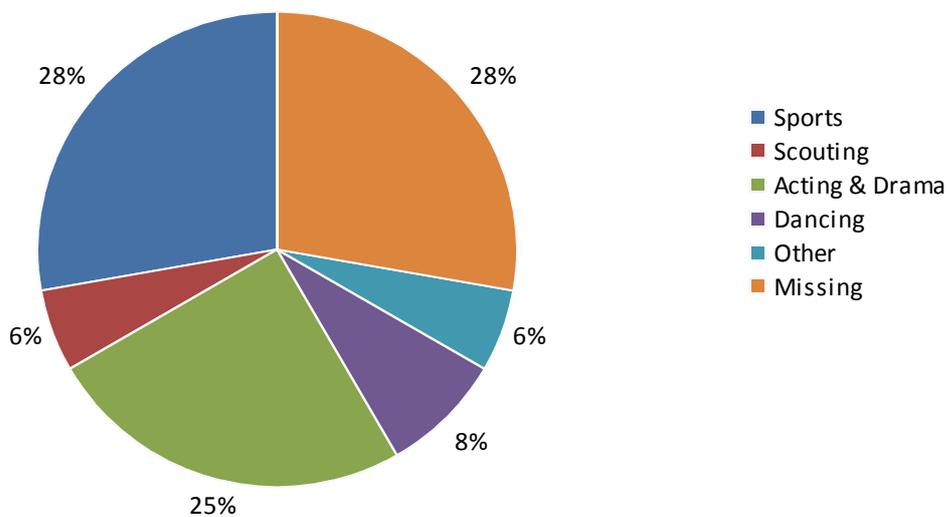


Table 5b: Breakdown of the percentage of girls in each club/organisations

Girls and Clubs/Organisations



As seen from tables 5 a and b, it shows the breakdown of girls and boys involved with clubs and organisations.

Table 6: Breakdown of mean, min, max, and SD of predictors

	Mean	Minimum	Maximum	SD
Friendship/Socialisation	43.87	4	49	7.75
Inclusion	25.32	16	30	4.43
Attitudes	42.32	34	52	4.39

As seen from table 6, it highlights the breakdown of the predictor variables in relation to the mean, minimum, maximum and Standard Deviation.

The highest possible score for McGill Friendship Questionnaire–RA (Friendship), as seen above, is 49 which would suggest that friendship scoring is very positive compared to the minimum score which is 4 which would suggest that friendship are negative.

The highest possible score for Children’s Social Distance from Handicapped Persons Scale (Inclusion), as seen above, is 30 which would suggest that inclusion scoring is very positive compared to the minimum score which is 16 which would suggest that inclusion are negative.

The highest possible score for Children’s Attitudes towards Down Syndrome (Attitudes), as seen above, is 52 which would suggest that attitudes scoring is very positive compared to the minimum score which is 34 which would suggest that attitudes are negative.

Hypothesis one

It was hypothesised that children who are involved in youth organisations have a high standard of socialisation skills due to the regular interaction with their peers compared to those who are non-users of youth organisations who have a lower standard.

Table 7 Independent samples T-test displaying the differences in friendships between participants and non-participants

Variables	Groups	Mean	SD	t	df	p
Friendships	Participant s	44.37	8.399	.910	58	.822
	Non participant s	42.21	4.964	1.29	37.335	

An independent samples t-test was conducted to compare the friendships score for participants (n=55) and non-participants (n=15). There was no significant difference in scores for participants (M=44.37, SD=8.4) and non-participants (M=42.21, SD= 5.07; t (58) = .910, p=.822, two tailed), and these results can be seen in table 6. This went against the original hypothesis.

The 95% confidence limits show that the population mean difference of the variables lies somewhere between -2.589 and 6.90. An independent samples t-test found that there was no statistically significant difference between participants and non-participants friendships.

Hypothesis two

It was hypothesised that children who are involved in youth organisations have a wide range of inclusion strategies to deal and cope with a variety of situations compared to those who are non-users who have a limited range.

Table 8 Independent samples T-test displaying the differences in Inclusion between participants and non-participants

Variables	Groups	Mean	SD	<i>t</i>	<i>df</i>	<i>p</i>
Inclusion	Participant	25.64	4.12	1.02	63	.042*
	Non participant	24.25	5.32	.920	19.32	

*p is significant at the 0.05 level

An independent samples t-test was conducted to compare the inclusion score for participants (n=55) and non-participants (n=15). There was a significant differences in scores for participants (M=25.64, SD=4.12) and non-participants (M=24.45, SD= 5.23; $t(63) = 1.02$, $p=.042$, two tailed), and these results can be seen in table 7.

Hypothesis three

It was hypothesised that children who are involved in youth organisation have a more positive attitude towards their peers who have a disability, physical and/or mental, due to the variety of children who are members of the organisations. Those who are non-users have a neutral and/or more negative attitude towards peers due to the lack of interaction in a social setting.

Table 9 Independent samples T-test displaying the differences in Inclusion between participants and non-participants

Variables	Groups	Mean	SD	t	df	p
Attitudes	Participant	42.79	4.97	1.53	51	.322
	Non participant	40.54	3.59	1.74	19.13	

An independent samples t-test was conducted to compare the attitudes score for participants (n=55) and non-participants (n=15). There was no significant difference in scores for participants (M=42.79, SD=4.197) and non-participants (M=40.54, SD= 3.59; $t(51) = 19.13$, $p=.322$, two tailed), as can be seen from table 8. This went against the original hypothesis.

The 95% confidence limits show that the population mean difference of the variables lies somewhere between -1.23 and 3.97. An independent samples t-test found that there was no statistically significant difference between participants and non-participants attitudes towards children with disabilities.

Table 10: Correlation table, split file of Gender between Attitudes and Inclusion.

Gender		Inclusion		
Boy	Inclusion	Pearson Correlation	.564**	1
		Sig (2-tailed)	.003	
		N	25	31
Girl	Inclusion	Pearson Correlation	-.077	1
		Sig (2-tailed)	.707	
		N	26	34

** Correlation is significant at the 0.01 level (2-tailed)

There was a moderate significant positive correlation between attitudes and inclusion for boys [$r=.564$, $n=25$, $p=.003$]. There is a significant strong Pearson correlation value (0.564), due to a positive correlation it means that the boy's attitudes increased, and in addition, their inclusion scores increased.

Chapter 4:

Discussion

Aim of research:

The reason why this research is being conducted is due to the vast amount of youth clubs and organisation that children participate in throughout Ireland. Within the clubs and organisation there are many different personalities and individuals that children and adults interact with in a social setting compared to being in an educational setting. Clubs and organisations allow children to form a different identity, than the identity that they form in school. The settings can be less strict and formal with different expectations placed upon the children by the adults, allowing them to express themselves differently.

The main objective is to examine if there is any sign of discrimination towards disabilities and prevent discrimination and bullying for the future, in order to highlight an awareness campaign. In addition, to examine the differences in socialisation and friendships, and inclusion strategies of participants compared to non-users. The main goal of the project is to highlight the benefits of children who participate in youth clubs and organisations.

The research will be beneficial to parents and to youth club and organisations leaders. The research will aim to highlight the importance for children that they gain from the experience of youth clubs and organisations, building on their socialisation skills and friendships, which will benefit them throughout their adult life. Children's attitudes towards disabilities that are positive due to being in a youth organisation will remain positive throughout their lives; they may never know what it is to experience discrimination towards others: not only in relation to disabilities but also to ethnic minorities, travellers and others who regularly experience discrimination.

Summary of findings:

In order to gain data SPSS version 18 was used. The results were found in relation to the hypothesis and the demographic. Independent sample T-tests, Pearson Correlation and graphs were used in order to present the findings. Additional tests were used such as one-way ANOVA's however; they did not show any significant results.

The findings have shown that there were no significant differences in children who participate (n=55) and those who do not participate (n=15) in clubs and organisations comparing socialisation and attitudes towards children who have disabilities, hypothesis one and three. However, an independent samples t-test was conducted to compare the inclusion score for participants and non-participants, hypothesis two.

There was a significant differences in scores for participants (M=25.64, SD=4.12) and non-participants (M=24.45, SD= 5.23; $t(920) = 19.32, p=.042$, two tailed), and these results can be seen in table 7. This was for the original hypothesis. This proves that children who are involved in youth organisations have a wide range of inclusion strategies to deal and cope with a variety of situations compared to those who are non-users who have a limited range.

In addition to this finding, a Pearson correlation proved that there was a moderate significant positive correlation between attitudes and inclusion for boys [$r=.564, n=25, p=.003$]. There is a significant strong Pearson correlation value (0.564), due to a positive correlation it means that the boy's attitudes increased, and in addition, their inclusion scores increased.

Even though there was no significant result in relation to hypothesis three, regarding attitudes towards peers with disabilities. Attitudes remained positive between the two groups, which is a significant result. It suggests that children have a positive attitude towards their peers, which reduces the amount of bullying and discrimination taking place.

Unfortunately, there were no other significant results were reported in relation to other significant variables, such as age or the amount of time the participants attend clubs/organisations.

There were also no significant differences within gender and the types of clubs that the participants participated in, they did not have any influence over friendships, inclusion, or attitudes towards children with disabilities.

Previous research-supportive or otherwise:

As stated within chapter one, the main focus around inclusion was within educational environments. Therefore, the research that was being conducted broke some of the rules regarding environment however there were some significant supportive and contradictive findings.

The study highlighted that gender has an impact of socialisation when it comes to inclusion of individuals with disabilities. Age was not a variable that had an impact on socialisation, as well as this research project. This research project showed that boys have a more positive attitude towards inclusion of children with disabilities compared to girls.

In relation to the findings regarding the impact of gender affecting attitudes towards children with disabilities, according to a Van Biesen.D., Busciglio, A., and Vanlandewijck, Y, who conducted a study of attitudes towards inclusion of children with disabilities: they implemented an “A Paralympic School Day” within Flemish elementary school children. The study compared pre and post CAIPR-R questionnaires of three schools, the results showed that gender had an impact on both attitudes and socialisation; it confirmed that girls are more positive attitudes towards disabilities than boys are and have better socialisation skills.

Hazzard's findings regarding Children's Social Distance from Handicapped Parsons Scale (1983), results showed that girls have a "*greater willingness to interact with disabled peers*" however the findings in the research contradicted the evidence and has shown that boys have better inclusion for peers with disabilities, which was shown in chapter 3, page 41.

Findings in relation to socialisation, the Social Learning Theory stated that the environment and peers have an impact on socialisation and friendships. Donohoe and Gaynor, 2007, backed this up. They state that within stage 2 of social developments children are exposed to the wider community and clubs. In addition, peers and friends have an influence in this stage of development.

In addition, individuals who participate in activities, which include social interactions, benefit by developing friendship, skills in socialisation, long-term mental and physical health and well as self-worth (Modell et al 1997; King et al. 2003; Weiss et al. 2003; Cowart et al. 2004; Buttimer & Tierney 2005; Law et al. 2006) Cited in Solish, A., Perry, A., and Minnes, P., 2010).

The research found that regardless of participating in clubs or organisations or not participating friendship scores remained positive throughout. This may suggest that within schools is where children gain the vast amount of knowledge in learning and developing the skills required in socialisation.

Findings concerning children's attitudes towards peers with a disability remained positive between the two groups. This is a positive result as negative peer attitudes can lead to a "*major barrier to full social inclusion of students with disabilities in schools.*" (Vignes, C.; Coley, N. et al, 2008, pg182). This statement is contradicted by the results from the second hypothesis, which states that inclusion is high regarding children with a disability.

Age and gender were not variable that were considered throughout the research however gender played a role in the significant differences, as previously discussed.

Potential problems within the study:

The potential problems in the study were concerning the questionnaires used. Children's attitudes towards Down Syndrome and Children's Social Distance from Handicapped Persons Scale had to be altered. The first alteration was made to Children's attitudes, the word "Down Syndrome" was replaced with the word "disability"; however, the questions were still understandable.

The second alteration may have had an impact on the results, the addition of "maybe" while scoring the answers could have altered the true results. The reason for this was due to the amount of children who choose both "yes" and "no" answers. The justification for this is regarding the uncertainty they have in giving just one definite answer.

The confirmation of the second hypothesis could have been related to the imbalance of participants (n=55) and the non-participants (n=15). This is a problem that needs to be examined in further research; however, there must be a balance in order to confirm the hypothesis.

Another problem within the study could be the limited amount of variables and hypothesis. Variables such as how long they have been attending clubs and organisations could have been included and the reason why they are in clubs and why those who are not.

The questionnaire concerning friendship, McGill Friendship Questionnaire – Respondent Affection, may not have been the appropriate material used to gather the information regarding levels of friendship, as it only asked questions regarding one particular friend rather than friendships in general.

Strengths and weakness of the research:

The strengths from the study may not be significant or numerous; however, it was interesting to research the attitudes of children towards their peers with disabilities and inclusion; these two became the main focus within the study. However, friendships remained positive within both groups, which would suggest that children, regardless of age and gender, have a satisfaction with their friendships. In turn, children have positive awareness of socialisation and use those skills in order to retain a positive relationship with their peers.

The main, and obvious, weakness of the study is the small sample size ($n=70$), which lead to the number of non-significant results. The reflection on the number of participants was due to access not being granted by the schools, however seventy a relatively high number when dealing with children. In relation to gender, boys ($n=34$) and girls ($n=36$) the balance was adequate.

In relation to participants ($n=55$) and non-participants ($n=15$), there was an imbalance due to random sampling. It has an impact on the three hypotheses as the data was imbalanced and did not result in proving the hypotheses. Random sampling can be considered a weakness but also is considered a strength as the research is valid, reliable, and fair due to the fact that one is not seeking out the participants in order to seek the requirements of the study. In contradiction to that point, in relation to the study gathering more participants who did not take part within clubs and organisations.

Ideas for future research stemming from your findings:

Future ideas stemming from the research have shown that gender has an impact on attitudes towards children with disabilities and inclusion. The future research should focus on this element, however there is existing research surrounding this hypothesis and it has seen to be significant. It could focus on the stages of development and if there is an element that adults and educators could implement in order to develop the attitudes in a positive manner and

remain. However not focus on attitudes towards disabilities but to other groups that suffer negative attitudes such as the travelling community and people who are from different race or religion.

Nevertheless, an idea that could stem from this research is to focus on is the individual types of clubs in order to analyse them. In relation to clubs that focus on skills, for example sports clubs, such as physical skills and compare them to clubs that focuses on a number of skills, for example scouting. There is a focus on skills in addition to character building, physical, spiritual, social, emotional, and intellectual abilities. It would be interesting to analyse the difference within the types of clubs rather than the participants within them. This research could influence the parent's choices on where to send their children.

Another area to study is the impact and influences that parents place on the types of clubs that their children participate in, and could relate it to children attitudes and enjoyment that they gain from participating within the clubs. For example the pressure and expectations that the parents place upon them to perform well. One could compare children's attitudes towards the clubs and compare it to the parents, ideal versus reality.

Another area that can be examined in the future would be children's personality, characteristics, and comparing them in relation to attitudes towards their peers with disabilities. This research could possibly be beneficial to teachers and club/organisational leaders in order for them to encourage the children who lack the qualities to show positive attitudes and inclusion and devise a programme to encourage this growth.

There are a number of positive results regarding future research that has stemmed from this project.

Implications of the results and applications of your research:

The implications of the results in relation to the applications of the research are beneficial to educators, parents, clubs, and organisation leaders. The application of the results of attitudes towards children with disabilities, need to be highlighted in order to maintain them and to show to those mentioned above in order to encourage positive attitudes towards everyone.

In relation to the findings regarding inclusion, adults must be aware that inclusion is significant while participating in clubs and organisations, compared to those who do not participate. This could be improved within the educational environment in order for the children, who do not participate in clubs or organisations, to bring their levels of inclusion to a significant level.

Concluding statement restating your main findings and any important points that you raised in your discussion:

The main findings that have been reported are regarding the second hypothesis: Children who are involved in youth organisations have a wide range of inclusion strategies to deal and cope with a variety of situations compared to those who are non-users who have a limited range and the Pearson correlation of boys and inclusion being higher compared to girls. However, as stated, these findings could have been impacted due to random sampling and the imbalance of participants and non-participants.

However, a positive finding is in relation to attitudes towards peers with disabilities and friendships as between the two groups they remained positive scoring. This in itself is a significant result, which can remain throughout their lives as they have learned the basic and have proved their skills and knowledge regarding positive attitudes and friendships.

However due to their age, adults need to monitor and encourage children to remain positive towards those who are different to us.

The methods of research that have been used were adequate for the age group that was being examined; the questions were easy to understand and the participants completed

them without the help from adults, this lead to true data which was essential for the validity and reliability of this research.

The benefit of the research project was to apply the skills that one has acquired over the past two years. Having done this and having hands on experience the project has been completed with confidence. The knowledge and skills have been developed and will be expanded in the future.

References

- Citizens Information. (2010, August 9). *Youth Clubs in Ireland*. Retrieved from Citizens Information:
http://www.citizensinformation.ie/en/travel_and_recreation/recreational_activities_in_ireland/youth_programmes/youth_clubs_in_ireland.html [Last Accessed: 26th January 2013]
- Disabled World. (n.d.). Retrieved from Disabled World towards tomorrow:
<http://www.disabledworld.com/disability/types/#ixzz2Id7qcjkE> [Last Accessed: 26th January 2013]
- Davenport, G.C. (1994). *An Introduction to Child Development* (2nd Ed). London: CollinsEducational.

- Donohoe, J. & Gaynor, F. (2007). *Education and Care in the Early Years*. (3rd Ed.). Dublin: Gill & Macmillian.
- Fletcher, A. (2005). *International Youth-Serving Organizations*. Retrieved from The Freechild Project: <http://www.freechild.org/internationalyouth.htm> [Last Accessed: 26th January 2013]
- Foróige. (n.d.). Retrieved from Foróige: <http://www.foroige.ie/ee/index.php> [Last Accessed: 21st January 2013]
- Gash, H., Gonzales, S., Pires, M., & C. Rault *Attitudes towards Down syndrome: A national comparative study in France, Ireland, Portugal, and Spain*. Irish Journal of Psychology, Vol: 21, pg.: 203-214.
- Hannon, F. (2006). *Literature Review on Attitudes towards Disability*. Dublin: National Disability Authority.
- Hazzard A (1983). *Children's experience with, knowledge of, and attitude toward disabled persons*. J Spec Educ 1983; 17:131–39
- Inclusion. (2013). Retrieved from Keys to Inclusion: http://www.keystoinclusion.co.uk/what-is-inclusion-2/?doing_wp_cron=1359205668.6433939933776855468750 [Last accessed: 25th January 2013]
- Massie, B. (2006). *Research Conference*. National Disability Awareness. Dublin, Ireland.
- McLeod, S. A. (2011). *Albert Bandura: Social Learning Theory*. Retrieved from <http://www.simplypsychology.org/bandura.html> [Last Accessed: 28th December 2012]

- Mendelson, M. J. & Aboud, F. (2012). *McGill Friendship Questionnaire -Respondent's affection (MFQ-RA)*. Measurement Instrument Database for the Social Science. Available from www.midss.ie [Last Accessed: 28th March 2013]
- Miller, F.A, & Katz, J.H. (2002). *The Inclusion Breakthrough: Unleashing the Real Power of Diversity*. California: Berrett-Koehler Publishers.
- Myers, R. (2012). *Helping Your Child with Socialization*. Retrieved from Child Development Institute: <http://childdevelopmentinfo.com/parenting/socialization.shtml> [Last Accessed: 26th January 2013]
- NDA. (2006). *Publics Attitudes to Disability in Ireland*. Dublin: National Disability Authority.
- NDA. (2011). *Disability Awareness*. Retrieved from The Department of Justice and Law Reform: Available from: <http://www.justice.ie/en/JELR/NDA%20-%20DISABILITY%20AWARENESS%20-%207.pdf/Files/NDA%20-%20DISABILITY%20AWARENESS%20-%207.pdf> [Last Accessed: 12th December 2013]
- Nordstrom, I. (2011). *Inclusion and participation in peer relations*. Scandinavian Journal of Disability Research, Vol.13, No. 1, 71-87.
- Odom, S.L. (2002). *Narrowing the question: social integration and characteristics of children with disabilities in inclusion settings*. Early Childhood Research Quarterly, 167-170.
- Orr, P. (2012). *Psychoanalytic theories of personality*. Dublin Business School.
- Rapier J, Adelson R, Carey R, Croke K. *Changes in children's attitudes toward the physically handicapped*. Except Child 1972; 39:219–23.

- Scouting Ireland (2013) Available from:
http://www.scouts.ie/beaver_scouts/what_we_do-10.html [Last Accessed: 28th March 2013]
- Solish, A., Perry, A., & Minnes, P. (2010). *Participation of Children with and without Disabilities in Social, Recreational and Leisure Activities*. *Journal of Applied Research in Intellectual Disabilities*, 226-236.
- Spierstein, G. (n.d.). Retrieved from Center for Social Development and Education: <http://www.csde.umb.edu/index.html> [Last Accessed: 30th December 2012]
- Understanding Developmental Milestones. (n.d.). Retrieved from My Child Without Limits: <http://www.mychildwithoutlimits.org/understand/developmental-milestones/> [Last Accessed: 25th January 2013]
- United Cerebral Palsy. (2013). *Inclusion Training*. Retrieved from All Together Kids: <http://www.ucpnashville.org/AllTogetherKids/Training/1/Lesson1.html> [Last Accessed: 25th January 2013]
- UN, *Convention on the Rights of Persons with Disabilities* (2006) Available from: <http://www.un.org/disabilities/convention/conventionfull.shtml>

[Last Accessed: 28th March 2013]
- Van Biesen, D., Busciglio, A., & Vanlandewijck, Y. (n.d.). *Attitudes towards inclusion of children with disabilities: the effect of the implementation of "A Paralympic School Day" on Flemish elementary children*. Belgium.
- Vignes, C.; Coley, N. et al. (2008). *Measuring children's attitudes towards peers with disabilities: a review of instruments*. *Developmental Medicine & Child Neurology*, 182–189.

- WOSM. (2011). Fact Sheet-Scouting Today. Retrieved from The World Organisation of Scout Movement:
http://www.scout.org/en/about_scouting/facts_figures/fact_sheets [last Accessed: 26th January 2013]
- YCNI. (2007) *Investing in youth work, Diverse Ability*. Promote the Inclusion of Young People with and without Disabilities. Retrieved from:
<http://www.ycni.org/downloads/publications/DiverseAbility.pdf>
[Last Accessed: 20th march 2013]

Appendices

Appendix A

Are you a:

Boy () Girl ()

How old are you? _____

Are you in a club?

Yes () No ()

Which ones?

Drama/Acting ()

Dancing ()

Sports ()

Beavers/Cubs ()

Other ()

Name of club _____

How often do you go to the club?

1 time a week ()

2 times a week ()

More ()

Are there boys and girls in the club?

Yes () No ()

Are they all the same age as you?

Yes (___) No (___)

Appendix B

This is not a test, and your answers will be kept private. Here are a few practise questions. Circle the answer you choose.

Are you a boy? Yes No
Do you like Ice-cream Yes No?

These questions are about a boy or girl who has a disability.



1. Would you smile at him/her on the first day? Yes No
2. Would you ask him/her to sit beside you? Yes No
3. Would you chat to him/her at break time? Yes No
4. Later on, would you tell him/her secrets
 that you usually keep for your friends? Yes No
5. Would you make him/her your best friend? Yes No
6. Would you invite him/her to your house to play in the evenings? Yes No
7. Would you feel angry if he/she did not keep
 the rules of your games at play time? Yes No
8. Would you invite him/her to your birthday
 party with your other friends? Yes No
9. Would you pick him/her on your team in a competition? Yes No

- | | | | |
|-----|---|-----|----|
| 10. | Would you ask him/her questions about themselves? | Yes | No |
| 11. | Would you care if other children made fun of the child with a disability ? | Yes | No |
| 12. | Do you think the child with a disability could do the same maths as you? | Yes | No |
| 13. | Do you think that he/she could read the same books as you? | Yes | No |
| 14. | Do you think that he/she would have the same hobbies as the other children in the class? | Yes | No |
| 15. | Would you feel afraid of him/her because they had a disability ? | Yes | No |
| 16. | Do you think children with a disability should be taught in the same classroom/club as you? | Yes | No |
| 17. | Should children with disabilities have their own special classroom in your school or own club? | Yes | No |
| 18. | Should children with disabilities have their own special school where all the children have disabilities? | Yes | No |
| 19. | Do children with disabilities prefer other children with disabilities as friends? | Yes | No |
| 20. | Can you tell if a child has disability by looking at his/her face or body? | Yes | No |

Gash, H. (1993). A constructivist attempt to promote positive attitudes towards children with special needs. *European Journal of Special Needs Education*, 8, 106-125.

Appendix C

Children's Social Distance from Handicapped Persons Scale

- | | | |
|--|-----|----|
| 1. It would be okay if a child with a disability was in my art and music class. | Yes | No |
| 2. It would be okay if a child with a disability slept over at my house. | Yes | No |
| 3. It would be okay if a child with a disability borrowed my bike. | Yes | No |
| 4. It would be okay if a child with a disability went to my school. | Yes | No |
| 5. It would be okay if a child with a disability was in my favourite club. | Yes | No |
| 6. It would be okay if a child with a disability ate at my table in the cafeteria. | Yes | No |
| 7. It would be okay if a child with a disability was invited to my birthday party. | Yes | No |
| 8. It would be okay if a child with a disability at lunch at my house. | Yes | No |
| 9. It would be okay if a child with a disability sat next to me in class. | Yes | No |
| 10. It would be okay if a child with a disability went to the movies with me. | Yes | No |

Appendix D

McGill Friendship Questionnaire–RA

This part is a bit tricky; don't worry if you cannot fill out all the answers. There are no right or wrong answers. Where there is a line fill in your best friend's name, then circle the number if you agree or disagree with the sentence. 4 are you very much agree and moves down to -4 which is very much disagree.

Very Much Disagree	Some- what Disagree	0	Some- what Agree	Very Much Agree				
-4	-3	-2	-1	0	1	2	3	4

1. I am happy with my friendship with ____.

-4	-3	-2	-1	0	1	2	3	4
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2. I care about ____.

-4	-3	-2	-1	0	1	2	3	4
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3. I like ____ a lot.

-4	-3	-2	-1	0	1	2	3	4
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4. I feel my friendship with ____ is a great one.

-4	-3	-2	-1	0	1	2	3	4
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5. I am satisfied with my friendship with ____.

-4	-3	-2	-1	0	1	2	3	4
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6. I feel my friendship with ____ is good.

-4	-3	-2	-1	0	1	2	3	4
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7. I want to stay friends with ____ for a long time.

-4	-3	-2	-1	0	1	2	3	4
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8. I prefer ____ over most people I know.

-4	-3	-2	-1	0	1	2	3	4
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9. I feel close to ____.

-4	-3	-2	-1	0	1	2	3	4
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10. I think my friendship with ____ is strong.

-4	-3	-2	-1	0	1	2	3	4
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11. I am pleased with my friendship with ____.

-4	-3	-2	-1	0	1	2	3	4
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12. I am glad that ____ is my friend.

-4	-3	-2	-1	0	1	2	3	4
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13. I hope ____ and I will stay friends.

-4	-3	-2	-1	0	1	2	3	4
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14. I would miss ____ if he/she left.

-4	-3	-2	-1	0	1	2	3	4
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15. I am content with my friendship with ____.

-4	-3	-2	-1	0	1	2	3	4
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16. I enjoy having ____ as a friend.

-4	-3	-2	-1	0	1	2	3	4
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Appendix E



School X

7th February 2013

Dear Mr. X

My name is Hayley Burke; I am a final year student in Dublin Business School, studying an HDip in Psychology. I am currently in the process of conducting research for my thesis. The title of my research project is:

Youth organisation users verses non-youth organisation users: Comparing socialisation skills, inclusion strategies, and attitudes towards their peers with disabilities.

The reason why I am writing to you is to ask for permission and access to your 3rd and 4th class students. The purpose of me using your students is due to the fact that they are in a demographic and they are a target group in which I can reach.

I have submitted an ethics and research proposal form to my faculty, which has been approved. Please find enclosed a letter from my course coordinator confirming my project and a sample of the questionnaire that your teachers will be handing out. If you are able to grant me

permission please contact me and I will drop in my questionnaires, the questions will take no more than 10-12 minutes to complete. I would be grateful if your teachers could hand them out and collect them, if it is suitable within their timetable. I would like to give them to you by the week beginning of the 18th and collect them by Friday the 22nd February.

Please note that I will be reporting my finding at the beginning of April 2013 to my faculty and peers. You are more than welcome to receive a synopsis of my findings and reports.

If you have any concerns or questions please do not hesitate to contact me.

Thanking you in advance

Hayley Burke

Appendix F

Dear Teacher,

Thanking you for facilitating me, Hayley Burke, in using your students as part as my sample group for my research project. I am a final year student in Dublin Business School, studying an HDip in Psychology.

I am currently in the process of conducting research for my thesis. The title of my research project is

Youth organisation users verses non-youth organisation users: Comparing socialisation skills, inclusion strategies, and attitudes towards their peers with disabilities.

If you can hand out each child a questionnaire, if the child wishes not to take part that is ok. It should take between 10-12 minutes to complete and once done please collect and place in the envelop provided and return to the principal.

Thanking you again for your cooperation

Hayley Burke

Appendix G

Dear Student,

My name is Hayley and I am asking you for your help, as I am doing a research project in college. The questions that are in the booklet are about your best friend and friends or people you know who have a disability.

There are no right or wrong answers to the questions and it is private, so no one will know who you are or what you have said. Do not worry if you cannot answer all the questions.

When you are finished please hand it back to your teacher.

Thank you very much for all your help and time.

Hayley



