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# Knowledge, Awareness and Attitudes towards Learning Disabilities among Undergraduate Nursing Students in Benin City, Nigeria: A Descriptive Cross-Sectional Study

*[1]Chukwurah JN, [1]Animhiaga EC

ABSTRACT

**Background**: The aim of this study was to assess the knowledge, awareness, and attitude toward learning disabilities (LD) among 270 undergraduate nursing students in the University of Benin (UNIBEN). LD affect a considerable number of people globally. However, the knowledge and attitudes of undergraduate students, especially nursing students in the Global South, toward LD remain under-researched.
**Methods**: A descriptive cross-sectional design was employed, using a stratified sampling technique to recruit participants from first- to fifth-year undergraduate nursing students. A 29-item questionnaire adapted from existing literature, structured on a Likert scale and close-ended questions was used for data collection. Descriptive (frequencies, percentages, and mean) and inferential statistics (chi-square) were used for data analysis. The mean cutoff was set at 2.5 and the level of significance at $p < 0.05$ with small-to-moderate effect size (Cramer's V = 0.23).
**Results**: Participants demonstrated a moderate level of knowledge (55.2%) and a low level of awareness (68.1%). Most students were not aware of services for LD in UNIBEN (81.1%) and at the national level (84.4%). However, participants generally exhibited positive attitudes toward LD (grand mean = 2.75 on a 4-point Likert scale). A statistically significant relationship was found between knowledge and attitude toward LD ($\chi^2 = 12.368$, $p = 0.001$).
**Conclusion**: The findings suggest the possible need for key stakeholders, including nurse educators, to develop targeted interventions towards increasing knowledge and awareness of nursing students about LD. This could include incorporating learning disabilities-related topics into the curricula, and familiarising students with available support resources.

**Keywords:** Learning disabilities, Nursing students, Knowledge and attitudes, Inclusive education, Nigeria.

## INTRODUCTION

Globally, at least 1 in 59 children has one or more learning disabilities, and in Nigeria, the prevalence among students is 2.2% (1). Learning disabilities (LD) is caused by changes in the structure and function of the brain resulting in reading, writing, calculation, and reasoning difficulties (2). The aetiology of LD is often shrouded with ambiguity and confusion. Some literature suggests that the causes of learning disabilities are unknown, as the learning difficulties cannot be attributed to intellectual, sensory, or health-related factors (3). However, many researchers and educators believe that LD stems from central nervous system dysfunction, indicating an underlying neurological issue (4). These disabilities affect the brain's ability to receive, process, analyse, or store information, significantly hindering academic tasks that involve reading (dyslexia), math (dyscalculia), or writing (dysgraphia) (5).

For other students, understanding and interacting with a peer who has LD can be challenging, often leading to difficulties in communication, behaviour management, and social acceptance. It was observed that peers may feel jealous of the attention given to students with LD or embarrassed by their behaviour (6,7). Despite the challenges mentioned above, research indicates that both students with and without LD can benefit from social interactions (8,9). Some suggest that inclusive education can have positive effects, particularly when classmates willingly include students with LD in joint activities like group assignments (1). However, while many students with LD function well socially in mainstream schools, some face difficulties in gaining acceptance and forming friendships (6,10).

The attitudes of peers play a crucial role in the experiences of students with LD. Negative attitudes can be as limiting as physical barriers, restricting their full participation in school and community life (2). Others (4) argue that the attitudes of

* Correspondence: nkechi.chukwurah@uniben.edu
[1]Faculty of Nursing Sciences, University of Benin, Benin City, Nigeria.
**Full list of author information is available at the end of the article**

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typical students toward those with LD are a significant barrier to inclusive education. It is worth noting that academic and social exclusion of people with disabilities are human rights violations that the United Nations Convention on the Rights of Persons with Disabilities was articulated to contest (11).

According to Taura and Abdulkadir (4), the desire to avoid these negative social interactions has led over 18% of students with LD to drop out of school. Despite these challenges, there is limited understanding of students' knowledge, awareness, and attitudes toward LD. The perception of students about their peers with LD is under-researched in undergraduate medical and nursing education in the Global South (12). Some of the related studies focused on broader topic of disabilities and intellectual disabilities (13-16).

Additionally, the social model of disability views disability as a socially caused injustice and a kind of oppression (17). Social and environmental barriers, among other structural inequalities, have been said to have an impact on the health of individuals with disabilities (18). This is pertinent to nurses, particularly when it comes to their therapeutic and social interactions with those who have disabilities. Nursing students need to understand the many kinds of disabilities and be conscious of their own views. A good attitude and sufficient information would significantly improve patients' outcomes for those with disabilities

In Nigeria, and specifically in Benin Metropolis, there is a paucity of studies on the perceptions of undergraduate nursing students towards persons with LD. Consequently, there is inadequate information about their level of knowledge, awareness and attitude toward learning disabilities. It is pertinent to get acquainted with their perceptions in order to address the identified gap in knowledge. Therefore, this study aimed to assess the level of knowledge, awareness, and attitude toward LD among undergraduate nursing students of the University of Benin (UNIBEN), Benin City by; a) assessing the level of knowledge of LD among the students; b) determining the level of awareness of LD among the students, and c) examining the attitudes of students towards LD.

The following null hypothesis was tested in the study:

1. There is no significant relationship between the knowledge and attitude of nursing students towards LD.

In the context of this study, "knowledge" refers to the adequate and correct information of LD among nursing undergraduate students, "awareness" refers to the recognition and understanding of the challenges, needs, and rights of individuals with LD while "attitude" refers to the inclination to respond positively or negatively towards learning disabilities among nursing undergraduate students.

## MATERIALS AND METHODS

### Research Design

A descriptive cross-sectional design was employed for this study. This design was appropriate given the aim of assessing the current knowledge, awareness, and attitude towards LD at a single point in time without manipulation of variables. The study was conducted at the Department of Nursing Science of UNIBEN, Benin City.

### Participants

The target population for this study comprised 851 undergraduate students in the Nursing Department, UNIBEN, Benin City, Edo State. The sample comprised 270 undergraduate students. The sample size was derived using the Taro Yamane formula, $n = N/(1 + Ne^2)$, used for determining sample size, where $n$ = sample size, $N$ (population size) = 851, and $e$ (level of precision) = 0.05 with 95% confidence level. Sample size, $n$, was computed as $851/ (1+851(0.05)^2) = 270$. An additional 10% was added to account for possible attrition, resulting in a proposed sample of 297 students.

Eligibility criteria included being an undergraduate student of the Department of Nursing Science, willingness to participate in the study; and availability during data collection. Students who declined to participate are excluded. A stratified sampling technique was used to select proportionate sample from each subgroup (100 level to 500 level) of students.

### Instrument

Data for this study was collected through the administration of self-structured questionnaires. The research instrument had four (4) sections with a total of 29 items in it, with questions on sociodemographic variables, knowledge, awareness and attitude respectively. The items in sections A to C were presented as close-ended questions. On the other hand, items in section D were measured with a 4-point Likert scale (1 = strongly disagree, 4 = strongly agree), with a mean cut-off point of 2.5. Mean scores greater than 2.5 indicates a positive attitude.

The items were developed based on evidence collected from previous research on the experiences of learning disabilities among undergraduate students (5, 8, 19). Before the main data collection, the items of the instruments were face and content validated by three experts. Additionally, questionnaire was administered to 30 students (6 students from each level) who did not participate in the main study. And issues/questions arising from the exercise helped to fine-tune the questionnaire. The internal consistency reliability technique was used to compute the reliability of the research instrument, which yielded coefficient of reliability scores of 0.81, 0.79, and 0.85 for sections B, C, and D of the instrument, respectively.

### Data Collection

Of the proposed sample of 297 students, 270 completed the questionnaire, yielding a response rate of 90.9%. Permission from the head of the department of nursing science was obtained first before questionnaires were administered. Data collection was by one of the researchers, assisted by a research assistant who was briefed on the ethics of questionnaire administration. The questionnaires were administered during the break periods, and each questionnaire took a maximum of 20 minutes to fill out and was then retrieved immediately. The distribution and collection of questionnaires were carried out in the month of March 2024.

### Data analysis

Collected data were analysed using descriptive statistics such as frequency, percentages, and mean, while inferential statistics (chi-square) were used to test the association between knowledge and attitude. The mean cut-off was set at 2.5, which was considered appropriate for a 4-point Likert scale. The level of significance was set at $p < 0.05$ with a 95% confidence interval, and a small-to-moderate effect size (Cramer's V = 0.23). Level of knowledge and level of awareness was classified as 0-49.9% = low, 50-69.9% = moderate and 70-100% = high. The data analysis was conducted using IBM SPSS version 26.0.

### Ethical consideration

The study was conducted in conformity with the ethical principles defined by the Belmont Report (20). Ethical approval for the study was obtained from the Research Ethics Committee of the College of Medical Sciences, University of Benin, with the reference number CMS/REC/2024/505. The purpose of the study was explained to the participants and their choice of participation was respected. The principles of voluntary participation, maintenance of anonymity and confidentiality were maintained throughout the study. A written informed consent was obtained from all participants after explaining the nature of the study. The questionnaire was explained clearly to the participants before and during the process of filling the questionnaires. Participants were informed that they can withdraw from the study at any given point in time if they felt uncomfortable. The information obtained was used strictly for the purpose of the study.

## RESULTS

Table 1 shows the demographic details of the participants. The majority of the participants were females and the age range with the highest representation is 20-25 years (n=165).

Table 2 shows the level of knowledge of LD among undergraduate nursing students. The majority of participants reported that they had heard of LD previously. Similarly, many reported that individuals with the condition show an uneven pattern of development while 81.1% reported that it can affect a person's social skills. Overall, the findings suggest that participants demonstrated above-average knowledge regarding LD.

Table 3 shows the classification of participants' level of knowledge regarding LD. Slightly above half of the participants demonstrated a moderate knowledge and only about one-fourth demonstrated high level of knowledge of LD.

Table 4 shows the level of awareness of LD services among undergraduate nursing students. The majority of the participants were unaware of services for LD within UNIBEN as well as services at the national level. Similarly, majority were not aware of local groups or organizations that assist individuals with LD.

Table 5 shows the level of awareness of LD services. More than half of the participants had a low level of awareness, while only a negligible number had a high level of awareness.

Table 6 shows the attitude of respondents towards individuals with LD, although responses to item 7 suggested support for segregated educational placement among a substantial proportion of participants. Overall, the grand mean indicated a generally positive attitude toward persons with LD among the respondents.

The inferential statistics in Table 6 show that there is a significant relationship between the knowledge and the attitude towards LD among the undergraduate nursing students, $X^2$ (2, N = 270) = 12.368, p = .001 with a small-to-moderate effect size (Cramer's V = 0.23) and 95% confidence intervals.

**Table 1**: Socio-demographic characteristics of the participants (n=270)

| Variables | Frequency n (%) |
|---|---|
| **Gender** | |
| Male | 72 (26.7) |
| Female | 198(73.3) |
| **Age (Years)** | |
| Less than 20 years | 93 (34.4) |
| 20-25 years | 165 (61.2) |
| Above 25 years | 12 (4.4) |
| **Level** | |
| 100 Level | 66 (24.4) |
| 200 Level | 54 (20.0) |
| 300 Level | 52 (19.3) |
| 400 Level | 43 (15.9) |
| 500 Level | 55 (20.4) |

**Table 2:** Knowledge of learning disabilities among undergraduate nursing students (n = 270)

| SN | ITEMS | YES<br>n (%) | NO<br>n (%) |
|---|---|---|---|
| 1 | Have you heard of the word 'learning disabilities' in the past? | 214 (79.3) | 56 (20.7) |
| 2 | Individuals with learning disabilities have difficulties with academic achievement and progress | 192 (71.1) | 78 (28.9) |
| 3 | Individuals with learning disabilities show an uneven pattern of development | 210 (77.8) | 60 (22.2) |
| 4 | Learning disabilities are not due to environmental disadvantage | 163 (60.4) | 107 (39.6) |
| 5 | Learning disabilities are not due to mental retardation or emotional disturbance | 175 (64.8) | 95 (35.2) |
| 6 | Learning disabilities can affect a person's attention and coordination | 202 (74.8) | 68 (25.2) |
| 7 | Learning disabilities can affect a person's social skills | 219 (81.1) | 51 (18.9) |
| 8 | Individuals with learning disabilities have normal intelligence | 181 (67.0) | 89 (33.0) |

**Table 3:** Classification of nursing students' level of knowledge of learning disabilities (n = 270)

| | Frequency | Percentage |
|---|---|---|
| Low (0-49.9%) | 54 | 20.0 |
| Moderate (50-69.9%) | 149 | 55.2 |
| High (70-100%) | 67 | 24.8 |

**Table 4:** Level of awareness of learning disabilities services among nursing students (n = 270)

| SN | ITEMS | YES<br>n (%) | NO<br>n (%) |
|---|---|---|---|
| 1 | Are you aware of any services for learning disabilities in UNIBEN? | 51 (18.9) | 219 (81.1) |
| 2 | Are you aware of any services for learning disabilities at national level? | 42 (15.6) | 228 (84.4) |
| 3 | Are you aware of any local groups or organizations that assist individuals with learning disabilities? | 47 (17.4) | 223 (82.6) |
| 4 | Are you aware of any health services that assist individuals with learning disabilities? | 93 (34.4) | 177 (65.6) |
| 5 | Are you aware of any education services that assist individuals with learning disabilities? | 125 (46.3) | 145 (53.7) |
| 6 | Are you aware of any social protection services that assist individuals with learning disabilities? | 30 (11.1) | 240 (88.9) |
| 7 | Are you aware of any religious institutions or services that assist individuals with learning disabilities? | 110 (40.7) | 160 (59.3) |

**Table 5:** Classification of nursing students' level of awareness of learning disabilities (n=270)

| | Frequency | Percentage |
|---|---|---|
| Low (0-49.9%) | 184 | 68.1 |
| Moderate (50-69.9%) | 75 | 27.8 |
| High (70-100%) | 11 | 4.1 |

**Table 6:** Attitude of undergraduate nursing students towards learning disabilities (n = 270)

| | | SA n (%) | A n (%) | D n (%) | SD n (%) | Mean | Remark |
|---|---|---|---|---|---|---|---|
| 1 | Whenever I come across an individual with learning disabilities, I always treat them fairly. | 106 (39.3) | 80 (29.7) | 46 (17.0) | 38 (14.1) | 2.94 | Positive |
| 2 | I would be happy to have individuals with learning disabilities as close friends. | 108 (40.0) | 103 (38.1) | 28 (10.4) | 31 (11.5) | 3.07 | Positive |
| 3 | I would be happy to attend lectures together with individuals with learning disabilities in the same lecture hall. | 88 (32.6) | 94 (34.8) | 70 (26.0) | 18 (6.7) | 2.93 | Positive |
| 4 | Individuals with learning disabilities have made positive contributions to my life. | 46 (20.0) | 124 (53.9) | 33 (14.3) | 27 (11.7) | 2.74 | Positive |
| 5 | Individuals with learning disabilities contribute to society. | 36 (15.7) | 45 (19.6) | 65 (28.3) | 84 (36.5) | 2.41 | Negative |
| 6 | Learning disabilities are the result of past deeds. | 18 (7.8) | 48 (20.9) | 70 (30.4) | 94 (40.9) | 2.48 | Negative |
| 7 | All individuals with learning disabilities should attend separate specialized schools and not general mainstream schools. | 27 (11.7) | 124 (53.9) | 33 (14.3) | 46 (20.0) | 2.82 | Negative attitude** |
| 8 | Individuals with learning disabilities are more likely to be the victims of bullying. | 51 (22.2) | 88 (38.3) | 66 (28.7) | 25 (10.9) | 2.58 | Positive |
| 9 | Individuals with learning disabilities cannot lead as full a life as those without disabilities. | 85 (31.5) | 65 (24.1) | 84 (31.1) | 36 (13.3) | 2.74 | Positive |
| | **grand mean** | | | | | **2.75** | **Positive** |

Note*: Positive attitude = Mean score ≥ 2.50, Negative attitude = Mean score < 2.50; SA = Strongly Agree, A = Agree, D = Disagree, SD= Strongly Disagree, **Item 7 was negatively worded in relation to inclusive education Agreement with the item reflects preference for segregated educational placement rather than inclusive mainstream education. The item was therefore interpreted cautiously in the discussion.*

**Table 7:** Relationship between level of knowledge and attitude towards learning disabilities among participants

| | **Attitude** | | Chi-square value | | | |
|---|---|---|---|---|---|---|
| | Positive | Negative | | Df | P | Decision |
| **Level of knowledge** | | | | | | |
| Low (0-49.9) | 49 (74.2) | 17 (25.8) | | | | Reject the null |
| Moderate (50-69.9) | 87 (71.3) | 35 (28.7) | 12.368 | 2 | 0.001 | hypothesis ($H_0$) |
| High (70-100) | 35 (83.3) | 7 (16.7) | | | | |

Note: Level of significance is $p < 0.05$

## DISCUSSION

The predominantly moderate level of knowledge in this study aligns with previous studies among medical and nursing students and where librarians had moderate knowledge about LD (1, 12, 16). Similarly, (2) revealed that more than half of teachers had moderate knowledge and in (6), about 60% of participants had inadequate knowledge about LD. From the studies cited here, it shows that the moderate level of knowledge is not limited to only nursing students but also to other professions, highlighting the need for more education on this important condition. It was noted that nursing curricula devote limited attention to the care of people with intellectual disabilities (14).

Furthermore, the low level of awareness among nursing students in this study parallels the findings in (21), where teachers were unaware of how to provide appropriate

instruction for students with LD. This contrasts (8) with 61% of participants having an average level of awareness and a high mean score in (9). It is worth noting that the studies cited here were conducted among teachers and in different regions across the world. It has been reported that education and occupation are determinants of awareness of LD (22). Therefore, this becomes an area that requires attention in the educational preparation of nurses.

In this study, the high positive attitude of undergraduate nursing students towards LD matches (8), where 61% of participants exhibited a moderately favourable attitude towards children with learning disabilities. Likewise, in (19) students reported positive attitude towards fellow students with LD, especially among those who have friends with the condition. Similarly, (1) observed that librarians exhibited positive attitudes towards library users with LD. However, when compared with nursing students, education students reported significantly more positive attitude on social relations with individuals with disabilities (15). This highlights the need for targeted educational interventions, especially within nursing curricula because regular interaction with people with disabilities, is associated to more positive attitudes.

The finding of this study reported a significant relationship between the knowledge and the attitude towards LD, which contrasts the finding by (12), where there was a weak correlation coefficient ($r = 0.116$, $p < 0.001$) between the two variables among medical students and undergraduate nursing students. However, some studies found a positive relationship (8, 19).

### Limitations

The study has several limitations. First, the cross-sectional design prevents causal inference regarding how knowledge, awareness, and attitudes toward LD evolve over time. Second, the use of a single institution limits the generalizability of the findings to other settings. Furthermore, self-report on sensitive constructs such as attitudes may be subject to social desirability bias, potentially leading to over-reporting of positive attitudes. Additionally, the study relied primarily on face and content validity without further psychometric validation of the instrument. One of the attitude items related to segregated schooling may have benefited from reverse coding during analysis. However, the raw dataset was not immediately available for re-analysis. Therefore, the item was interpreted cautiously in the discussion.

### Conclusion

Undergraduate nursing students demonstrated moderate knowledge, low awareness, and generally positive attitude toward LD. Educational strategies aimed at improving awareness of support services may enhance inclusive nursing practice and strengthen future nursing care for individuals with LD. Broader multi-institutional studies involving students from multiple academic disciplines across Nigeria are recommended to improve generalizability.

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**Conflict of Interest:** The authors have no conflicts of interest to declare

**Data availability:** The data that support the findings of this study are available on request

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**Author Details:** [1]Faculty of Nursing Sciences, University of Benin, Benin City, Nigeria.

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