ORIGINAL ARTICLE

Spirituality among Doctor of Physical Therapy Students in Lahore, Pakistan

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ABSTRACT

Aim: To determine Doctor of Physical Therapy student attitudes towards spirituality.

Methods: This Observational Study was conducted from March 2018 to June 2018 after ethical approval. Total of 1003 participants were recruited through purposive non-probability sampling technique. DPT students from public/private Universities were included in the study and Graduated Physical Therapist and Postgraduate Physical Therapy Students were excluded. 16-item Daily Spiritual Experiences Scale (DSES) was used to record response. **Results:** The mean age of the participants was 54.90 ± 6.8 years ranging from 18 years to 23 years. Out of 1003 195(19.4%) were males and 808(80.6%) were females, 312(31.1%) having no clinical attachment and 691(68.9%) having clinical attachment. 4949(49.3%) were in Riphah international university, 68(6.8%) were in SAHS children hospital, 122(12.2%) were in SPT, Mayo Hospital, 319(31.8%) were in Rashid Lateef Medical College. The result shows that there is no significant difference in spirituality score among DPT students of different institutes according to age, gender, year of study and clinical attachment.

Conclusion: This study concluded that entry-level DPT students had positive attitude towards spirituality.

Keywords: Spirituality, DPT Students, Daily Spiritual Experiences Scale.

INTRODUCTION

Spirituality is known as giving sense, stability, control and regulation to the life. It is a struggle to satisfy and find a purpose of living. Spirituality includes the qualities and clarification of one's perspective¹.

Spirituality and religion is taken as same meaning by the public, whereas in the scientific study they both are defined separately. Spirituality is taken as taking care of others beyond own self whereas religions basically nourish the spiritual life^{2,3}.

There are three approaches to understand spirituality including Generic Approach, Biological and an approach for religion. Each approach intersect and interconnect with the othersby using important and interesting methods^{4,5}. Spiritual experience has biological correlates, but on its own this approach is inadequate. The approach from religion takes different forms and is split into three basic sub categories; the transcendent approach. Other method through which the religion enters the clinical domain is by the mechanism of projection. Spirituality is related with the with people's behavior and religion's practice and subsequent health benefits. With time, scientists are more focused to identify the biological ways that through social and psychological factors affect physical health and increase exposure to disease⁶.

It is worthy to pay attention to the patient's spiritual and religious beliefs in order to setup trust and built therapeutic association and should be included in physiotherapy plan of care⁷. DPT students who are more religious and spiritual are more comfortable in addressing spiritual and religious needs of patients⁸.

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In the professional development of many African American, spirituality is more important than religion⁹. It is the priority of the students to pay attention to the religious and spiritual beliefs of the patients to create trust and build a cooperative association with the patient¹⁰. Religious and spiritual beliefs and faith plays an important role in the health care practice. Tapley et al, included 65 DPT and 132 non-medicinal students and found that entry-level programs for DPT should consider methods to provide students with introduction of the spiritual health issues¹⁴.

Different studies reported that having more DSE is related with favorable health outcomes including; better mental health in patients with musculoskeletal pain, less depressive symptoms in medically ill hospitalized older patients, better quality of life, less depression, less perceived stress, more optimism in middle-aged women¹¹, and shorter length of stay in long-term care for African Americans and women¹². The rationale of this study was to determine attitudes of DPT students towards spirituality that will help to focus on bio psychosocial model of health and illness. The aim of our study was to determine Doctor of Physical Therapy student attitudes towards spirituality.

The aim of the study was to determine the attitude of doctor of physical therapy students towards spirituality and spirituality score was determine in different groups according to age, gender, clinical attachment, years of study and different institutes.

METHODOLOGY

This Observational Study was conducted in six months after ethical approval from university of Health Sciences. Non probability convenient sampling technique was used to collect data from Educational Institutes offering DPT Program in Lahore including two public and two private

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sector institutions. Informed consent was taken from the participants of the study. Daily Spiritual Experiences Scale (DSES) was used to record response which is a 16 item scale¹³. Only DPT students were included who voluntarily participated. While graduated Physical Therapist and Postgraduate Physical Therapy Students were excluded.

RESULTS

Total 1003 participants were selected for this study 195(19.4%) were males and 808(80.6%) were females and their mean age was 20.29±1.68 years. According to results 312(31.1%) students having no clinical attachment and 691(68.9%) having clinical attachment. Students included in this study: 178(17.7%) were in first year, 134(13.4%) were in 2nd year, 228(22.7%) were in 3rd year, 239(23.8%) were in 4th year and 224(22.3%) were in 5th year. 494(49.3%) were in Riphah international university, 68(6.8%) were in SAHS children hospital, 122(12.2%) were in SPT, Mayo Hospital, 319(31.8%) were in Rashid Lateef Medical College. The mean of total spirituality score was 54.90 ± 6.8 with an age range of 18 to 23 years.

Table 1: Difference in spirituality score according to clinical attachment

Independent Samples Test							
Clinical Attachment	N	Mean	Std. Deviation	P value			
No	312	55.10	7.33				
Yes	691	54.81	6.69	0.541			

Table 2: Difference in spirituality score according to gender

Independent Samples Test							
Gender	N	Mean	Std. Deviation	P value			
Male	195	54.71	7.53				
Female	808	54.95	6.74	0.661			

Table 3: Comparison of total score of spirituality according to year of study

One way ANOVA						
	Sum of Squares	Mean Square	P value			
Between Groups	118.57	29.64				
Within Groups	47575.80	47.67	0.647			

DISCUSSION

The aim of the study was to determine the attitude of doctor of physical therapy students towards spirituality and spirituality score was determine in different groups according to age, gender, clinical attachment, years of study and different institutes. Underwood conducted study in 2002, and group of female participants were included. The aim of this study was to find attitudes of spirituality between physical therapist and other non-health graduates and groups of female participants were included. DSES used to find score of spirituality. No significant difference in mean score of DSES between DPT and other non-health graduate's participants(11). The result of our

study supported the results of this study. Constantine et al (2006) conducted study on African American college students and found that religion and spirituality were important to the career developments. They found that students who are motivated by spirituality to choose their career and spirituality was a superior factor in building their careers⁹. In our study, results showed that spirituality was found in DPT students and they feel they experienced selfless caring for others which was a sign of their career motivation. Talpey showed that when demographic variables are taken into account, the spirituality level is same in non-health care workers and physical therapists¹⁴. Our study result showed that spirituality did not any such variations.

CONCLUSION

The entry-level DPT students had positive attitude towards spirituality and there was no differ in terms of student's age, gender, year of study, institutes and clinical attachments. **Conflict of interest:** Nil

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