

Perception of Knowledge, Attitudes and Practices towards Women Health Physiotherapy among Female Practicing Physiotherapists

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ABSTRACT

Background

Physiotherapy plays a vital role in many medical professions, including women's health, at every stage of the healthcare process. Women's Health Physical therapy (WHPT), emerging from Obstetrics and Gynecology, is a crucial component to understand the health of most women throughout their life. WHPT provides health services aligned with the common problems in women's musculoskeletal systems, reproductive systems and the physiological changes that must be attended. However, many health providers and physiotherapists are still unaware of WHPT leading to the under-utilization of the services. This under application raises questions about the level of knowledge, attitudes, and specialized training among physiotherapists in women's health.

Objective

To find out the perception of knowledge, attitude and practice towards women health physiotherapy among female practicing physiotherapists.

Methodology

A cross sectional study was conducted involving 377 participants who were practicing female physiotherapists aged between 21 to 55 years. Data was collected in four months by non-probability sampling technique from different hospitals and clinics. The exclusion criteria were the physiotherapists working in academic field only. Data collection tool was a self-structured questionnaire made according to Knowledge, Attitudes and Perception (KAP) guidelines.

Results

Data was analyzed by using SPSS 21.0 statistical software. Descriptive statistics was used for the summary of data. Results were obtained in the form of frequency and percentage. The results showed that majority of participants have moderate to high levels of knowledge, hold positive attitude and often practice the techniques of women health physiotherapy.

Conclusion

Practicing female physiotherapists possess a good knowledge base, positive attitudes towards their patients, and a skilled approach to women's health physiotherapy practices.

Key words:

Attitude, Awareness, Knowledge, Perception, Practicing Physiotherapists, Women Health Physiotherapy,

INTRODUCTION

Women's Health Physiotherapy originated from the clinical field of Obstetrics and Gynaecology, focusing on the care of women in all phases of life majorly during and after childbirth. Physiotherapy plays a significant adjunctive role in women health. It is a complimentary intervention to enhance the quality and efficiency of the provided medical care (1). The titles physiotherapists and physical therapist are protected and are preserved for use solely by persons whose qualifications are approved by a national professional association that is a member of WCPT (World Confederation of Physical Therapy, founded in 1995). There is currently a 101-member association of the WCPT, representing over 270,000 physiotherapists throughout the world (2).

The role of physiotherapists in women's health has evolved significantly, reflecting broader societal shifts towards personalized healthcare and increased awareness of gender-specific health concerns and plays an important role in reducing hospital stay duration, recovery period and rehabilitation for a better quality of life (1).

Women's health physiotherapy is a specialized field within physiotherapy that addresses the health needs and conditions specific to women across their lifespan. It encompasses various conditions such as conditions such as pelvic organ prolapse, urinary incontinence, pelvic or genital pains, menstrual or hormonal issues, osteoporosis, lymphedema, pelvic floor dysfunction, antenatal and postnatal care, musculoskeletal issues during pregnancy, menopause-related issues, rehab after breast surgeries and musculoskeletal disorders related to female anatomy and physiology (3).

The physiotherapy remains a vital adjunct in the management of common conditions in obstetrics (antenatal, intrapartum and postnatal including post caesarean section)(1). Antenatal care is a type of preventive healthcare and it refers to the care given before birth to the women while postnatal care is given in the period beginning immediately after the birth of a child and extending for about six weeks (4).

Women of all ages, from puberty to old age, pregnant or non-pregnant, with musculoskeletal or neurological issues can benefit from women's health physiotherapy, addressing a range of conditions and promoting optimal physical function, pain relief, and overall well-being. The lack of awareness of this vast field creates a common misconception that physiotherapy is only limited to the musculoskeletal system and is only needed after severe injury or pain. Physiotherapy is pivotal for the women health and contributes to the overall rehabilitation of a patient (5) but is not practiced by gynecologist and obstetricians. Obstetricians and gynecologists, along with other physicians, play a crucial role in the healthcare system and greatly impact the referral process for physiotherapists (1).

Physiotherapists have expressed concerns about the delayed engagement of physicians in referring patients for women health physiotherapy services. Due to this less awareness in the society for this specific specialty, the more and more physiotherapist tends to learn more about

other specialties and that creates a gap for the women health physiotherapy. Despite its importance, the perception of knowledge, attitudes, and practices among female physiotherapists in the domain of women's health remains a relatively underexplored area (6).

Knowledge, attitudes, and practices of healthcare professionals are often surveyed to gauge what healthcare professionals know about certain diseases and patients, how they view those patients and diseases, and how they deal with those patients as this information is helpful to study how much the given care is benefiting them (7).

Perception is the subjective understanding or interpretation (8). Attitudes are the beliefs, values, and emotional responses that shape the behavior and clinical decision-making of female physiotherapists when treating women's health issues. While practices are the methods, techniques, and approaches utilized by female physiotherapists in the assessment, diagnosis, treatment, and management of women's health conditions. Understanding how female practitioners perceive their own competencies, attitudes towards specialized care for women, and the application of evidence-based practices is crucial for optimizing healthcare delivery in this field (9).

This research is done to evaluate the knowledge of the practicing female physiotherapists about women health physiotherapy and to know how much they think it is needed in practice and their attitudes towards the women who needs it.

This research aims to delve into several key issues such as examining the perception of knowledge that how female physiotherapists perceive their level of knowledge and competence in women's health physiotherapy, investigating attitudes, beliefs, and motivations influencing female physiotherapists' approach to treating women's health issues and exploring current practices and methodologies employed by female physiotherapists in the treatment of women-specific conditions. This study aims to uncover insights that can enhance professional development and optimize healthcare outcomes for female patients and to provide recommendations for improving education, training, and practice guidelines to better meet the healthcare needs of women. In summary, this research's objective is to provide a comprehensive analysis of how female physiotherapists perceive and engage with women's health physiotherapy, ultimately contributing valuable insights to enhance professional practice and improve healthcare outcomes for female patients.

MATERIALS AND METHODS

Study Design

Cross sectional study design

Settings

Data was collected from the practicing female physiotherapists from different clinics and hospitals.

Duration of the Study

The study was completed in 4 months after the approval of the Synopsis.

Sampling technique

Non probability convenience sampling technique was used.

Sample Size

The sample size was 377 calculated by RAO soft online calculator with 95% confidence interval and 5% of margin error.

Target population

Female practicing physiotherapists.

Sample selection

Inclusion criteria:

- 21-55 years of Age
- Only female physiotherapists (DPT is the minimum level of education)
- Practicing physiotherapists (with a minimum experience of 1 year)

Exclusion criteria:

- Physiotherapists working only in academic sites

Data Collection Procedure

Data was collected by using non-probability convenience sampling. The data was collected from female practicing physiotherapists from different clinics and rehabilitation centers via cross sectional study design to check the perception of knowledge, attitudes and practices towards women health physiotherapy among female practicing physiotherapists who fulfilled the inclusion criteria. A self-structured KAP questionnaire tool was used to collect data.

Data collection Tools (Performa / questionnaire)

The self-structured KAP (Knowledge, Attitude and Practice) questionnaire survey is a quantitative method (predefined questions formatted in standardized questionnaires) that provides access to quantitative and qualitative information. KAP surveys revealed misconceptions or misunderstandings that may represent obstacles to the activities that we would like to implement and potential barriers to behavior change. The KAP survey essentially records an "opinion" and is based on the "declarative" (i.e., statements). This self-structured questionnaire used in this study was redesigned using a previous questionnaire of Knowledge, Attitude and practice study (17).

RESULTS

Table 1. Qualifications of Participants

	Frequency	Percent	Valid Percent	Cumulative Percent
Graduate (DPT)	93	24.7	24.7	24.7
Post Graduate	284	75.3	75.3	100.0
Total	377	100.0	100.0	

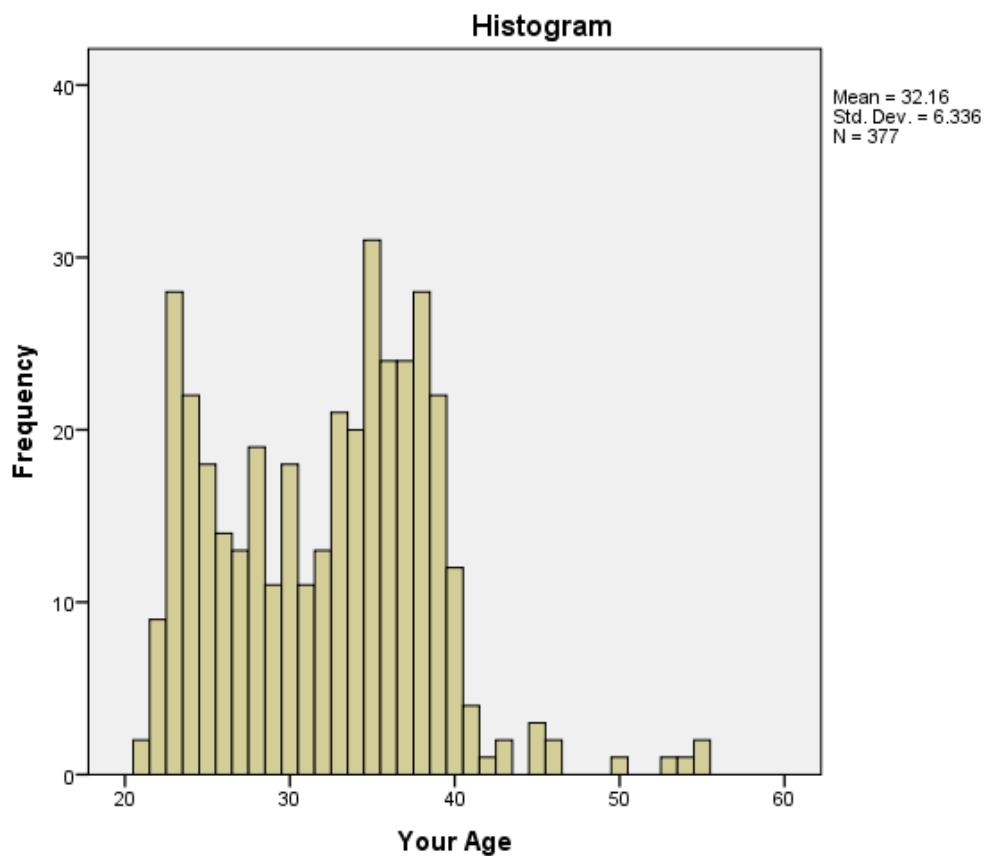


Figure 1

The ages of the participants included were between 21 to 55 years. Majority of the physiotherapists were between 23 to 40 years of age. The mean of the ages is 32.16 and the standard deviation is 6.336.

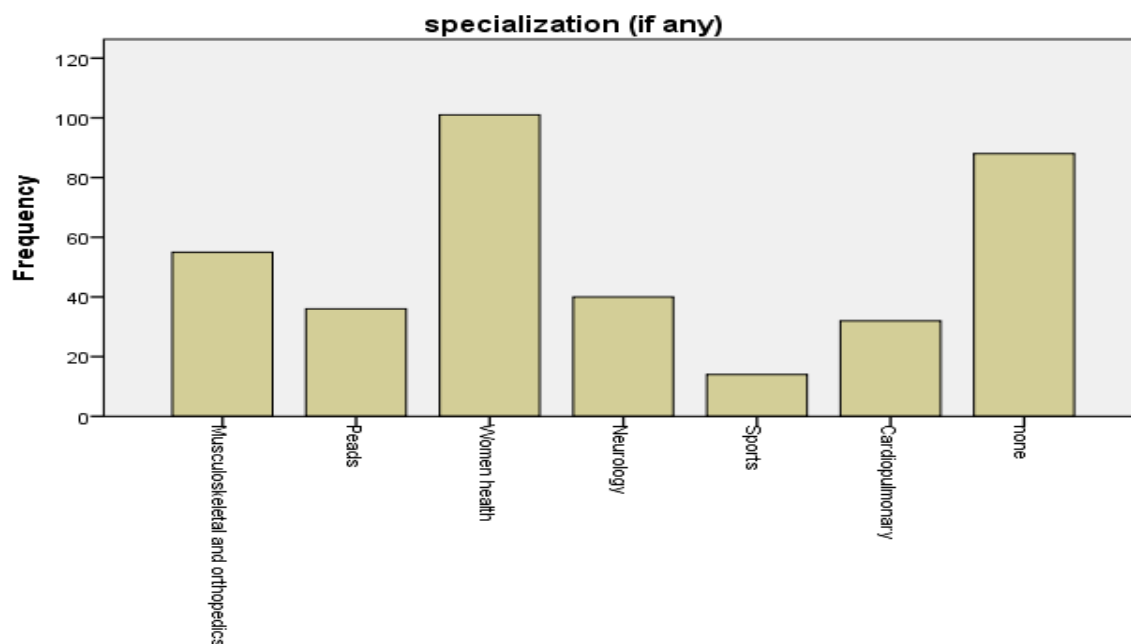


Figure 2

Regarding the participant's specialties (14.9%) were OMPT, (10.3%) were pediatrics physical therapist, (27.3%) were women health physiotherapist, (10.6%) had done Neuromuscular physical therapy, (3.7%) had done sports physical therapy and (8.5%) had specialty in cardiopulmonary physical therapy. The questionnaire used for data collection had all type of question to study the perception of knowledge, attitudes and practices separately and effectively.

KNOWLEDGE

Table 2. Knowledge of typical women's health issues that respond well to physiotherapy treatments

	Frequency	Percentage	Valid Percent	Cumulative Percent
high	140	37.1	37.1	37.1
moderate	223	59.2	59.2	96.3
low	14	3.7	3.7	100.0
Total	377	100.0	100.0	

The Table 2 showed that out of 377 respondents, (37.1%) reported they had a high level knowledge of women health's issues that respond well to physiotherapy treatments. (59.2%) had moderate level knowledge while only (3.7%) females reported that they had low level knowledge about these issues.

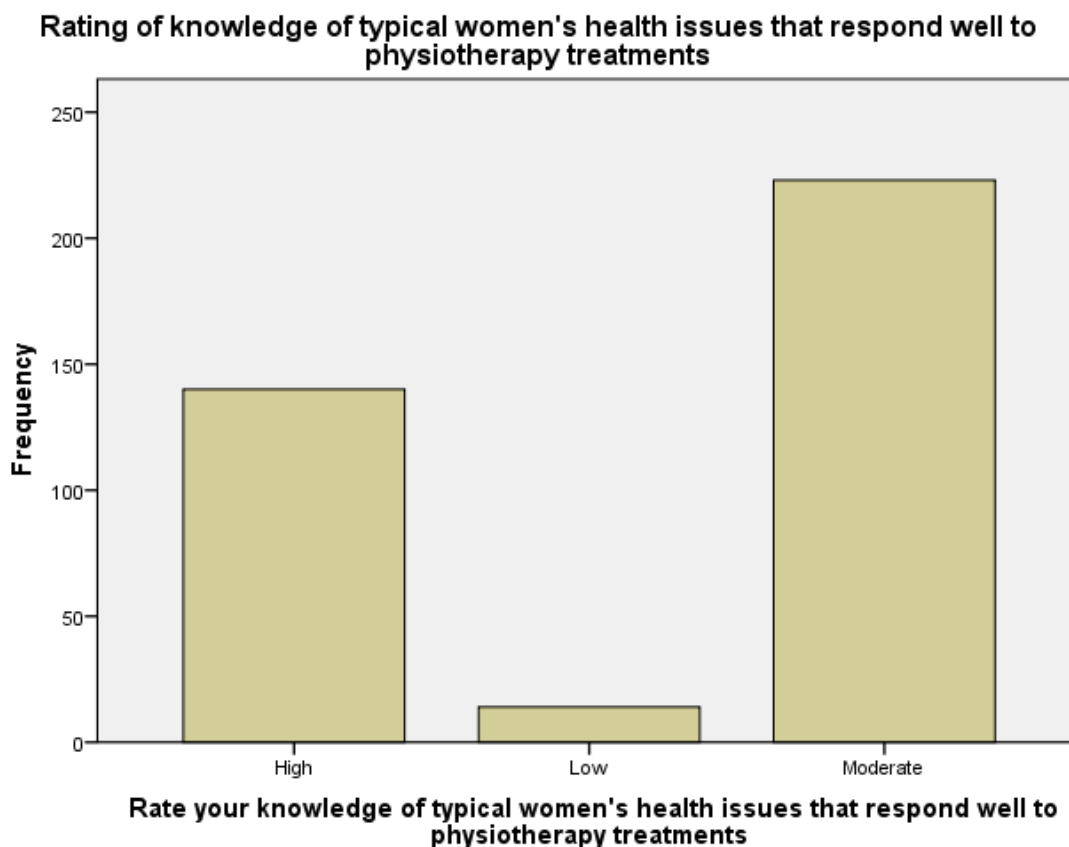


Figure 3

Table 3. Scoring of Understanding Evidence-Based Solutions in Women's Health Physiotherapy Practice

	Frequency	Percent	Valid Percent	Cumulative Percent
high	120	31.8	32.0	32.0
moderate	232	61.5	61.9	93.9
low	23	6.1	6.1	100.0
Total	377	100.0		

Table 3 showed that out of 377 respondents, (31.8%) have high understanding (61.5%) have moderate understanding while (6.1%) of participants have low understanding of physiotherapy practice's evidence-based solutions for women's health challenges.

Score of understanding physiotherapy practice's evidence-based solutions for women's health challenges.

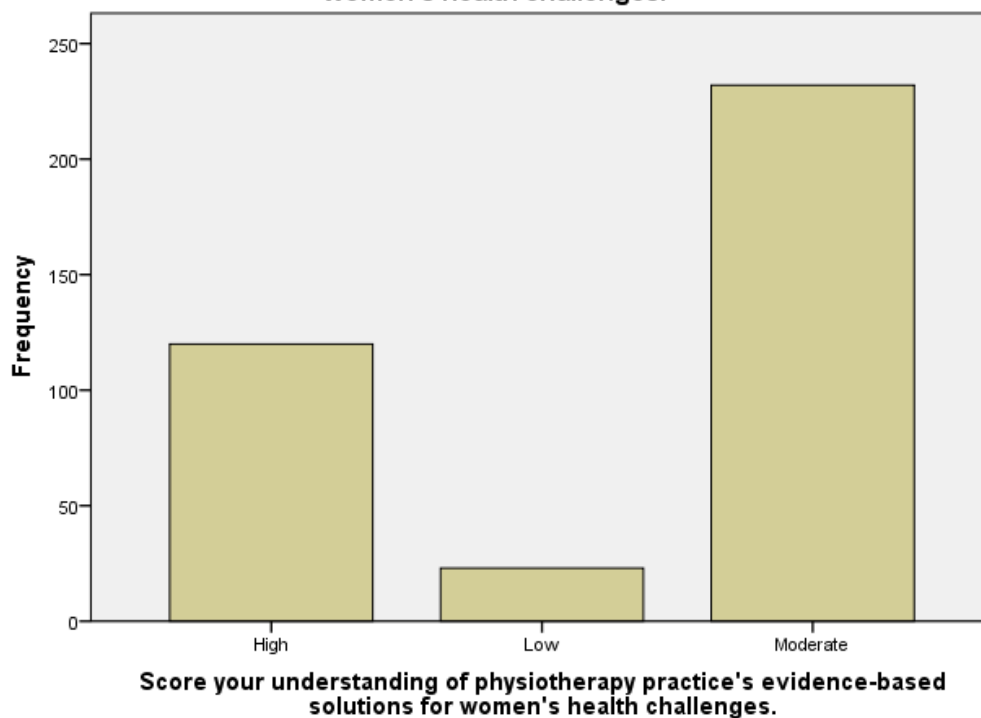


Figure 4

This figure shows the scoring of understanding of physiotherapy practice according to evidence based solutions for women health challenges. The maximum number of participants selected moderate score, then the high score and at last very few of them selected the low scoring of understanding solutions.

ATTITUDES

Table 4. Level of interest in receiving additional training and education in women's health physiotherapy

	Freq uenc y	Pe rce nt	Valid Percen t	Cumula tive Percent
very supportive	166	44. 0	44.0	44.0
somewhat supportive	176	46. 7	46.7	90.7
neutral	31	8.2	8.2	98.9
somewhat unsupportive	3	.8	.8	99.7

very unresponsive	1	.3	.3	100.0
Total	377	10	100.0	0.0

The Attitudes of majority of the participants was supportive in receiving additional training and education in women health physiotherapy. (44%) were very supportive, (46%) were some that supportive, (8.2%) were neutral and (1.1%) were not supportive.

Level of interest in receiving additional training and education in women's health physiotherapy

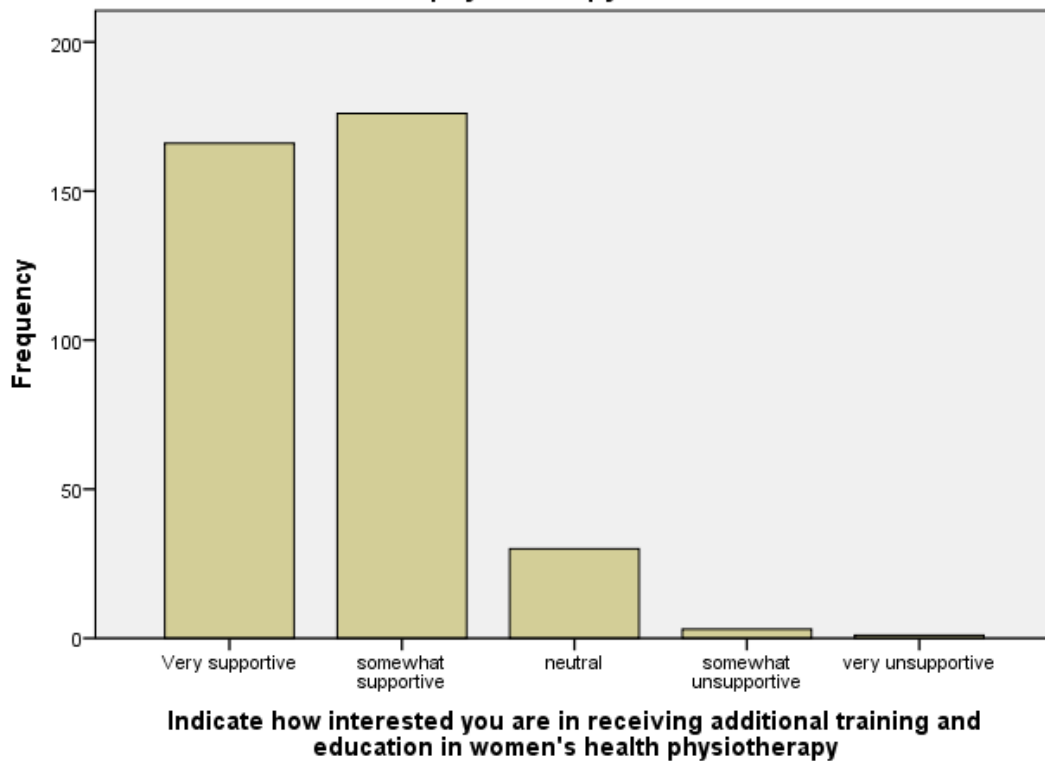


Figure 5

This figure shows that how much interested participants were in receiving additional training and education in women health’s physiotherapy. The answers were given in five categories from maximum to minimum in the order of somewhat supportive, very supportive, neutral, somewhat supportive and very unresponsive.

Table 5. Perception about Physiotherapy for women's health is just as important as other physiotherapy specialties

	Frequency	Percentage	Valid Percent	Cumulative Percent
Strongly agree	183	48.5	48.5	48.5
Agree	160	42.4	42.4	91.0
Neutral	27	7.2	7.2	98.1
Disagree	7	1.9	1.9	100.0
Total	377	100.0	100.0	

A high percentage (48.5%) thinks that women health physiotherapy is just as important as other physiotherapy specialties. More (42.4%) agrees to it, (7.2%) is neutral and (1.9%) does not agree with this thought.

Perception that physiotherapy for women's health is just as important as other physiotherapy specialties?

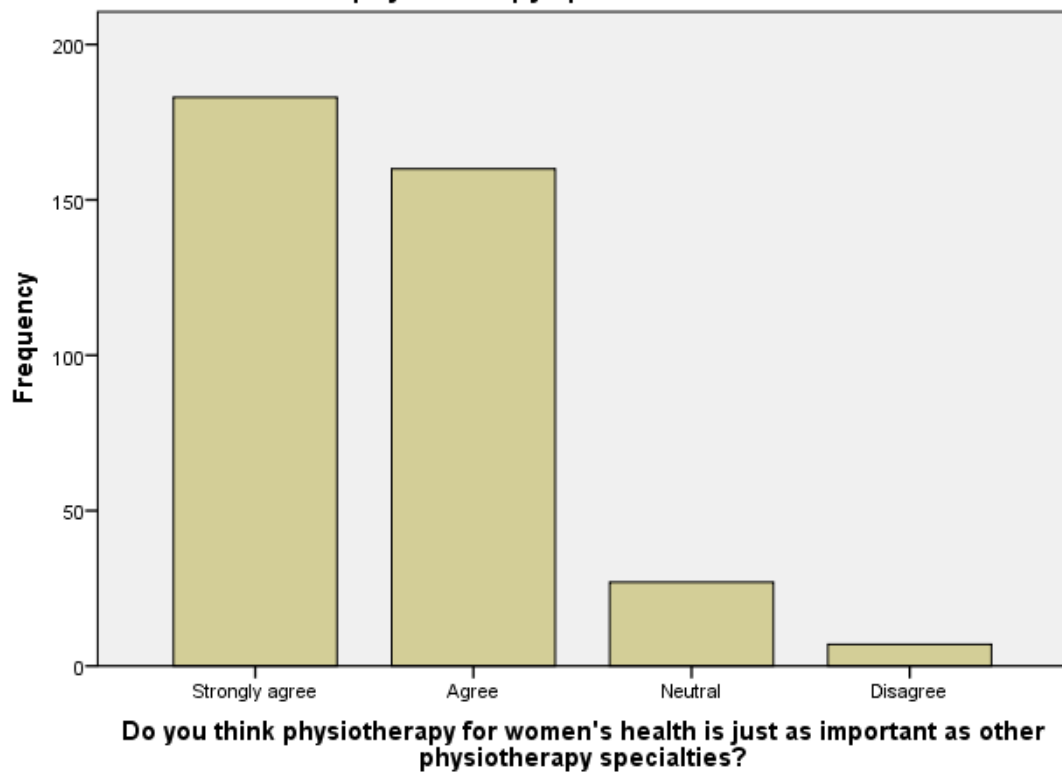


Figure 6

This figure 6 shows perception of participants whether they think if women health physiotherapy if just as important as other physiotherapy specialties. The responses given were in four categories from maximum to minimum of strongly agree, agree, neutral and disagree.

Table 6. Physiotherapy for women's health is crucial to advancing general health and wellbeing

	Frequency	Percentage	Valid Percent	Cumulative Percent
Strongly agree	156	41.4	41.4	41.4
Agree	184	48.8	48.8	90.2
Neutral	31	8.2	8.2	98.4
Disagree	6	1.6	1.6	100.0
Total	377	100.0	100.0	

About (41.4%) of total 377 participants feels that physiotherapy for women's health is crucial to advancing general health and wellbeing. (48.8%) agrees to it, (8.2%) are neutral about the thought while (1.6%) disagrees to it.

Perception about physiotherapy for women's health being crucial to advancing general health and wellbeing

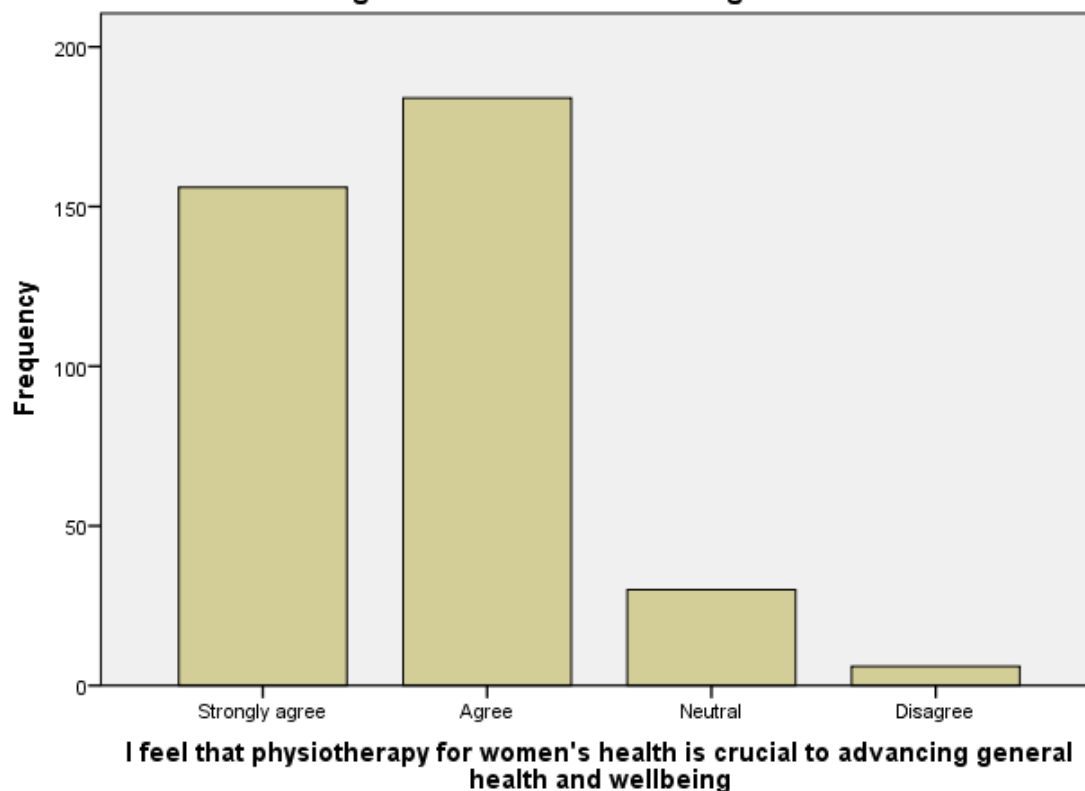


Figure 7

When evaluating the attitudes, perception about WHPT being crucial to health and wellbeing was questioned, majority agreed that its crucial, many more strongly agreed, some were neutral about this perspective and few of them disagreed.

Table 7. Career advancement and further studies in the field of physiotherapy for women's health.

	Frequency	Percentage	Valid Percent	Cumulative Percent
Strongly agree	148	39.3	39.4	39.4
Agree	191	50.4	50.5	89.9
Neutral	31	8.2	8.2	98.1

Disagree	7	1.9	1.9	100.0
Total	377	10	0.0	

It is pleasant to note that (89.7%) participants actively look for chances to advance their studies and career in women health physiotherapy. These attitudes promise the brightness of this field.

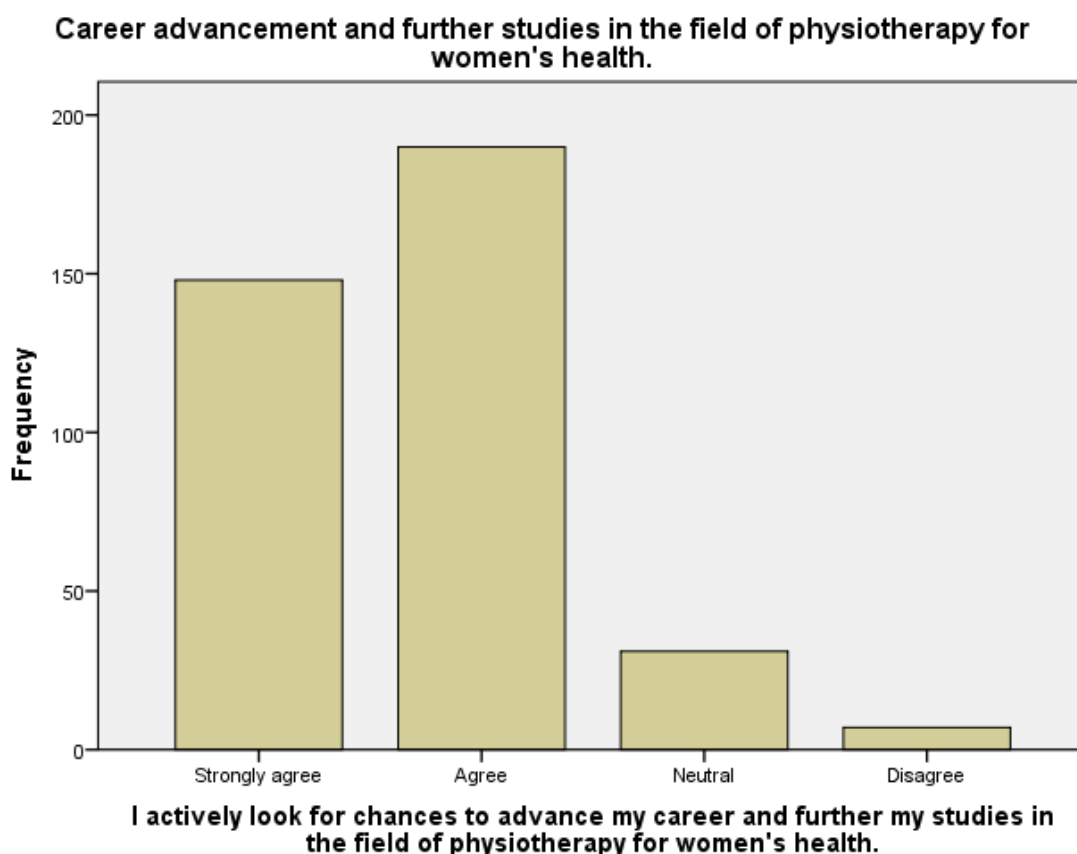


Figure 8:

PRACTICES

Table 8. Extent of women's health physiotherapy techniques in practice

Frequency	Percentage	Valid Percentage	Cumulative Percentage
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alwa ys	83	22. 0	22.0	22.0
often	155	41. 1	41.1	63.1
some times	120	31. 8	31.8	95.0
rarely	18	4.8	4.8	99.7
never	1	.3	.3	100.0
Total	377	10 0.0	100.0	

After evaluating the perception of practice towards women health physiotherapy, the results show that (22%) always use WHPT techniques in their practice, (41.1%) often use it, (31.8%) sometime includes it while (4.8%) rarely adds it and (0.3%) physiotherapists never used these techniques in their practice.

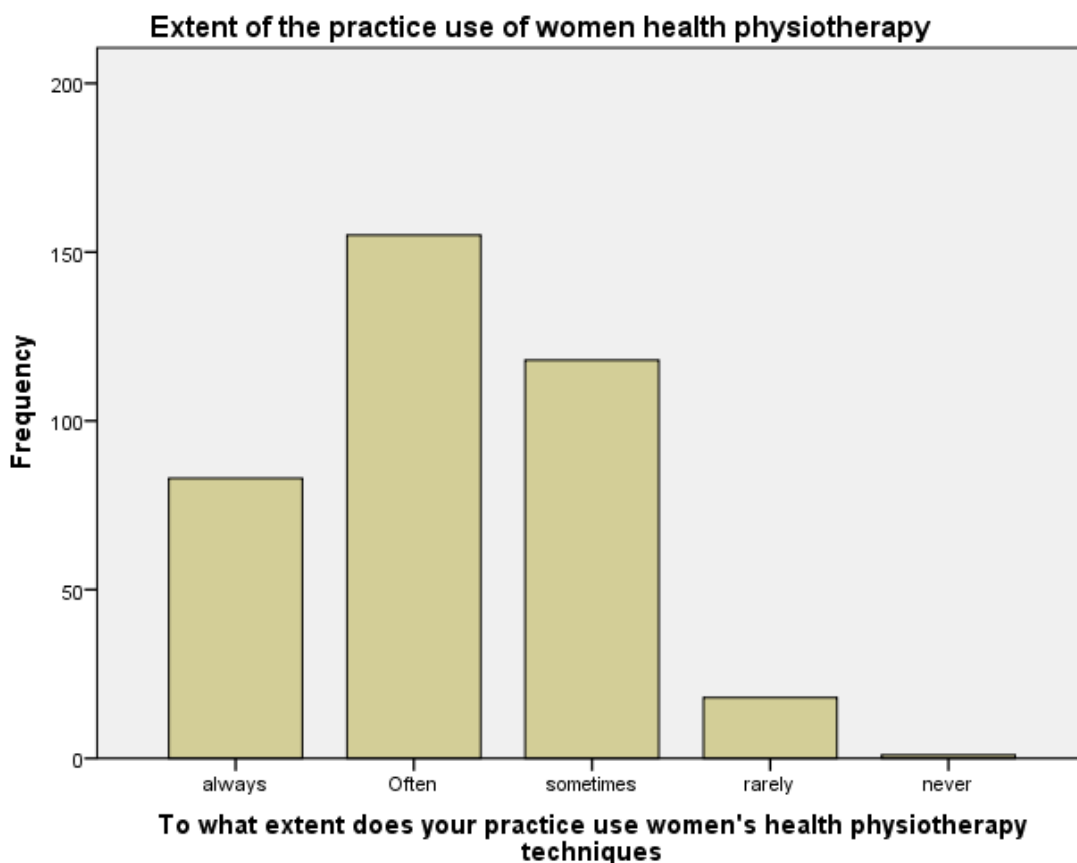


Figure 9

To evaluate the perception of practice, the figure shows that responses were given in five categories of always, often, sometimes, rarely and never. Majority of the responses were positive

and showed that some of them always, some often and some sometimes use women health physiotherapy.

Table 9. Extent of the healthcare system in promoting women's health physiotherapy

	Frequency	Percent	Valid Percent	Cumulative Percent
very supportive	104	27.3	27.5	27.5
somewhat supportive	189	49.9	50.1	77.6
neutral	45	11.9	12.0	89.6
somewhat unsupportive	33	8.8	8.8	98.4
very unsupportive	6	1.6	1.6	100.0
Total	377	100.0		

Table 9 shows that 377 participants think that healthcare system is somewhat supportive (49.9%) in promoting the practice of women health physiotherapy. (27.3%) thinks it fully supports the idea, (11.9%) is neutral, (8.8%) thinks somewhat supportive and (1.6%) thinks it is very unsupportive.

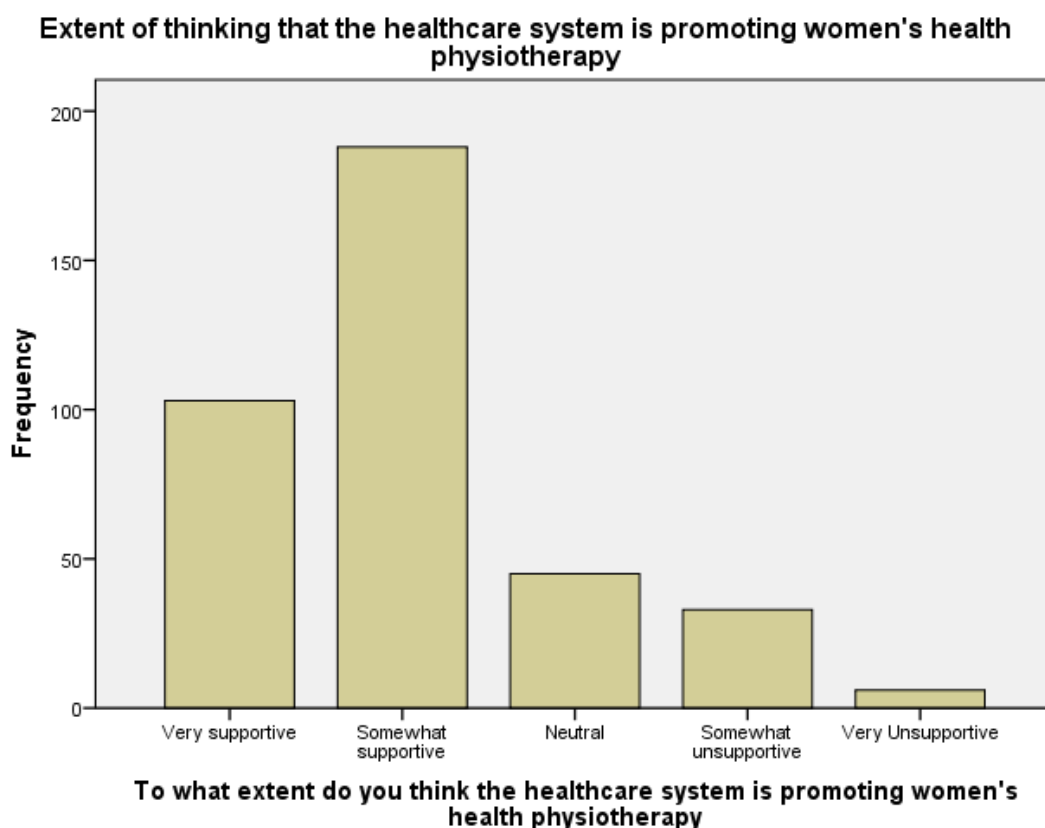


Figure 10

This figure shows that response is given from maximum to minimum responses in five categories of somewhat supportive, very supportive, neutral, somewhat unsupportive and very unsupportive. The end result is that majority thinks that health care system is somewhat supportive of the Women health physiotherapy.

Table 10. Perception about WHPT not important as a practice

	Frequency	Percentage	Valid Percent	Cumulative Percent
Strongly agree	26	6.9	7.0	7.0
Agree	34	9.0	9.1	16.0
Neutral	21	5.5	5.3	21.4
Disagree	123	32.7	32.6	54.0

Strongly disagree	173	45.9	46.0	100.0
Total	377	100.0		

When asked about if WHPT is not important as a practice, (6.9%) strongly agreed, (9%) agreed, (5.3%) were neutral, (32.4%) disagreed and (45.6%) strongly disagreed. The vast majority thinks that WHPT is important as a practice.

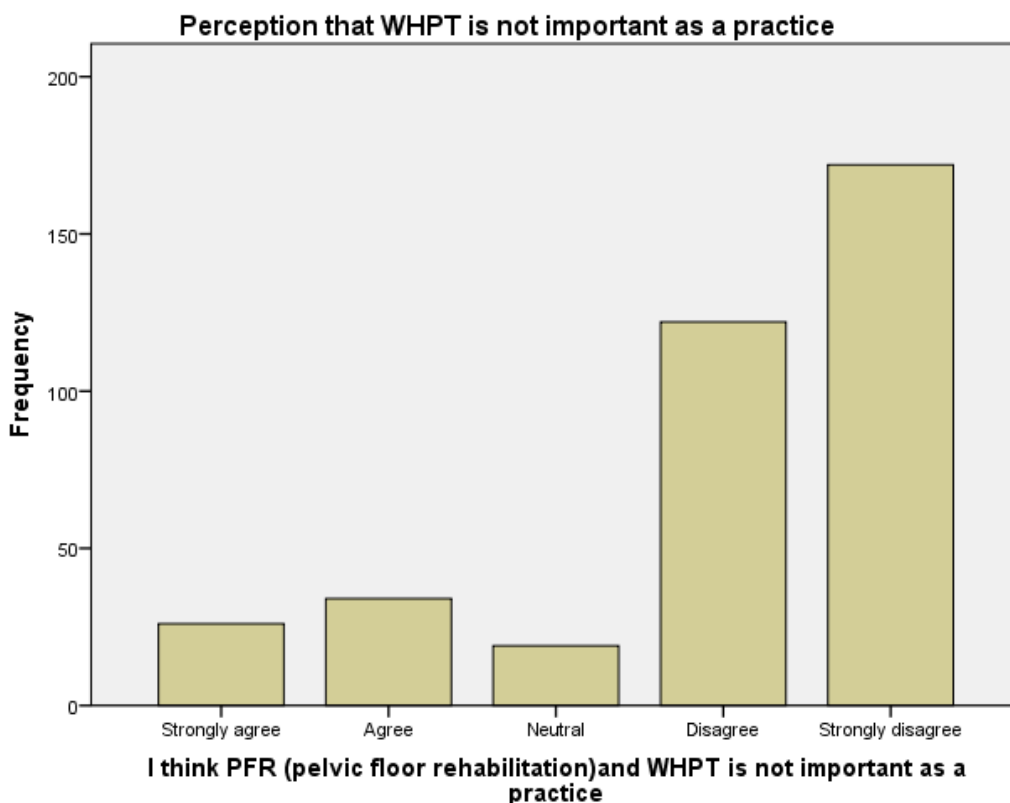


Figure 11

DISCUSSION

The study was conducted to determine the perceptions, knowledge, attitudes, and practices regarding women's health physiotherapy among female practicing physiotherapists. In this study, total of 377 participants were included, all were females and practicing physiotherapists by profession. Majority of them were post graduates while few were DPT graduates. Out of 377 respondents, most of them reported that they had a high level knowledge of women health's issues that respond well to physiotherapy treatments. Majority had moderate level knowledge while only few females reported that they had low level knowledge about these issues. The Attitudes of majority of the participants was supportive in receiving additional training and education in women health physiotherapy. Most of them were very supportive, few were somewhat

supportive, few were neutral and only 1.1% were not supportive. After evaluating the perception of practice towards women health physiotherapy, the results show that majority always use WHPT techniques in their practice, some often use it, while only 0.3% physiotherapists never used these techniques in their practice.

A study conducted among obstetricians/gynecologists working at a tertiary hospital in Ghana in which sixty-one respondents comprising 7 consultants, 20 senior residents and 34 junior residents, with age median age of 35 years (range: 29–65 years) were recruited. The participants reported a considerable awareness of physiotherapists' role in obstetrics (between intrapartum & postnatal) but wide variation in gynecology (fPID & uterine prolapse). Consultants were more aware of the role of physiotherapy in antenatal care and gynecology while senior residents had more awareness in intrapartum and postnatal care. Although obstetricians/gynecologists showed appreciable awareness and attitudes towards physiotherapy, there remains a considerable gap in provider education to ensure optimal utilization of physiotherapy in contemporary obstetrics and gynecology(1). Our study also suggested positive attitude and awareness towards women health whereas another study conducted on pregnant women's knowledge, attitudes, and practices about prenatal physiotherapy in Al-Qurayyat. A self-administered questionnaire was distributed to 134 pregnant women in any trimester. Most of the patients had negative attitude on prenatal physical treatment. Moreover, the perception of physiotherapy was not well-regarded. The investigation came to the conclusion that patients' attitudes and perceptions were generally negative (21). While the current study shows, there is a positive attitude and perception of physiotherapy regarding women health.

There was another study conducted on women in Campinas, São Paulo, Brazil to assess their knowledge, attitudes and practices about physical exercise in pregnancy. In this study 161 women of 18 to 45 years of age were interviewed in the third trimester of pregnancy. The women were selected at an ultrasonography clinic accredited to the SUS in Campinas, São Paulo. The results suggest that women's knowledge concerning the practice of physical exercise during pregnancy is reasonable and their attitude is favorable. Almost two-thirds of the women were sufficiently informed about the practice of physical exercise during pregnancy and the vast majority was in favor of it (22). Our study also suggested that the attitude and practices are favorable whereas a study was conducted on Indian pregnant women's understanding, attitudes, and perceptions on the function of physiotherapy in prenatal care. A total of 106 subjects with a mean age of 27 years old were recruited for any trimester. The Kuppaswamy scale, which was used to evaluate the respondents' socioeconomic level, revealed that few of subjects belong to the upper class while majority belong to the middle class. According to this survey, 46% of participants knew about prenatal workouts. But the vast majority of participants were ignorant about the various kinds of prenatal exercise. Because only few participants received a physiotherapy referral as part of their prenatal care plan, the study also demonstrated the paucity of physiotherapy referrals. This demonstrates how uninformed our nation's medical practitioners are about the need of physical therapy in prenatal care, which may further compound pregnant women's ignorance about the benefits of antenatal exercise(23). While the current study indicates that there has been a positive attitude, knowledge and perception of physiotherapy techniques about prenatal care among practicing female physiotherapists.

Another study was conducted on Knowledge, attitude and practice of physical exercises among pregnant women attending prenatal care clinics of public health institutions in Hawassa city, Sidama. All of the study subjects completed interview making a response rate of 100% in this study. The mean adequate knowledge score was 42.2%. Like our study positive attitude towards physical exercise during pregnancy was accounted as 63.7% and proportion of good practice of physical exercise was as 35.8%. Regarding practice of exercise, most of the subjects walk, however; only few women perform pelvic floor exercise were the highest and least practiced physical exercise. Concerning knowledge of exercise, prevent excess weight and increasing energy were the commonly known benefits of physical exercise(24). Whereas a study was conducted on Knowledge, attitude, and practice of antenatal exercises among pregnant women in Ethiopia. It was a cross sectional study. Out of 349 pregnant women the majority of the women said they had never engaged in regular physical activity before to becoming pregnant, and around two thirds said they had never received advice regarding prenatal exercise. The most frequently recommended exercise among those who had received advice regarding Anex was walking while cycling was recommended the least. Social workers and medical experts were the most often mentioned sources of information regarding Anex. According to the research findings, pregnant women appear to have comparatively low understanding of the practice of antenatal exercise compared to global standards. But only a small percentage of people really performed the exercises, and even less followed the American College of Obstetricians and Gynecologists' (ACOG) recommendations (25). The results of this study were contrary to our study which shows there exists a high level of attitude, knowledge and perception about physiotherapy exercises for women health.

CONCLUSIONS

According to the current research results, the female practicing physiotherapists generally showed a range of moderate to high levels of knowledge and hold a positive attitude towards women health physiotherapy. Women health physiotherapy techniques are mostly under practiced and physiotherapists acknowledge the significance of women health physiotherapy. A small minority of physiotherapists who expressed reservations about these techniques tended to be less informed about the field and its clinical practices.

LIMITATIONS

- Female and male physiotherapists working in academic settings, who may have more specialized and subjective knowledge about women's health physiotherapy (WHPT), were not included in this study.
- The research included female practicing physiotherapists aged between 21 and 55 years, excluding those much older than 55 with more experience in the field.

RECOMMENDATIONS

- It is recommended that further study should aim to include both male and female physiotherapists to provide a comprehensive understanding of knowledge, attitudes, and practices related to women's health physiotherapy.

- To enhance the generalizability of findings, researchers should consider expanding the study beyond one area to include physiotherapists from different areas or regions.
- It is also recommended to study different age groups separately and include physiotherapists with varying levels of experience, including also older practitioners.
- Selecting a longitudinal study design could track changes in knowledge, attitudes, and practices over time among physiotherapists. This approach could reveal trends, effectiveness of training interventions, and evolving challenges in WHPT.

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