

# Awareness Of Role Of Physiotherapy On Quality Of Life In Rural Area

Pranali Ashok Khatkale<sup>1</sup>, Dr. Mayuri shah<sup>2</sup>

<sup>1</sup>Final year student, Krishna college of physiotherapy, Krishna Vishwa Vidyapeeth, Karad.

<sup>2</sup>Assistant professor, Department of neurosciences, Krishna college of physiotherapy, Krishna Vishwa Vidyapeeth, Karad.

## Abstract:

Physiotherapy improves mobility, function, and quality of life through prevention, treatment, and rehabilitation. Yet awareness in rural areas is low, where most people with disabilities live. In India, physiotherapy is still developing and often misunderstood as only exercise or massage. With only about 37% of rural populations aware of its benefits, this study aims to assess and increase knowledge of physiotherapy's role in enhancing health and daily functioning, encouraging participation to improve quality of life.

**Method:** The current study was a survey-based cross-sectional study. The study had 183 participants in all. Two questionnaires were used to collect data: a validated 7-item questionnaire to assess participants awareness of physiotherapy and the SF-36 questionnaire to assess quality of life. Together, these instruments made it possible to conduct a thorough evaluation of the participants' health-related quality of life as well as their understanding of physical therapy.

## Result :

The research indicated that a significant number of individuals in rural areas have moderate to poor health, encountering physical limitations in their everyday activities, with 40% of them suffering from anxiety or depression. In spite of these health challenges, merely 23.9% had access to physiotherapy, while more than half were not informed about its purpose, and knowledge of specific treatments was quite limited. This underscores a significant discrepancy between health requirements and the uptake of physiotherapy, emphasizing the pressing need for community-focused awareness initiatives and improved integration of physiotherapy services into the healthcare systems in rural areas.

## Conclusion:

Even though 40–45% of people in rural areas are aware of physiotherapy, only 23.9% have actually used its services, according to the study. Many face mental and physical difficulties, and few people are aware of the available therapies and when to see a physiotherapist. The worse quality of life in the rural population is probably a result of this awareness and use discrepancy.

**Keywords:** Physiotherapy, rural awareness, quality of life, functional capacity, rehabilitation, mobility improvement, pain management, healthcare access, chronic illness management, disability care, and preventive healthcare.

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## INTRODUCTION

Physical therapy, as defined by the World Confederation of Physiotherapy, is a professional service aimed at developing, restoring, and maintaining the highest level of mobility and functional capacity throughout life for both individuals and populations [5]. Despite its proven effectiveness in prevention and treatment, physiotherapy awareness continues to remain a challenge, particularly in rural areas [1,3].

To maintain optimal functioning and improve quality of life, physiotherapy plays a crucial role by enhancing pulmonary function, immunological responses, cardiopulmonary endurance, mental health, and overall functional ability [2]. In conditions such as HIV, the long-term goal of physiotherapy management is to enhance quality of life [9]. Physiotherapists assess, design, and implement rehabilitation programs to maximize movement, reduce pain, and prevent or treat complications arising from illness, injuries, and disabilities [7]. Interventions may include exercises, manual therapy, ultrasound, heat, laser therapy, and other modalities [4]. Over time, the scope of

physiotherapy has expanded into specialized fields such as women's health, sports, neurology, pediatrics, orthopedics, cardiopulmonary rehabilitation, and geriatrics [2].

Physiotherapy benefits individuals across all life stages, from labor preparation to sports participation and the management of chronic health conditions like asthma, back pain, and injuries [6]. Historically, it became an essential part of total rehabilitation after the World Wars. According to the World Disability Report [5], nearly 10% of the global population lives with disabilities, and approximately 80% of them reside in rural areas, where access to physiotherapy and rehabilitation remains limited.

Quality of life (QoL) is defined as the degree of well-being, life satisfaction, health, and functional ability an individual experiences. Key components include physical health (energy, mobility, daily activities, work capacity), psychological health, spirituality, and environmental factors [10]. For example, temporomandibular joint dysfunction can limit daily functioning and social interaction, reducing QoL, but

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physiotherapy intervention can restore functional ability and improve overall well-being [2].

Unfortunately, rural populations often hold misconceptions about physiotherapy, viewing it as limited to exercises or massage. This perception, combined with low awareness, hinders access and utilization [8]. Existing research confirms the positive impact of physiotherapy on quality of life, yet studies suggest that only about 37% of the rural population is aware of its role [1]. This lack of awareness indirectly affects their health outcomes and overall quality of life. Therefore, this study aims to assess and improve awareness of physiotherapy in rural populations, with the goal of promoting education, increasing participation in physiotherapy programs, and ultimately enhancing the quality of life for these communities.

**Method :** This study was a survey-based observational study conducted over a period of six months in Karad, Maharashtra. The aim was to assess the awareness of lumbar disc herniation among heavy weightlifters. A total of 79 male participants, all aged above 25 years and actively involved in weightlifting, were selected using a simple random sampling method. Data was collected through a structured collected. The survey design allowed for the collection of self-reported information, making it suitable for evaluating knowledge and awareness in a specific target population.

### INCLUSION CRITERIA:

1. Both male and female
2. Rural areas
3. Age below 70 years

### EXCLUSION CRITERIA:

1. Age above 70 years
2. Urban areas

### Ethical Committee Approval

The approval for this study is gained from the Institutional Ethics Committee of Krishna Vishwa Vidyapeeth (Deemed to be University), Karad. Respondents were given a detailed explanation about the study which is to be conducted and inform consent was collected from each and every participant participating in this study. There was a volunteer involvement of all the respondents in this study whose confidentiality was thoroughly maintained.

### 7-Item Questionnaire for awareness of physiotherapy

S r. N o.	Question	Resp onse: Yes	Resp onse: No	interpreta tion
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1	Have you ever heard about physiotherapy?	82	101	Slightly more than half of the participants have at least heard of physiotherapy, but awareness is not universal.
2	Do you know what physiotherapy means?	74	109	Even among those who have heard of it, many do not fully understand what physiotherapy actually is.
3	Have you ever taken physiotherapy treatment?	43	140	Only about one-fourth of the respondents have personally received physiotherapy.
4	Do you know who a physiotherapist is and what they do?	64	119	A majority can identify the professional role, but more than one-third still lack clarity.
5	Do you know when you should visit a physiotherapist?	62	121	Around two-thirds know the situations or conditions that require a physiotherapist's help.

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6	Do you know that electrical modalities are used during physiotherapy?	56	127	Awareness of technical/electrical treatment methods is relatively low.
7	Do you know that exercise therapy is part of physiotherapy?	69	114	Knowledge about exercise-based treatment is moderate.

SF-36 Questionnaire for Quality of life

### 1. General Health Status

Response	n	%
Excellent	15	8.1%
Very Good	27	14.6%
Good	62	33.5%
Fair	63	34.1%
Poor	18	9.7%

Interpretation:

Most participants rated their health as fair or good (67.6%), while only 8.1% considered their health excellent. This indicates moderate overall health perception among rural adults.

### 2. Health Compared to Last Year

response	n	%
Much better	15	8.1%
Somewhat better	23	12.4%
Same	70	37.8%
Worse	65	35.1%
Much worse	12	6.5%

Interpretation:

A majority (37.8%) felt their health remained unchanged, while 41.6% felt their health worsened.

Only 20.5% reported improvement, indicating declining health trends.

### 3. Vigorous Activities Limitations.

Response	n	%
Severely limited	65	35.1%
Slightly limited	63	34.1%
Not limited	57	30.8%

Interpretation:

Nearly 69% reported limitations in vigorous activities such as running or lifting heavy objects.

This highlights significant functional impairment in strenuous physical tasks.

### 4. Moderate Activities Limitation (n = 185)

Response	n	%
Severely limited	71	38.4%
Slightly limited	59	31.9%
Not limited	55	29.7%

Interpretation:

More than two-thirds (70.3%) experienced difficulty with moderate tasks like moving a table.

Functional mobility limitations are common in this population.

### 5. Lifting Groceries Limitation

Response	n	%
Severely limited	69	37.3%
Slightly limited	61	33%
Not limited	55	29.7%

Interpretation:

A majority (70.3%) found lifting or carrying groceries difficult. This shows reduced upperbody and functional strength capability.

### 6. Climbing Several Flights of Stairs (n = 185)

Response	n	%
Severely limited	69	37.3%
Slightly limited	59	31.9%
Not limited	57	30.8%

Interpretation:

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Approximately 69% had difficulty climbing several flights of stairs, indicating significant lower-limb endurance and strength challenges.

### 7. Climbing One Flight of Stairs.

Response	n	%
Severely limited	66	36.5%
Slightly limited	55	30.4%
Not limited	60	33.1%

#### Interpretation:

About one-third were unable to climb even a single flight without difficulty. This indicates substantial daily functional limitations.

### 8. Bending or Kneeling Difficulty

Response	n	%
Severely limited	72	38.9%
Slightly limited	60	32.4%
Not limited	53	28.6%

#### Interpretation:

Most respondents (71.3%) reported difficulty bending or kneeling. This suggests decreased lower-body mobility and flexibility.

### 9. Walking More Than One Mile

Response	n	%
Severely limited	65	35.1%
Slightly limited	65	35.1%
Not limited	55	29.7%

#### Interpretation:

70.2% had difficulty walking long distances, indicating reduced cardiovascular endurance and mobility.

### 10. Walking Several Blocks

Response	n	%
Severely limited	74	40%
Slightly limited	61	33%
Not limited	50	27%

#### Interpretation:

Walking capacity was limited for most participants, with 73% reporting some level of difficulty.

This restriction affects daily independence.

### 11. Walking one block

Response	n	(%)
Yes, fully limited	68	36.8%
Yes, slightly limited	60	32.4%
Not limited	57	30.8%

#### Interpretation:

More than two-thirds (69.2%) reported some limitation in walking one block, indicating reduced mobility levels among participants.

### 12. Bathing or dressing

Response	n	%
Fully limited	68	36.8%
Slightly limited	59	31.9%
Not limited	58	31.4%

#### Interpretation:

Daily activities such as dressing and bathing were limited in 68.7% of participants, showing a noticeable decline in functional independence.

### 13. Reduced work time due to physical health

Response	n	%
Yes	95	51.4%
No	90	48.6%

#### Interpretation:

Over half of participants had to reduce work time due to physical health issues, suggesting moderate physical health limitations.

### 14. Accomplished less than desired due to physical health

Response	n	%
Yes	107	57.8%
No	78	42.2%

#### Interpretation:

A majority (57.8%) could not complete tasks as planned due to physical health, reflecting reduced work productivity.

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### 15. Limitations in type or amount of work

Response	n	%
Yes	108	58.4%
No	77	41.6%

#### Interpretation:

Most participants experienced work-related limitations, indicating a significant impact of health on occupational functioning.

### 16. Difficulty performing work/activities (needed extra effort)

Response	n	%
Yes	109	58.9%
No	76	41.1%

#### Interpretation:

More than half reported difficulty completing tasks, showing reduced physical capability and endurance.

### 17. Reduced time spent on work due to emotional problems

Response	n	%
Yes	97	52.4%
No	88	47.6%

#### Interpretation:

Emotional issues affected work time in about half of the respondents, indicating moderate emotional distress.

### 18. Accomplished less than expected due to emotional problems

Response	n	%
Yes	106	57.3%
No	79	42.7%

#### Interpretation:

Emotional difficulties caused reduced task performance in more than half, showing psychological influence on daily life productivity.

### 19. Not performing tasks as carefully as usual

Response	n	%
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Yes	102	55.1%
No	83	44.9%

#### Interpretation:

Task attention and precision were affected for 55.1% of participants, indicating emotional or cognitive strain.

### 20. Emotional problems interfering with social activities

Response	n	%
Not at all	13	7%
Slightly	43	23.2%
Somewhat	64	34.6%
Quite a lot	52	28.1%
Extremely	13	7%

#### Interpretation:

A significant proportion (69.5%) experienced emotional interference in social activities, showing reduced social participation and well-being.

### 21. Physical pain in last 4 weeks?

Response	n	(%)
No pain	22	11.9%
Very mild	34	18.4%
Moderate pain	62	33.5%
Severe pain	46	24.9%
Very severe	21	11.4%

#### Interpretation:

Nearly 70% experienced moderate to severe pain, indicating a high burden of physical discomfort among participants.

### 22. Pain interfering with normal work

Response	n	%
None	23	12.4%
Slightly	33	17.8%
Moderate	60	32.4%
Quite a lot	13	7%
Extremely	56	30.3%

#### Interpretation:

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A large proportion (69.7%) reported moderate to extreme interference in daily work, showing a major impact of pain on functioning.

### 23. Feeling full of energy

Response	n	%
Always	14	7.6%
Often	46	24.9%
Sometimes	87	47%
Rarely	28	15.1%
Never	10	5.4%

Interpretation:

Most participants (62%) reported only sometimes or rarely feeling energetic, suggesting reduced vitality levels.

24. Have you ever felt very depressed or sad, to the extent that nothing could make you feel better?

Response	n	%
Always	20	10.9%
Often	40	21.9%
Sometimes	70	38.3%
Rarely	35	19.1%
Never	18	9.8%

Interpretation (Short, Clear, and Research-Appropriate)

Most participants (38.3%) reported that they sometimes felt very depressed, while 32.8% (Always + Often) experienced these feelings frequently. This indicates a considerable level of emotional distress among the rural population. Only 9.8% stated that they never felt depressed, suggesting that mental health concerns are relatively common in this group.

### 25. Feeling stressed or worried

Response	n	%
Always	9	4.9%
Often	30	16.2%
Most of the time	60	32.4%
Sometimes	53	28.6%

Rarely	30	16.2%
Never	3	1.6%

Interpretation:

About 49% reported frequent stress, showing emotional strain in daily living.

### 26. Feeling calm and peacefully

Response	n	%
Always	12	6.5%
Often	25	13.5%
Most of the time	91	49.2%
Sometimes	36	19.5%
Rarely	20	10.8%
Never	1	0.5%

Interpretation:

Most respondents (62.7%) often or mostly felt peaceful, indicating moderate emotional stability.

### 27. Do you have enough energy?

Response	n	%
Always	7	3.8
Most of the time	27	14.6
Often	100	54.1
Sometimes	33	17.8
Rarely	13	7.0
Never	5	2.7

Interpretation

More than half of the respondents (54.1%) reported having enough energy often, indicating a moderate to good energy level in most participants. However, a proportion of individuals still reported reduced energy, which may be related to physical or musculoskeletal issues

### 28. Feeling depressed or sad

Response	n	%
Always	5	2.7%

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Often	27	14.6%
Most of the time	57	30.8%
Sometimes	33	17.8%
Rarely	43	23.2%
Never	20	12.4%

### Interpretation:

About 48% experienced sadness frequently, showing moderate emotional disturbance.

### 29. Do you feel fatigued?

Response option	n	%
Always	6	3.2
Most of the time	30	16.2
Often	61	33.0
Sometimes	50	27.0
Rarely	34	18.4
Never	4	2.2

### Interpretation

Fatigue was commonly reported among participants, with 33% experiencing it often and 27% sometimes. This indicates that fatigue is prevalent in the study population and may influence daily activities and functional capacity.

### 30. Are you a happy person?

Response option	n	%
Always	11	6.0
Most of the time	37	20.0
Often	92	49.7
Sometimes	29	15.7
Rarely	11	6.0
Never	5	2.6

### Interpretation

Almost half of the participants (49.7%) reported feeling happy often, while 20% felt happy most of the time. This suggests that the majority of respondents have a

generally positive emotional status, with only a small proportion experiencing low levels of happiness.

### 31. Do you often feel tired or fatigued? (n = 185)

Response	n	%
Always	6	3.2%
Most of the time	35	18.9%
Sometimes	73	39.5%
A few times	69	37.3%
Never	2	1.1%

### Interpretation

Most participants (39.5%) reported feeling tired sometimes, while 18.9% experienced frequent tiredness. Only a very small proportion (1.1%) never felt tired, indicating that fatigue is common in the rural population.

### 32. In the last four weeks, how much did your physical or emotional health interfere with your social activities? (n = 185)

Response	n	%
Always	5	2.7%
Most of the time	62	33.5%
Sometimes	39	21.1%
A little	72	38.9%
Never	7	3.8%

### Interpretation

A majority reported some level of interference, with 33.5% experiencing it most of the time.

Only 3.8% reported no interference, showing that social functioning is moderately affected.

### 33. I seem to get sick a little easier than other people.

Response	n	%
Strongly Agree	16	8.6%
Agree	79	42.7%
Neutral	26	14.1%
Disagree	46	24.9%
Strongly Disagree	18	9.7%

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### Interpretation

About half the participants (51.3%) agreed that they fall sick easier than others, suggesting perceived low immunity or higher vulnerability among many adults.

34. I am as healthy as anyone I know.

Response	n	%
Strongly Agree	19	10.3%
Agree	51	27.6%
Neutral	47	25.4%
Disagree	61	33%
Strongly Disagree	7	3.7%

### Interpretation

Only 37.9% agreed with this statement, while 33% disagreed, indicating mixed perceptions of personal health compared to peers.

35. I expect my health to get worse.

Response	n	%
Strongly Agree	7	3.8%
Agree	54	29.2%
Neutral	58	31.4%
Disagree	43	23.2%
Strongly Disagree	23	12.4%

### Interpretation

A combined 33% believe their health may worsen in the future, while 35.6% disagree. This shows moderate concern about future health.

36. My health is excellent.

Response	n	%
Strongly Agree	25	13.6%
Agree	63	34.2%
Neutral	21	11.4%
Disagree	71	38.6%
Strongly Disagree	4	2.2%

### Interpretation

A majority (40.8%) hold a negative perception of their health, while 47.8% view their health positively. This indicates varied subjective health status among participants.

### DISCUSSION:

#### Quality of life status

The study of my research topic is to evaluate the awareness of role of physiotherapy on quality of life in rural area .For this study the data was collected by two questionnaire, one for assessing quality of life and other for evaluating the awareness of physiotherapy in rural area. The result show a strong link and gap that is essential for rural communities healthcare planning.

According to the response ,a significant percentage of living population in rural area have moderate to poor health. With evidence of functional limitation is found in daily task like walking ,climbing,carrying out work related tasks, 40% of respondents reported regularly having mental health conditions such anxiety and depression, which limited their engagement in social and physical activities.

#### Awareness and Utilization of Physiotherapy

Despite the evident physical and emotional limitations, only 23.9% of respondents had ever taken physiotherapy treatment. A considerable portion of the population lacked fundamental awareness:

54.9% had never heard of physiotherapy.

59.2% did not know what physiotherapy actually means.

64.7% did not know who a physiotherapist is or what they do.

More than one-third of participants were unaware of when to consult a physiotherapist.Even among those who had heard of physiotherapy, awareness of specific treatments like electrotherapy and exercise therapy was limited, with 69% and 62% respectively being unaware.

#### Gap Between Need and Awareness

The findings reveal a significant mismatch: there is high prevalence of physical limitations and emotional distress, yet low utilization and awareness of physiotherapy. Physiotherapy can directly benefit individuals facing mobility issues, chronic pain, injury rehabilitation, and even help improve emotional health through activity-based therapies. However, lack of awareness and accessibility prevents rural populations from benefiting fully.These results underscore the lack of integration of physiotherapy into rural health services, and point toward the need for enhanced community-based awareness and services.

### CONCLUSION

This study was conducted to assess the awareness of the role of physiotherapy in improving the quality of life in a rural population. The findings reveal that while a moderate percentage of participants (approximately 40 - 45%) are aware of physiotherapy and understand who a physiotherapist is, only a small fraction (23.9%) have actually received physiotherapy treatment. Many individuals are unaware of when to consult a

physiotherapist and are unfamiliar with the specific techniques used during treatment, such as electrotherapy and exercise therapy. Simultaneously, the data from the quality of life questionnaire indicate that a significant number of individuals in the rural population experience physical discomfort, fatigue, difficulty performing daily activities, and emotional challenges. These results suggest a clear gap between general awareness and actual utilization of physiotherapy services. Despite some level of recognition, there remains insufficient knowledge regarding the full scope, benefits, and appropriate indications for physiotherapy. This lack of understanding, coupled with possible issues of accessibility, may contribute to the poorer quality of life observed in the rural population

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