

## WCPT mreža za promocijo zdravja v življenju in pri delu

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**Uvod:** Med fizioterapevti po svetu narašča število tistih, ki jih s strokovnega vidika vedno bolj zanimata promocija zdravja in preventiva. Po drugi strani pa ne vemo, ali fizioterapevti igrajo svojo vlogo pri promociji zdravja in preprečevanju invalidnosti, zato je bila ena od diskusij na prejšnjem kongresu World Confederation for Physical Therapy (WCPT) junija 2011 v Amsterdamu namenjena tej temi (1). Kot posledica omenjene diskusije je tako med fizioterapevti na globalni ravni nastala pobuda za ustanovitev nove mreže WCPT za promocijo zdravja v življenju in pri delu (2). **Namen:** Tovrstna mednarodna WCPT-mreža je osredotočena na promocijo zdravja v vseh pogledih, ki so vitalnega pomena za uspešno življenje in delo. Pokriva vrednote in težave, povezane s promocijo zdravja, wellnessom in preprečevanjem invalidnosti v vseh okoljih skozi vse življenje, vključno s težavami, povezanimi s spremembo vedenja. **Cilji:** Mreža ima pet glavnih ciljev, ki so navedeni v nadaljevanju: 1) spodbujanje fizioterapevtov, da bi promovirali zdravje in dobro počutje v življenju ter pri delu, zdrav življenjski slog in aktivno življenje svojim klientom oziroma pacientom; 2) prepoznavanje in mreženje fizioterapevtov oziroma članov WCPT, ki so tudi strokovnjaki na področjih promocije zdravja v življenju in pri delu, wellnessa, preprečevanja invalidnosti in vedenjskih sprememb; 3) izmenjavanje dokazljivega znanstvenega znanja, najboljših praks, idej, mnenj in promocijskega gradiva, povezanega s promocijo zdravja v življenju in pri delu, z wellnessom, preprečevanjem invalidnosti in vedenjskimi spremembami; 4) spodbujanje znanstvenega dela med fizioterapevti oziroma člani WCPT na področjih promocije zdravja v življenju in pri delu, wellnessu, preprečevanju invalidnosti in vedenjskih sprememb, kar bi posledično ustvarjalo spremembe v sistemu izobraževanja fizioterapevtov in v praksi, zato da bi vse skupaj postalo bolj usmerjeno k tem problemom; 5) promoviranje zdravja in dobrega počutja v življenju in pri delu, spodbujanje zdravega življenjskega sloga in aktivnega življenja med fizioterapevti, člani WCPT. **Članstvo:** V WCPT-mreži za promocijo zdravja v življenju in pri delu je članstvo brezplačno in odprto za vse fizioterapevte, člane WCPT, ki delajo na področjih promocije zdravja, wellnessa, preprečevanja invalidnosti in/ali vedenjskih sprememb, vključno s tistimi, ki se samo zanimajo za omenjena področja. Za članstvo lahko posameznik zaprosi po elektronski pošti tako, da navede svoje ime, državo, e-naslov, pripadnost WCPT-organizaciji, kratek opis svojega profesionalnega ozadja in področja strokovnosti na [WCPT.HPLWmembers@workingtowardswellbeing.com](mailto:WCPT.HPLWmembers@workingtowardswellbeing.com). Prek članstva bo povezan s kolegi, ki imajo enako ali podobno ozadje in interese v njegovi državi in tujini. **Zaključki:** Promocija zdravja postaja zelo pomembna tema za WCPT. Zadnji svetovni dan fizioterapevtov je bil na primer osredotočen na gibanje za zdravje, zato se pričakuje, da bo glede na članstvo v prihodnosti mreža postala ena največjih WCPT-mrež.

**Ključne besede:** WCPT-mreža, promocija zdravja, fizioterapevti.

## WCPT Network for Health Promotion in Life and Work

**Background:** There is an increase among those physical therapists in the world who are getting more and more interested in health promotion and prevention from their point of professional view. On the other hand we do not know if physical therapists play their part at health promotion and disability prevention. That is why one of discussion panels at the last World Confederation for Physical Therapy (WCPT) Congress in June 2011 in Amsterdam was oriented to that topic (1). Consequently an initiative was created among physical therapists on a global level for the establishment of a new WCPT Network for Health Promotion in Life and Work (2). **Purpose:** This international WCPT network is focused on the promotion of all aspects of health vital to successful living and working. This network covers the values and issues concerning health promotion, wellness and disability prevention in all settings across the lifespan, including issues related to behavioural change. **Objectives:** The network has five main objectives, which are quoted here: 1) facilitate physical therapists to promote health and well-being in life and work, healthy lifestyle and active living for their clients/patients; 2) identify and network with physical therapists/WCPT members who are also experts in the fields of health promotion in life and work, wellness, disability prevention and behavioural change; 3) exchange evidence-based/scientific knowledge, best practices, ideas, opinions and promotion materials related to health promotion in life and work, wellness, disability prevention and behavioural change; 4) facilitate scientific work among physical therapists/WCPT members in the fields of health promotion in life and work, wellness, disability prevention and behavioural change, consequently creating changes in physical therapy educational system and practice, so that it becomes more oriented towards these issues; 5) promote health and well-being in life and work; facilitate healthy lifestyle and active living among physical therapists/WCPT members. **Membership:** Membership in WCPT Network for Health Promotion in Life and Work is free and open to physical therapists/WCPT members working in fields of health promotion, wellness, disability prevention and/or behavioural change, including to those only interested in mentioned fields. You can apply for membership by sending an email with your name, country, e-mail address, WCPT member organization he/she belongs to, short professional background and field(s) of expertise to [WCPT.HPLWmembers@workingtowardswellbeing.com](mailto:WCPT.HPLWmembers@workingtowardswellbeing.com). Through the membership he/she will be linked with colleagues who share the same or similar background and interests in his/her own country and abroad. **Conclusions:** Health promotion is becoming very important topic for the WCPT. The last World Physical Therapy Day was focused on Movement for Health for example. That is why it is expected that this network will be one of the largest WCPT networks membership wise in the future

**Keywords:** WCPT Network, Health Promotion, Physical Therapists.

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## Potreba po organizaciji fizioterapije na domu

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**Uvod:** V 90. letih se je večina evropskih držav spopadala s finančnimi težavami. Primorane so bile znižati stroške za zdravstvo. Veliko pozornosti so namenili fizioterapiji na domu (1) ob predvidevanju, da so stroški zdravljenja s tako obravnavo nižji. Sledile so številne študije o učinkovitosti fizioterapije bolnikov na domu. Tovrstna obravnava je dokazano učinkovita in sprejemljiva tako za paciente kot njihovo družino ter potencialno zmanjšuje trajanje ležalne dobe v bolnišnicah (2). Prav tako je bilo dokazano, da so stroški zdravljenja nižji v primerjavi z dolgim standardnim bolnišničnim zdravljenjem (1). Prednost fizioterapije na domu je, da se izvaja tam, kjer bo pacient naučene veščine tudi uporabljal. Pacienti se prej in lažje prilagodijo bivanju v domačem okolju, aktivneje sodelujejo, so bolj samoiniciativni in bolj izrazijo svoje cilje (3, 4). Namen raziskave je bil z anketo prebivalcev ugotoviti potrebo po organizaciji fizioterapije na domu. **Metode:** Anketa je vključevala 50 naključno izbranih prebivalcev občine Kranj (46 % moških in 54 % žensk), starih od 60 do 90 let ter oddaljenih od fizioterapevtske ambulante največ 10 kilometrov. Delo je potekalo tako, da smo se prej najavili po telefonu in pustili anketo, ki vsebuje 16 vprašanj, da jo anketiranec samostojno reši brez navodil in sugestij. **Rezultati:** Anketa je pokazala, da je bila večina preiskovancev oddaljena od prve fizioterapevtske dejavnosti od 1 do 5 kilometrov, kar je razmeroma blizu. Večina preiskovancev (40 %) je navedla, da potrebuje nekoga, da jih pelje na fizioterapijo. Pri tej ugotovitvi je zanimivo, da je le pri 16 % preiskovancev težava za prihod na fizioterapijo prevoz. Pri vprašanju, zakaj bi želeli imeti fizioterapijo na domu, je večina odgovorila, da bi imela fizioterapijo na domu zaradi individualnega dela s terapevtom. Izbran vzorec preiskovancev je bil pretežno brez resnih zdravstvenih težav (57,9 %), le nekateri so imeli travmatološka, nevrološka, kardiovaskularna ali respiratorna obolenja (33,3 %). **Zaključki:** Na podlagi rezultatov naše ankete menimo, da bi bila uvedba fizioterapevtske dejavnosti na domu smiselna. Delovala naj bi prek koncesije in bila financirana prek ZZZS, pa tudi samoplačniško. Pomembno bi bilo razširiti to dejavnost po vsej Sloveniji, v vseh zdravstvenih domovih in njihovih območnih enotah. Nadalje pa bi bilo treba razmišljati o ustreznem izobraževanju fizioterapevtov. S ponovno uvedbo izvajanja fizioterapije na domu bi naredili velik korak naprej in tako omogočili fizioterapijo bolnikom vseh starosti in z vsemi patološkimi stanji.

**Ključne besede:** fizioterapija, fizioterapija na domu, organizacija fizioterapije.

## The need for organisation of home-based physiotherapy

**Background:** In the nineties, the majority of European countries faced financial difficulties. They were forced to reduce the costs of health care. Greater attention was assigned to home-based physiotherapy (1) on the assumption that the costs of treatment would therefore decrease. Numerous studies dealing with efficiency of home-based physiotherapy followed suit. Such treatment was proven effective and acceptable to both patients and their families and potentially reduced the length of hospitalization (2). It was also substantiated that the costs of home-based treatment were lower compared to long conventional hospitalized treatment (1). An advantage of home-based physiotherapy is that it is performed at the same place where also the patients will use the skills learned. They adapt to their home environments earlier and more easily. The patients participating in home-based physiotherapy are more actively involved, take more initiative, and express their objectives to a greater extent (3, 4). The purpose of the research was to conduct a survey and identify the need for home-based physiotherapy. **Methods:** We surveyed a random sample of 50 elderly residents of the City Municipality of Kranj (46 % male and 54 % female) aged 60 to 90 who reside at most 10 km from the physiotherapy. The working procedure was the following: preliminarily, we notified our candidates by phone, and then delivered them the surveys with 16 questions to answer without our instructions and suggestions. **Results:** The results of the survey revealed that the majority of our subjects reside 1 to 5 km from first physiotherapy, which is relatively near. Most subjects stated that they need someone to take them to physiotherapy treatments (40 %). What is interesting with the former statement is that only 16 % of the subjects see transportation to physiotherapy as a problem. The answer of the majority to the question why they would make use of home-based physiotherapy was due to individual work with the physiotherapist. The selected sample of subjects was predominantly without serious health problems (57.9 %), and some were diagnosed with traumatic, neurological, cardiovascular or respiratory conditions (33.3 %). **Conclusions:** Based on the results of our survey, a reintroduction of home-based physiotherapy seems reasonable. The service could be available on concession via The Health Insurance Institute of Slovenia or financed as a self-pay treatment. It is crucial to spread the service throughout Slovenia to all health care centres and their regional units. Furthermore, considerable thought should be given to proper training of physiotherapists. Home-based physiotherapy could become an independent service within the community nursing care under the organization of a health care centre or a concessionaire. A reintroduction of home-based physiotherapy would represent a great improvement and would provide for patients of wide age range and various pathologies.

**Keywords:** physiotherapy, home-based physiotherapy, organization of physiotherapy.

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## Dejavniki za izbor študija fizioterapije, poznavanje poklica in zelene usmeritve po končanem študiju

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**Uvod:** Po standardih Svetovne organizacije za fizioterapijo je fizioterapevt avtonomen strokovnjak, ki mora imeti svobodo za sprejemanje odločitev pri svojem delu (1). Interesi in drugi dejavniki, ki spodbudijo študente za študij fizioterapije, imajo pomembno vlogo, saj njihovo poznavanje poklica in zaposlitvenih možnosti vpliva na načrtovanje študijskih programov in razvoj fizioterapevske stroke (2, 3). Namen raziskave je bil ugotoviti dejavnike za izbor študija fizioterapije med študenti študijskega programa prve stopnje fizioterapija, poznavanje izbranega poklica, želje in načrte glede podiplomskega izobraževanja in poklicnih usmeritev. **Metode:** V raziskavi je bilo 222 anketiranih, študentov 1. in 3. letnika fizioterapije na Zdravstveni fakulteti Univerze v Ljubljani. Ankete so bile razdeljene vsako študijsko leto od leta 2009/2010 do 2011/2012. Narejena je bila opisna statistika. S testom Hi-kvadrat so bile izračunane razlike med spoloma in med 1. in 3. letnikom. **Rezultati:** Najpomembnejši dejavnik za izbiro študija fizioterapije je bilo veselje do dela z ljudmi (57,7 %). Značilnosti poklica fizioterapevt so bile potreba po poklicu (97,8 %), atraktivnost poklica (89,6 %), ugled poklica v Sloveniji (52,8 %), razsežno znanje posameznika (89,6 %), ugled v družbi (64,9 %) in zanesljiva služba (57,7 %). Največja pomanjkljivost poklica je bila nezadostna cenjenost fizioterapevta pri zdravnikih (64,5 %). Več preiskovancev je želelo nadaljevati študij druge stopnje ob delu (53,8 %). Z zaposlitvenimi možnostmi so bili preiskovanci seznanjeni s 66,2 %, menili so, da se je zaposliti kot fizioterapevt v Sloveniji enostavno (49,1 %). O enostavni zaposlitvi v tujini niso bili prepričani (26,6 %). Najbolj želeno področje je bila fizioterapija mišično-skeletnega sistema (24,3 %), najbolj želeno zaposlitveno mesto zasebna praksa (20,3 %). Študentje 3. letnika so bili mnenja, da delo ni dobro plačano (45,6 %), medtem ko so v 1. letniku menili ravno obratno (39,7 %), razlika je bila statistično značilna ( $p < 0,05$ ). Ženske so menile, da je delo dobro plačano (46 %), moški, da ni (50 %), tudi ta razlika je bila statistično značilna ( $p < 0,05$ ). Prav tako je prišlo do statistično značilnih razlik med spoloma ( $p < 0,05$ ) pri mnenju, da poklic ni dovolj cenjen pri zdravnikih (ženske: 67 %), moški pa se niso strinjali z nobeno trditvijo (34 %). **Zaključki:** Poklic fizioterapevta je v slovenski družbi premalo znan v vsej svoji širini in je velikokrat omejen le na poškodbe ali telesno dejavnost. To je lahko vzrok, da so si študentje ustvarili idealno podobo poklica, ki temelji na fizioterapiji v športu in zasebni praksi. Za oblikovanje nove podobe poklica je treba spremeniti mišljenje o poklicu v družbi. Tako bi lahko povečali zanimanje mladih tudi na drugih področjih, na katerih bi bili fizioterapevti nujni, pa je zanje zanimanje zelo majhno.

**Ključne besede:** izobraževalni program, mnenje študentov, poklic fizioterapija.

## Factors that influence the decision to study physiotherapy, understanding of the profession and preferred orientation after graduation

**Background:** According to the standards of the World Confederation for Physical Therapy, physical therapists are autonomous specialists. Various factors encourage students to study physiotherapy (1). Students' knowledge of the profession plays an important role to design study programme (2, 3). The study aimed to identify factors which influence the decision to study physiotherapy, the knowledge of the chosen profession, desires and plans for postgraduate education and professional orientation among the students of the 1st cycle physiotherapy study programme. **Methods:** 222 1<sup>st</sup> and 3<sup>rd</sup> year students of physiotherapy study programme at the Faculty of Health Sciences in Ljubljana participated in the study. Questionnaires were distributed each academic year, starting with 2009/2010 and up to 2011/2012. Descriptive statistics and chi-square test were used for the evaluation of differences between the genders and between 1<sup>st</sup> and 3<sup>rd</sup> year students. **Results:** The most important factor to study physiotherapy was pleasure in working with people (57.7 %). Characteristics of physiotherapy as a profession were: the need for the profession (97.8 %), attractiveness of the profession (89.6 %), appreciation of the profession in Slovenia (52.8 %), extensive knowledge (89.6 %), reputation (64.9 %) and a reliable post (57.7 %). The biggest drawback of the profession was insufficient appreciation of physical therapists by doctors (64.5 %). A lot of students wanted to continue the studies at post-graduate level (53.8 %). 66.2 % of the students were familiar with employment opportunities; they believed that it is easy to find employment in physiotherapy in Slovenia (49.1 %). They were not sure about easy employment opportunities abroad (26.6 %). The most desired area was the muscular-skeletal physiotherapy (24.3 %), and the preferred workplace was private practice (20.3 %). Third year students shared the opinion that physiotherapy is not a well-paid profession (45.6 %), while first year students disagreed (39.7 %); the difference was statistically significant ( $p < 0.05$ ). Female students considered the work of a physiotherapist as well-paid (46 %), and male students as not well-paid (50 %), the difference was statistically significant ( $p < 0.05$ ). There was a statistically significant difference between the genders ( $p < 0.05$ ), where the women felt that the profession is not sufficiently appreciated by the doctors (67 %), while men did not agree with any of the statements (34 %). **Conclusions:** Physiotherapy as a profession with wide variety of branches is not well recognised in our society and is often limited to injury or physical activity. This may be the reason why students created an ideal image of the profession, which is based on physiotherapy in sport and in private practice. To create a new image of the profession it would be necessary to change the society's view of this profession. This could increase the interest of students in other areas of physiotherapy.

**Keywords:** educational programme, student opinion, physiotherapy profession.

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## Študenti fizioterapije in invalidnost: modeli, odnos in študij fizioterapije

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**Uvod:** Invalidnost je večplasten, dinamičen, večrazsežen in sporen pojav. Na njegovo izraženost vplivajo socialne in fizične ovire ali njihova odsotnost. Po oceni Svetovne zdravstvene organizacije se kar 15,6 odstotka svetovne populacije, to je 720 milijonov ljudi, spopada z neko obliko invalidnosti. Študenti fizioterapije se zaradi narave svojega izobraževanja že med študijem srečajo z invalidnostjo. Ker so bodoči nosilci zdravstvene oskrbe, njihov odnos do invalidnosti neposredno vpliva na način in kakovost dela z invalidnimi osebami. V primeru negativnega odnosa študentov do invalidnosti obstaja tveganje, da bo izid rehabilitacije oseb z invalidnostjo slabši. Namen raziskave je bil ugotoviti, koliko so študenti fizioterapije seznanjeni z različnimi modeli invalidnosti, kakšna so njihova stališča do invalidnosti in ali je študij fizioterapije povezan s temi stališči. **Metode:** K sodelovanju so bili povabljeni študenti, ki so bili v študijskem letu 2010/2011 vpisani v kateri koli letnik študija fizioterapije. Podatki so bili zbrani s spletno anketo in obdelani s programskim paketom IBM Statistics SPSS 20. Narejena je bila opisna statistika. Stopnja statistične značilnosti ( $p$ ) je bila 0,05. **Rezultati:** Sodelovalo je 70 študentov fizioterapije, 57 žensk in 13 moških. Povprečna starost je bila 22,43 leta. Večina se je strinjala tako z medicinskim kot družbenim modelom invalidnosti. Z moralnim modelom invalidnosti se niso strinjali. Le 30 odstotkov anketirancev je te modele poznalo, le 7,1 odstotka je poznalo tudi druge modele. Moški bolj poznajo modele invalidnosti kot ženske ( $p = 0,038$ ). S povprečno oceno odnosa 5,63 točke ( $s = 2,767$ ) imajo študenti fizioterapije pozitiven odnos do invalidnosti ( $p = 0,000$ ). Poznanstvo z osebo z invalidnostjo po mnenju študentov ne vpliva na odnos do invalidnosti ( $p = 0,371$ ). Po mnenju študentov študij fizioterapije vpliva na odnos do invalidnosti ( $p = 0,001$ ). Nekdanji gimnazijci imajo do invalidnosti manj pozitiven odnos kot dijaki srednjih zdravstvenih šol ( $p = 0,001$ ). Gimnazijci imajo statistično značilno manjše ocene vseh komponent odnosa ( $p < 0,05$ ). Študenti fizioterapije imajo kognitivno komponento manj pozitivno kot vedenjsko ( $p = 0,005$ ). **Zaključki:** Odnos do invalidnosti je med študenti fizioterapije pozitiven. Povezan je s študijem in srednjo šolo. Ker fizioterapevti delujejo v okolju medicinskega modela invalidnosti, so izpostavljeni negativističnemu pogledu na invalidnost. To možnost nakazuje tudi nižja povprečna ocena kognitivne komponente. Zato je nujno, da študenti samokritično ocenjuje svoj odnos do invalidnosti in si ga prizadevajo izboljšati.

**Ključne besede:** študenti fizioterapije, gimnazijci, medicinski in družbeni model invalidnosti, odnos do invalidnosti.

## Physiotherapy students and disability: models, attitude and physiotherapy studies

**Background:** Disability is complex, dynamic, multidimensional and contested. It's severity is influenced by social or physical barriers or lack of those. World health organisation estimates that as far as 15,6% of world population, that means 720 million people, is somehow disabled. Because of nature of their work physiotherapy students face disability during their study. They are future medical service's carriers and their attitude toward disability directly affects the manner and quality of their work. Risk exists that in case of students' negative attitude toward disability the outcome of rehabilitation of disabled is worse than it could be. The purpose of the study was to determine whether physiotherapy students know different models of disability, what are their attitudes toward disability and whether they are affected by physiotherapy studies. **Methods:** Students which attended any year of physiotherapy studies in 2010/2011 were invited to participate. Data was collected via web questionnaire and processed with IBM Statistics SPSS 20 software. Descriptive statistics were made. P-value was set to 0,05. **Results:** 70 students cooperated, 57 of them women and 13 men. Average age was 22,43 years. Most of them agreed with both medical and social model of disability. They didn't agree with the moral model of disability. Only 30% knew the described models and only 7,1% knew other models of disability. Men are more familiar with disability models than women ( $p = 0,038$ ). With average attitude value 5,63 points ( $s = 2,767$ ) students have positive attitude towards disability ( $p = 0,000$ ). Knowing a person with disability doesn't seem to have an effect on attitude ( $p = 0,371$ ). In students' opinion physiotherapy studies affect their attitude ( $p = 0,001$ ). Ex grammar school pupils have a less positive attitude towards disability than nursing high school pupils ( $p = 0,001$ ). Grammar school pupils also have significantly lower values of all attitude components ( $p < 0,05$ ). A cognitive component was significantly lower than the behavioral in physiotherapy students ( $p = 0,005$ ). **Conclusions:** Attitude towards disability among physiotherapy students is positive. It is affected by physiotherapy studies and high school. Physiotherapists work in a medical model settlement and they are exposed to negativistic view of disability. This possibility is indicated by lower cognitive component value, too. It is necessary for students to be critical about their own attitude towards disability and that they try to improve it.

**Keywords:** physiotherapy students, high school, medical and social model of disability, attitude toward disability.

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