

A Study on Perception of Evidence-Based Practices and Perceived Barriers in Implementing Evidence Based Practice in Stroke Patient Management among Physiotherapists of Surat

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ABSTRACT

Introduction: Stroke is recognized as the leading cause of disability and a primary cause of death. Various resources have been developed to facilitate the implementation of EBP into everyday clinical practice in managing stroke patients.

Aim & Objective: To assess the perceptions about EBP among physiotherapists and to rule out the barriers to EBPs in Stroke patient's management among Physiotherapists of Surat.

Methodology: This observational study is conducted among physiotherapists of Surat who are currently treating stroke patients. The survey was conducted online using a semi-structured questionnaire from Salbach et al. (2007)^[5] & Jette et al. (2003)^[6]. The survey tool was developed on Google Forms. The purpose & procedure of the study was explained in the form and online consent was obtained. Total of 52 responses were recorded.

Result: The respondents have a positive attitude about implementing EBP in their daily practices. Majority of the participants i.e. 36% faced lack of time as a barrier. Lack of collective support among colleagues and it takes too long to read guidelines were second most reported barriers by 30.8% on the respondents. 26.9% reported with lack of research skills. 25% of them reported that lack of information was one of the barrier. 17.3% believed that very a few or none guideline exists for my patient population. And least i.e. 7.7% faced lack of information as the Barrier.

Conclusion: The respondents have a positive attitude about implementing EBP in their daily practices. They are very sure that EBP is important in their daily practices, EBP facilitates their work and it helps them to make decision in choice of treatment. EBP helps in improving patients care and quality of treatment. Lack of time, lack of peer support in work place, & it takes too long to read an article emerged as top 3 barriers in our study. Other barriers perceived are lack of research skill, lack of information resources, very few or none articles available for the patient population and lack of interest.

Keywords: Evidence-based practice, Physiotherapists, Stroke

INTRODUCTION

Stroke is recognized as the leading cause of long-term adult disability and a primary cause of death. The burden of stroke in community may be reduced through prevention strategies and a number of effective treatment interventions.^[1] Stroke, a

major Non-Communicable Disease (NCD), is responsible for 3.5% of DALY in India. Stroke is the second leading cause of death worldwide and was responsible for an estimated 6.5 million deaths and 113 million DALYs in 2013. More than 2/3 of these deaths occurred in developing countries.^[2]

Stroke definition: In 1970, the World Health Organization defined stroke as ‘rapidly developed clinical signs of focal (or global) disturbance of cerebral function, lasting more than 24 hours or leading to death, with no apparent cause other than of vascular origin’^[2] There is a guideline that has been prepared for health care providers involved in management of patients with stroke. The aim is to help them, at primary and secondary levels of health care delivery system to make the best decisions for each patient, using the evidence currently available. The focus is on the more common clinical questions faced in day-to-day practice.^[2] Evidence-Based practice (EBP) is defined as the application and integration of the best available research evidence with clinical expertise and patient values by healthcare professionals delivering healthcare services. Evidence has shown that patient outcomes can be improved where health professionals have an Evidence-Based approach to clinical care.^[3] Evidence-Based practice (EBP) is considered as a corner-stone in the current era of clinical practice. In line with other healthcare professionals, physiotherapists are also using highest quality of research evidence in their clinical practice. In 2003, the World Confederation of Physical Therapists declared a policy statement on EBP, in which they stated that “physical therapists have a responsibility to use evidence to inform practice and ensure that the management of patients/clients, carers, and communities is based on the best available evidence”.^[4]

Aims and Objective of Study-The main aim and objective of this study is:

- To study about the perceptions of Evidence-Based practices among physiotherapists of Surat.
- To rule out the barriers to EBPs in Stroke patient’s management among physiotherapists of Surat.

METHODOLOGY

Sample Design: Observational Study

Study Duration: 6 months

Sample Size: 52 Physiotherapists of Surat

Instrument Used: A semi-structured questionnaire using Salbach et al. (2007)^[5] & Jette et al. (2003)^[6] was developed. Originally, both this questionnaire contained 47 & 51 questions, respectively. Since the aim was to identify the barriers, we structured both questionnaires as per several content needed for our study. The final questionnaire consisted of 4 sections (A, B, C & D) with total 27 questions. 4 sections include:

1. A question about currently treating stroke patients,
2. Personal or demographic information of Physiotherapists (1 to 9 items),
3. Education, attitude towards, & use of EBP (10 to 20 items),
4. Attitude towards and use of EBP in clinical practice and perceived barriers to EBP (21 to 27 items).

Items 1 to 9 collect demographic information & data about qualified Physiotherapists who answers the questionnaire. The structure of the items collecting data about education, attitudes & use of EBP is formulated using a 0 to 4 Ordinal scale, where “Strongly Agree” & “Strongly Disagree” has maximum & minimum scores, respectively. Other items collecting data uses a dichotomous response: “Yes” & “No”.

Inclusion Criteria:

- Physiotherapists who are currently treating stroke patients in their clinical practice,
- Physiotherapists with MPT degree and Physiotherapists with BPT degree with minimum of 1 year of experience

Exclusion Criteria:

- Physiotherapists who are currently not treating stroke patients,
- Not willing to participate are excluded.

Procedure: In this study, the Physiotherapists from different OPD’s, General Hospitals, Private Clinics, & Educational Institutes treating stroke patients in Surat were included. The survey was conducted online using a semi-

structured questionnaire from Salbach et al. (2007) [5] & Jette et al. (2003) [6]. The survey tool was developed on Google Forms.

The link for the questionnaire was directly sent to Physiotherapists for 3 months (March, 2021 to May,2021). The purpose & procedure of the study was explained in the form and online consent was obtained. Total of 52 responses were recorded.

Data Analysis: The study data was analyzed with statistical package for the social science version 20.0 (SPSS 20.0)

Descriptive analysis including frequency, percentage was carried out on the study variables. Data was analyzed using pie charts and further frequency & percentage were calculated using pie charts and bar graphs

RESULT

A total of 52 Physiotherapists of Surat treating stroke patients participated and completed the survey. Characteristics of the participants are given in Table 1.

Table 1. Characteristics of the participants

VARIABLE	CHARACTERISTICS	NUMBER(n)	PERCENTAGE (%)
Gender	Male	12	23%
	Female	40	77%
Age Group	20-29 years	40	77%
	30-39 years	7	13%
	40-49 years	4	8%
	>50 years	1	2%
HighestDegree attained	Bachelor's Degree	35	67%
	Master's Degree	14	27%
	PhD Scholar	3	6%
	Doctoral Degree	0	0%
Years ofclinical practice	Diploma in PT	0	0%
	1-3 years	36	69%
	3-5 years	10	19%
	6-10 years	3	6%
	11-15 years	2	4%
	16-20 years	0	0%
	>20 years	1	2%

Table 2. Characteristics of participants in clinical practice

VARIABLE	CHARACTERISTICS	NUMBER(n)	PERCENTAGE (%)
Experiencewith strokepatients (years)	<2 years	19	36%
	2-4 years	27	52%
	5-8 years	3	6%
	8-10 years	0	0%
	>10 years	3	6%
Patients ofstroke in aday	<5 patients	36	69%
	5-10 patients	15	29%
	11-15 patients	1	2%
	>15 patients	0	0%
Facility	General Hospital	10	14%
	Community HealthCenter	0	0%
	Private Clinic	19	27%
	Home Visit	19	26%
	Educational Institute/University	24	33%

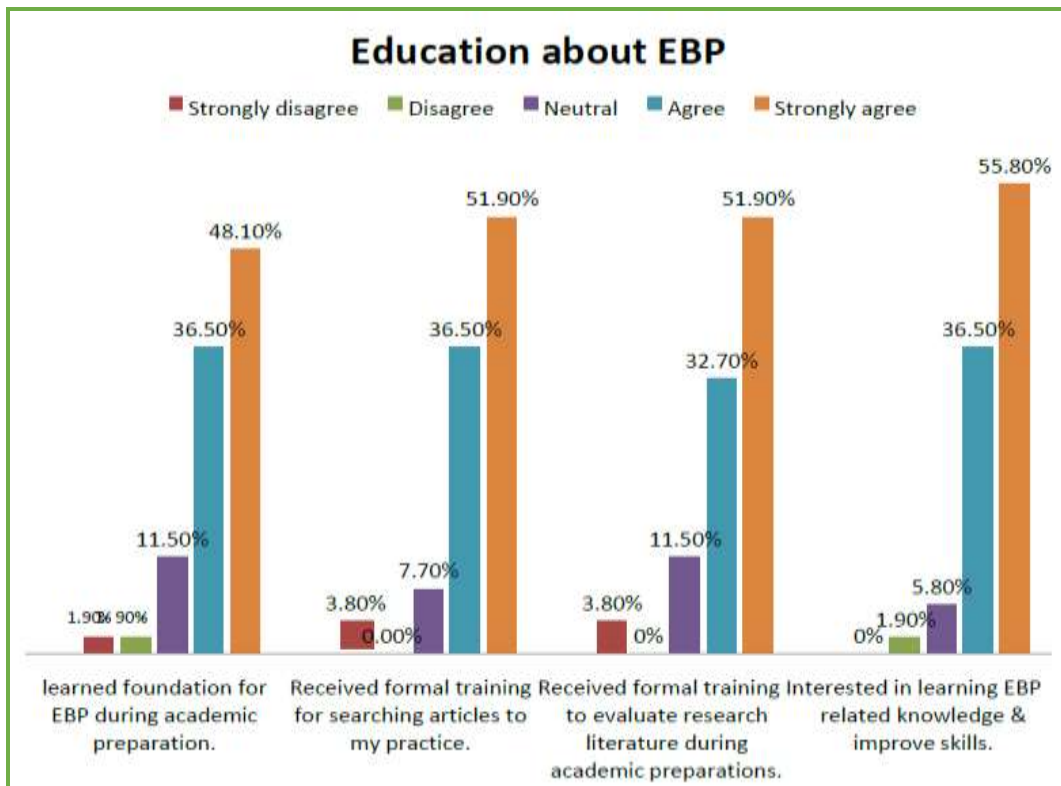
GRAPH 1. EDUCATION ABOUT EBP AMONG PARTICIPANTS

The respondents were diverse in expressing their experience about the education they received about EBP during their academic preparation & that they were interested in learning knowledge about EBP and wanted to improve their skills.

About 36.50% participants agreed and 48.10% participants strongly agreed that they learn foundation for EBP during their academic preparation. Majority of participants 51.90% had received a formal training related to searching articles about their practice. 51.90% strongly agreed that they received formal training to evaluate

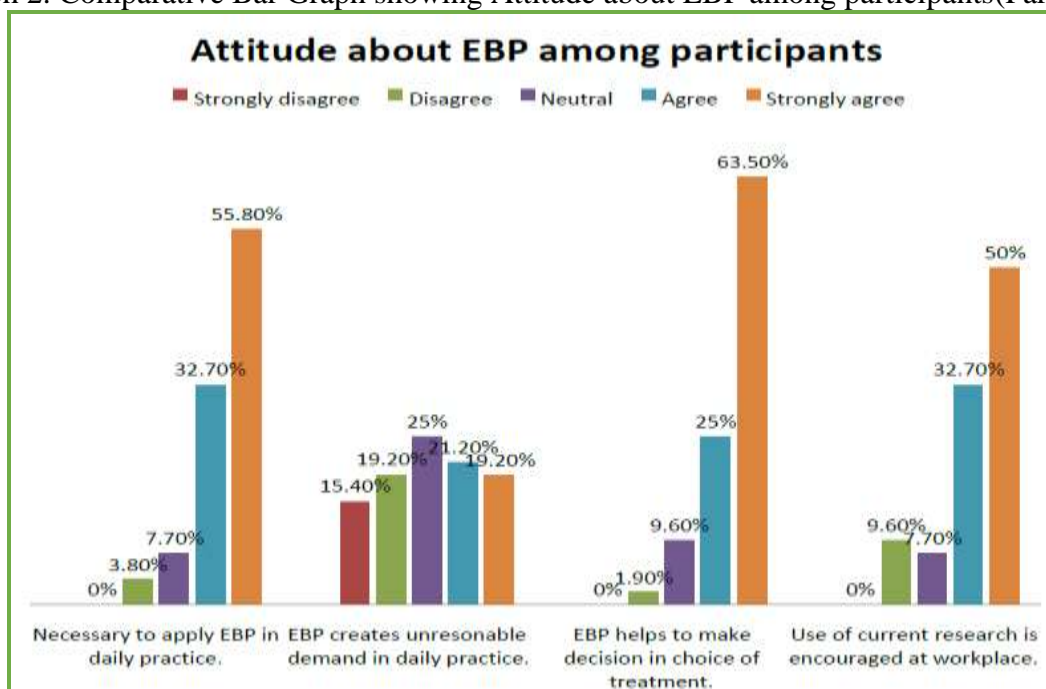
research literature during their academic preparation. About 36.50% agreed and about 55.80% strongly agreed that they are interested in

learning knowledge about EBP and wanted to improve their skills.

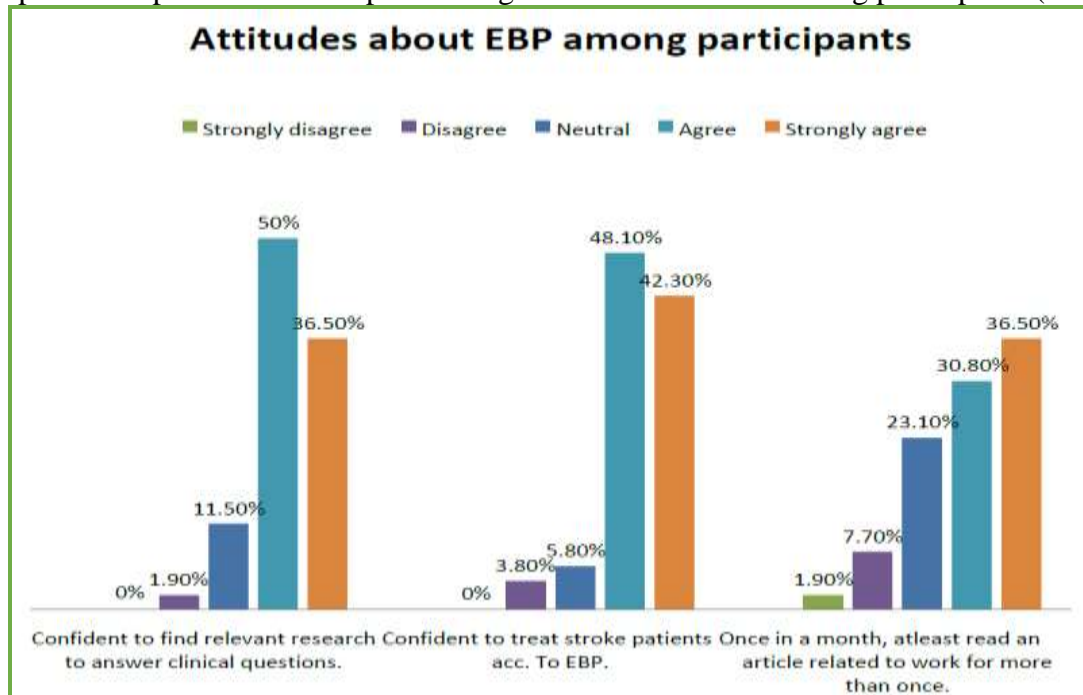


ATTITUDE ABOUT EBP AMONG PARTICIPANTS:

Graph 2. Comparative Bar Graph showing Attitude about EBP among participants(Part 1)



Graph .3 Comparative Bar Graph showing Attitude about EBP among participants.(Part 2)



As shown in graph the attitude of the respondents was diverse related to EBP. About 55.8% of the respondents strongly agreed and 32.70% agreed that EBP is important to apply in daily practices treating stroke patients. Majority of respondents i.e. 63.50% very strongly agreed that EBP helps to make decision in choice of treatment. Half of the respondents i.e. 50% strongly agreed that use of recent research is encouraged at the place where they treat stroke patients.

About 50% of them were agreed that they were confident in finding relevant answer to their clinical questions using EBP articles. 36.50% strongly agreed with that. Most of them i.e.48.10% were confident to treat stroke patients according to EBP as shown in fig 9. 25% were neutral regarding the question that EBP places an unreasonable demand in daily practice treating stroke patients. 21.20% agreed and 19.20% strongly agreed that EBP places an unreasonable demand in daily practices. While, 15.40% strongly disagreed and 19.20% disagreed on this as shown in fig 8.

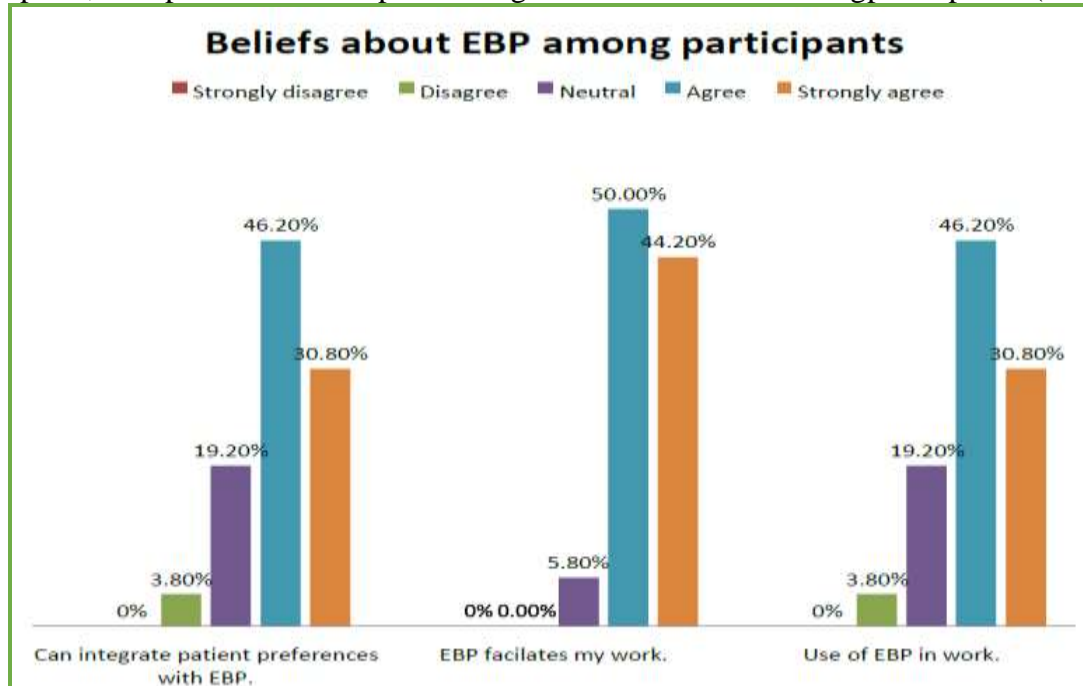
36.50% of the total respondents believed that they should read at least an article once a month related to stroke management more than once. 23.10% were neutral about this and 1.90% strongly disagreed to this.

BELIEFS ABOUT EBP AMONG PARTICIPANTS:

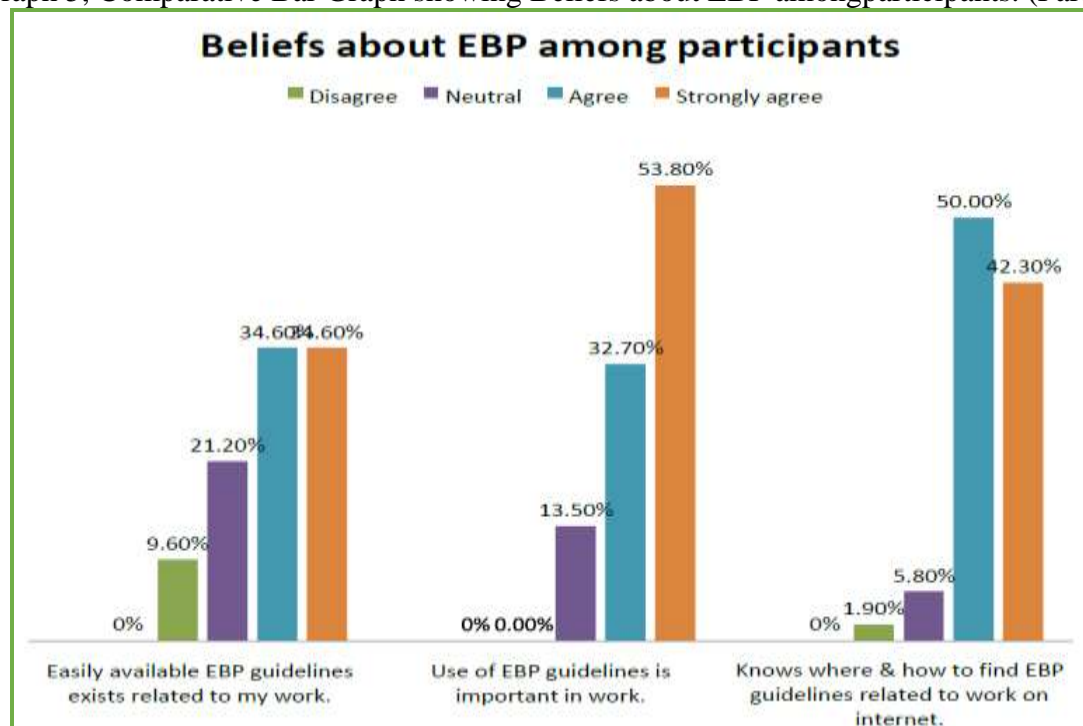
As shown in graph about 46.20% agreed and 30.80% strongly believed that they can integrate patients preferences with EBP. From total participants about 50% of them believed that EBP facilitates their work. 46.20% agreed and 30.80% strongly agreed that they encourage use of EBP in their daily practices.

Same percent of respondents 34.60% believed that an easily available EBP guideline exists related to my work. 53.80% strongly agreed and 32.70% agreed that use guidelines important in work and 13.50% were neutral about this. 50% of them believed and 42.30% strongly believed that they know from where and how to find EBP guidelines related to practice on internet as shown in graph.

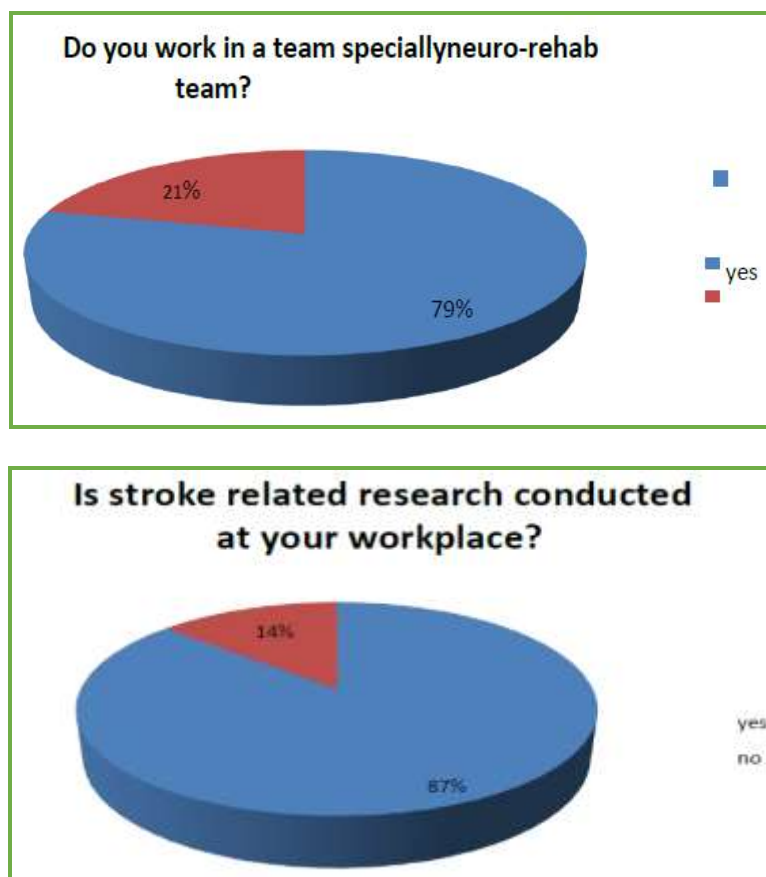
Graph -4, Comparative Bar Graph showing Beliefs about EBP among participants. (Part 1)



Graph 5, Comparative Bar Graph showing Beliefs about EBP among participants. (Part 2)



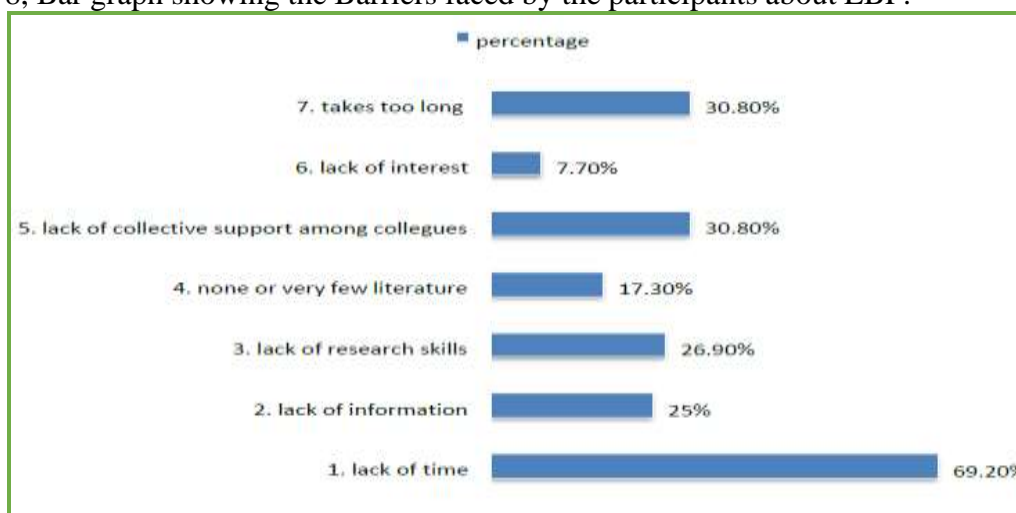
Graph 6, Pie chart showing percentage whether research is conducted at their workplace or not?



Graph 7, Pie chart showing percentage whether participant work in a Neuro-Rehabilitation team?

BARRIERS FACED BY THE PARTICIPANTS ABOUT EBP:

Graph 8, Bar graph showing the Barriers faced by the participants about EBP.



Majority of the participants i.e. 36% faced lack of time as a barrier. Lack of collective support among colleagues and it takes too long to read guidelines were second most

reported barriers by 30.8% on the respondents. 26.9% reported with lack of research skills. 25% of them reported that lack of information was one of the barrier.

17.3% believed that very a few or none guideline exists for my patient population. And least i.e. 7.7% faced lack of information as the barrier

DISCUSSION

This study's findings highlight the perceptions about EBP among physiotherapists and perceived barriers they face in implementing EBP in managing stroke patients. Our study targeted, physiotherapists of Surat who are currently treating stroke patients. It is interesting to note that characteristics such as working in a multidisciplinary team, conducting a research related to stroke in work place and participating in research, helps to think that EBP improves the quality of care and other positive attitudes regarding EBP. The participants in our study have a positive attitude towards EBP. The result suggests that, respondents believe that the use of EBP is important in their daily practices, EBP facilitates their work and it helps them to make decision in choice of treatment. These beliefs have been similarly seen in a study.^[6] The barriers identified in this study are reported previously in other studies in different regions all over the world among physiotherapists, students of physiotherapy and other health care workers.^[6,7,8]

Although, the majority number of the participants are from younger age group (20-29 years) with almost less than 3 years of clinical experience and most of them with bachelor's degree, the participants have a positive attitude towards EBP and believed that EBP was necessary in daily practices and that they use EBP at work. This result does not coincide with the study of Hasani Fatmah et. al. where although the participants had positive attitudes towards EBP and believed it was necessary, only a few reported having implementing EBP in their daily practices.^[9] Most of the respondents treats about less than 5 stroke patients on daily basis and have 2-4 years of experience with stroke patients. Most of them responded with yes when asked if stroke related research is conducted at their

workplace. And most of the respondents work with a Neurorehabilitation team (i.e. a multidisciplinary team).

EDUCATION ABOUT EBP:

In our study, when respondents were asked about their knowledge of EBP they strongly agreed that they learned the foundations of EBP & have received formal training in evaluating research literature & articles related to their practice. Salbach et. al. obtained similar results in their 2007 survey among 270 Canadian physiotherapists that the participants who were from younger age groups & with less than 5 years of experience were more likely to learned about EBP in their academic preparations^[5] Yahi et. al. found similar results in their study about 102 physiotherapists of Malaysia.^[3] On contrary, Hasani et. al. in their study of 64 physiotherapists of the Kingdom of Saudi Arabia, found that the subjects related to research methods and EBP educations & knowledge were not included in under graduate curricula in most of the Saudi Arabian universities.^[4]

The respondents strongly agreed that they want to learn & improve their skills & knowledge about EBP. Ramirez Velez et. al. in their study showed similar result that most physiotherapists stated that they were interested in improving their skills for incorporating EBP in their practice as qualified physiotherapists.^[10] Such findings also coincide with that reported in the Jette et. al. survey^[6] Cimoli C in Australia stated that nearly 1/3rd of physiotherapists surveyed that their EBP knowledge & skills increased following attendance of EBP professional developmental workshop. Physiotherapists should feel optimistic about taking EBP focused developmental activity in clinical setting as a means to consolidate EBP skills & knowledge to contribute positively to clinical practices in managing stroke patients.^[3]

ATTITUDES & BELIEFS ABOUT EBP:

Our results showed that the qualified physiotherapists of Surat considered EBP to

be important to apply in clinical practice, it helps in making choice of treatment, and are confident in treating stroke patients according to EBP guidelines. This results coincide with some studies related to other healthcare professionals.^[11,12] EBP is necessary to apply in clinical practices and is important in clinical decision making. EBP helps in planning treatment protocol of choice. Our respondents strongly agreed that EBP helps in making a decision about the choice of treatment in stroke patient management. This result was similarly found in the study of Jette et. al. were the participants believed that the use of EBP is necessary, that the literature is helpful to them in their practice and decision making, and that quality of patient care is better when EBP is used^[6] McColl et. al. found that most of general physicians stated in United Kingdom agreed that practicing using EBP improves patient care.^[13] In our study, most of the respondents being from younger age groups and with bachelor's degree strongly agreed that they are confident to treat patients according to EBP. This may be because in our results, most of the physiotherapists surveyed that they have learned the foundation about EBP knowledge and skills to appraise literature during their academic preparations. This results contrasts with the study of Hasani Fatmah et. al. In their study among physiotherapists of the Kingdom of Saudi Arabia, that the post graduate students who have extensive knowledge about EBP's methods and skills, have shown improved confidence in the use of research skills during clinical practice.^[9] Although clinical decision making increases with practice, time alone does not ensure experimental learning. The combination of experience and skills is also required to make effective clinical decisions.^[9] Physiotherapists in our study chose a neutral response than other responses when asked whether EBP places an unreasonable demand in clinical practices. Unlike Jette et. al. study, respondents there strongly disagreed to the statement that EBP places unreasonable demand in clinical practice.^[6]

Majority of the participants in this study agreed that they at least read an article related to their patient more than once a month. This was almost similar to the study by Jette et. al. where 17% of the physical therapists read fewer than 2 articles in a typical month.^[6] Similarly, in Hasani Fatmah et. al. study, most participants reported having accessed EBP research on weekly or monthly basis and 48% had access to internet at home or work.^[9] A study in Malaysia surveyed that only 30% of the respondents reported to have read less than 2 articles in a typical month which did not correlate with our results.^[4]

About half of the participants agreed that the use of research is encouraged at their workplace. About eighty-six percent respondents stated that stroke related research is conducted at their workplace. The participants agreed that they were confident in finding relevant answers related to their practice through EBP guidelines. This result was similarly found in study of physiotherapists of Italy. Castellini G et. al. in their study of 1289 physiotherapists surveyed that majority of the physiotherapists felt able to conduct a literature search and to critically appraise the articles related to their patient population.^[14] For EBP to be successfully implement in daily practices, encouragement to use EBP in workplace and ability of appraise the literature findings are necessary. Proper technology, support and skills to find the correct research article related to the patient population, the therapists are treating. Availability of the research literature related to the patient population is important. Our results showed that respondents believed that EBP guidelines exists related to their work is easily available. On contrary, sixty-one percent respondents in Malaysian study reported to have lack of strong evidence in their interventions for their patients.^[4] The result is may be because of the learned foundation about EBP during academic preparations, a positive attitude to appraise the research articles and skills & knowledge about how to find the related research article

to their patient population. About half of the physiotherapists in our study reported that they know where and how to find the EBP guidelines related to work on the internet.

Our respondents are sure that they can integrate patient preferences with EBP. But in Jette et. al. study, the respondents were not sure that EBP could take into account the limitations or the patient preferences.^[6] In United Kingdom, neutral results were found by general practitioners about the applicability of practice guidelines to specific patients in specific settings and the relevance of research findings to their patients.^[15] The respondents believed that EBP facilitates their work and they use EBP in their daily practices. Thus, the respondents have a positive attitude about implementing EBP in their daily practices

BARRIERS IN IMPLEMENTING EBP:

The primary and major barrier to implement EBP among Physiotherapists in stroke management is lack of time (69.2%). This same result is reported in many studies.^[6,7,15] Bhor et. al. in year 2019 conducted a similar study in dental and medical practitioners and lack of time was found to be a major Barrier.^[16] In United Kingdom, Igo found that although respondents understood the process of appraising an article, it was still considered a time-consuming process.^[17] This is because in our study most of the respondents are from younger age groups and most of them treats less than 5 patients or 5 to 10 patients of stroke on daily basis as a result, increased workload and busy schedule may be the reason for these barrier. One of the top 3 barriers in our study is lack of collective support from colleagues at work place (30.8%). Our respondents agreed that they did not get collective support at their workplace from their colleagues. However, likewise, Retsas found one of the top 10 barrier faced by the nurses in Australia was lack of support from their colleagues.^[18] Salbach et. al. in her study among 270 Canadian physiotherapists found, lack of peer pressure as one of the potential

organizational barrier. Peer support is considered to have an important effect on EBP behavior given that physical therapists rely heavily on peers when seeking information.^[5]

Another top barrier faced by our respondents is that it takes too long to read a research related guideline (30.8%). In terms of perceived barriers, Bhor et. al. found that lack of time difficulties in applying EBP into daily routine practice as one of the most common barriers.^[17] The results may be due to lack of research appraisal skills and many of the articles need permission and access from the respective authors and is very time consuming. Lack of research skill is identified as another hindrance in implementing EBP (26.9%). This result is similar to a study conducted by Nair et. al. in which 182 final year students, 112 interns and 135 PGs were taken. According to Nair et. al., article search should be viewed as a fundamental skill, similar to history taking and physical examination.^[16] Research related skills & knowledge should be incorporated during academic preparations. Institutes should take a step to conduct formal training, development programs to help students develop the necessary skills required in EBP.^[16]

Other barriers reported in our study are lack of information resources, none or very few articles are available for their patient population and lack of interest. Lack of information resources (25%) is reported as one of the barrier. Jonathan et. al. in Ghana found lack of information resources as one of the organizational barrier where PTs who work in Community Care Centers, Rural or non-rural teaching institutes particularly find difficult to implement EBP in their daily practices.^[19] Availability of internet may be the reason behind this barrier. Another study among Malaysian healthcare practitioners found that lack of information resources increases difficulty in implementing EBP.^[20]

Because of none or very few guidelines available applicable to their patient

population, it came out as another barrier (17.3%) in our study. In South Africa, Jordan et. al. identified lack of available research reports as a barrier to implement EBP in ICU in Eastern Cape.^[21] Purvis et. al. found lack of resources as one of the barriers affecting the implementation of EBP in various area of stroke care.^[22] This barrier was also reported in the study conducted by Yahui et. al., where he found that respondents were unable to apply research findings to their patient population.^[4]

Our respondents did not feel lack of interest (7.7%) as a primary or major barrier to implement EBP. The same result was found in some of the studies.^[6,20] In Malaysia, in one of the study conducted by Yahui et. al., lack of interest was given least importance by the respondents when asked and was listed as the weakest barrier in their clinical practice.^[4]

Other various barriers reported by Ramirez Velez et. al. in their study was hours of work per week, current main role in their workplace & understanding of the language of the available research articles.^[10]

Thus, the respondents have a positive attitude about implementing EBP in their daily practices. They are very sure that EBP is important in their daily practices, EBP facilitates their work and it helps them to make decision in choice of treatment. EBP helps in improving patients care and quality of treatment. Proper education about EBP during the academic preparations, development of proper skills to appraise literature findings, sufficient availability of the research findings, interest and support from the colleagues would constitute in lifting EBP implementation by overcoming barriers perceived in implementing EBP in managing stroke patients.

CONCLUSION

Identifying barriers to use EBP in managing stroke patients among physiotherapists is one of the most important steps in implementing behavior change. Despite the positive attitude of the physiotherapists

about EBP, EBP has not been widely implemented by physiotherapists in daily practices. The study helped the targeted population to reflect on the positive sides about implementing EBP in stroke management, importance of EBP in daily practices and to identify the barriers and to make a change in the areas they lack. Lack of time, lack of peer support in work place, & it takes too long to read an article emerged as top 3 barriers in our study. Other barriers perceived are lack of research skill, lack of information resources, very few or none articles available for the patient population and lack of interest.

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