

## PHYSIOTHERAPISTS' KNOWLEDGE OF PALLIATIVE CARE AT DIFFERENT LEVELS OF HEALTH CARE

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## Abstract

Background: Palliative care has become increasingly relevant in the face of population aging and the increase in chronic diseases in Brazil. This type of care seeks to alleviate suffering and improve the quality of life of people with serious health conditions, addressing physical, emotional, social and spiritual needs. Despite its importance, palliative care is still little explored in physiotherapy training and practice. Physiotherapists are key professionals in interdisciplinary teams, with great potential to contribute to symptom management and functional support. However, many report feeling unprepared or insufficiently trained to work in end-of-life contexts. Understanding the current level of knowledge of these professionals can help identify gaps and direct improvements in training. This study arose from the need to promote a more humane, qualified and present physiotherapeutic approach at all levels of health care. Purpose: The main objective was to evaluate and describe the level of knowledge about palliative care among physiotherapists working at the primary, secondary and tertiary levels of health care. The secondary objective was to compare the results of the Bonn Palliative Care Knowledge Test among physiotherapists working at different levels of health care (primary, secondary and tertiary). Methods: This was a cross-sectional, observational study of physiotherapists working at different levels of health care. Professionals who were not working in the field at the time of the study were excluded. Data was collected using the Bonn Palliative Care Knowledge Test (BPW) questionnaire, which assesses both theoretical knowledge and perceived self-efficacy in essential palliative care skills, such as empathy, communication and decision-making at the end of life. The questionnaire was applied digitally and in person. Results: Physiotherapists who worked in two or more levels of care obtained better results in the perceived self-efficacy questionnaire. These professionals stood out especially in the dimensions related to empathy, communication and decision-making in the context of end of life. However, relevant gaps were identified, especially among primary care physiotherapists, who expressed less knowledge and less professional security in the face of palliative care. Conclusion: The data indicate that a broader clinical experience can favor the development of palliative care skills among physiotherapists. At the same time, they reveal a worrying lack of preparation in primary care, precisely where an early and comprehensive approach to palliative care is most needed. There is therefore an urgent need to strengthen the training and continuous qualification of these physiotherapists. Implications: The results of this study reinforce the importance of integrating palliative care into the initial and continuing training of physiotherapists. These actions can favor





more humane, ethical and effective health services, in line with the needs of a long-lived population. Investing in palliative education also stimulates innovations in public policies, interdisciplinary collaborative practices and person-centered care models.

**Keywords:** Palliative care; Knowledge; Physiotherapists.



