

Respiratory Therapy Students' Perception toward their Career and Level of Satisfaction with the Learning Resources: A Cross-Sectional Survey Result from India

Jithin K Sreedharan^{1,2}, Udaya Kumar Rao³, Mohammed Al Ahmari², Sashidhar M Kotian⁴, Praveen Beekannahalli Mokshanatha⁵

¹Srinivas Institute of Medical Sciences, Srinivas University, Mukka, Mangaluru, India, ²Department of Respiratory Care, Prince Sultan Military College of Health Sciences, Dhahran, Kingdom of Saudi Arabia, ³Dean, Srinivas Institute of Medical Sciences, Srinivas University, Mukka, Mangalore, India, ²Associate Professor, Department of Respiratory Care, Prince Sultan Military College of Health Sciences, Dhahran, Kingdom of Saudi Arabia, ⁴Professor, Department of Research, Srinivas University, Mukka, Mangalore, India, ⁵Director of Research, Institute of Engineering and Technology, Srinivas University, Mukka, Mangalore, India

Abstract

Background: A structured respiratory care (RC) program has a greater impact on student's critical thinking and problem-solving. Across India, the RC curricula differ in structure and duration. With the exception of a few well-established central universities and autonomous institutions, many required appropriate educational resources and qualified faculty. The objective of the current study is to determine RT students' perception toward their careers and level of satisfaction with the available learning resources. **Materials and Methods:** In this cross-sectional survey, 904 respiratory therapy students participated from medical universities and educational institutions across India. Institutional Ethics clearance was obtained from the host institution and students were given basic information regarding the survey. A validated, structured questionnaire was used which consists of 26 questions that cover four domains: Perception (4 items), satisfaction (13 items), curriculum (5 items), and suggestion (4 items). The questions were answered as per the five-point Likert scale. Data analysis was descriptive, and logistic regression was performed to evaluate factors associated with students' satisfaction with the learning resources. **Results:** The majority of the respondents were female (59%) and belonged (48%) to the age group of <22 years. 92% of them are pursuing bachelor's degree in RC. Most respondents are satisfied with the practical and theoretical training (69%), quality of teaching (70%), the infrastructure available (69%), and the skill level of the faculties (80%) at their institutions. Most respondents (83%) believed that there is no adequate recognition for respiratory therapists (RTs) in India and 90% of the respondents were in fact planning to move overseas to seek job opportunities. Moreover, 86% of respondents believed that there is an urgent need for establishing a regulatory body for the RT profession. **Conclusion:** The respiratory therapy students believe that there is no adequate recognition for RTs in India and a vast majority of them want to go abroad to seek job opportunities. A proper regulatory body for RT would help in standardizing both the academic and clinical aspects of the RT profession, along with improving job opportunities for RTs in the future.

Keywords: Learning resources, respiratory therapy, student's perception, survey

INTRODUCTION

Respiratory therapy is a specialized health-care field, and respiratory therapists (RTs) are operating collaboratively within the multidisciplinary teams in the management of various respiratory conditions. RTs contribute significantly in providing respiratory care (RC) at various levels, such as in the primary health centers, intensive care units, inpatient service at hospitals, preventive health care, and rehabilitation, and also provide with posthospitalization homecare.^[1] Knowledge and understanding of the scientific principles, causative cardiopulmonary physiology, and pathophysiology,

as well as biomedical engineering and technology adoption, empower RTs to provide patient care services efficiently.^[2] With increase in the number of both communicable and

Address for correspondence: Mr. Jithin K Sreedharan, Department of Respiratory Care, Prince Sultan Military College of Health Sciences, Dhahran, Kingdom of Saudi Arabia. PhD Scholar, Srinivas Institute of Medical Sciences, Srinivas University, Mukka, Mangaluru, India. E-mail: jithinksree@gmail.com

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noncommunicable respiratory conditions and along with the advancements in medical care, there is a growing demand for highly skilled and knowledgeable RTs in the health-care industry.^[3] In respiratory therapy segment, talent, time, and technology attach great deal of importance, but too often there is a dearth of all three. The impact is felt by RTs trying to balance care and efficiency. Up-to-date knowledge and evidence-based practice are vital skills to be learned by an RT during their coursework.^[4]

In a densely populated country like India, the public health burden due to respiratory disorders is huge. For instance, the number of deaths because of lower respiratory tract infection was highest in India when compared to any other country in the world and chronic obstructive pulmonary disease is the second prime cause of noncommunicable disease-linked deaths in India.^[5,6] The role of a proficient RT in the modern health facility is immense, as they provide end-to-end care to the patients with respiratory conditions. Therefore, a widening scope within the profession is emerging. The career prospects of RT are believed to increase many folds in the near future, as the demand for RTs is growing exponentially, not just in India but across the world.^[7] The pandemic and its associated hitches demonstrated that respiratory therapy has room for remarkable progression.^[8] Currently, government institutions in India do not have a tenured position for RTs, whereas the career opportunities for them in the private sector are enormous, even so it is always challenging.^[9] The respiratory therapy domain probably owes its existence, in part, to revolution with research and professional development such as postgraduate and doctorate degrees. Furthermore, government establishments have failed to readily decode RT proficiency into efficient integration of patient care management throughout the COVID-19 period.^[10] Indian-trained RTs have been at the forefront in delivering evidence-based patient care, resulting in incredible accomplishments in science, research, control, and prevention of lung disease in many neighboring countries, especially in the gulf region. There they are extremely valued for the extraordinary talents they possess during the most critical times. In India, tertiary care and acute care hospitals currently have a huge requirement of RTs, while only about 200–400 new therapists are graduating annually. As a result, scarcities are estimated to rise through the coming years. As a result, scarcities are estimated to rise through the coming years, and on a positive note, RTs role is now being expanded to various fields of the health-care industry.^[11]

Over the past decade, the country observed the installation of several academic institutions offering RT programs. Almost all of them function without any guidelines or regulation over the quality of education or the number of student intake annually. An acceptable quality teaching model, competent teachers, self-evaluation and assessment, healthier working environments, receptive rapport with the students, gathering the feedback from the stakeholders, and

learning outcome assessments are the essential components in producing a gifted professional.^[12] Student insights play an essential role in appraising the quality of university programs, and their aspirations concerning service delivery became progressively relevant for continuous improvement in these institutions.^[13] The objective of the current study is to comprehend the perception of respiratory therapy students in India toward their career prospects and satisfaction with regard to the available learning resources in their program.

MATERIALS AND METHODS

Study design

A descriptive, cross-sectional, web-based survey was carried out to evaluate the RT student's perception about their career prospects and satisfaction about the learning resources. The data were collected in the period of 1 year between September 2020 and September 2021. The institutional ethics clearance was obtained from the host institution before the participants were recruited (Ref: SUEC 2020/001 Dated 02.01.2020). Informed consent was obtained from all respondents and was captured online on the Google Forms. All respondents read the consent form and confirmed having read and understood the information pertaining to the study purpose, objective, and significance by clicking the "Agree to participate" button; features for preventing duplication and multiple attempts were activated. Clarifications about voluntary participation and withdrawing from the study at any time without punitive measures were shared with each respondent. To foster confidentiality and privacy, access to the collected data was constrained; only the researchers have access to encrypted folders. The respondents were not required to provide any personal identifying information.

Questionnaire tool

We used a validated and structured questionnaire (SQ) to assess the perception toward future career and satisfaction of the RT students. A series of informal focus group meetings were conducted with senior RTs with clinical and academic background, and the discussions were verbatim transcribed in a word document. Themes were produced through substantive analysis by qualitative experts, which eventually became the items of SQ, consisting of a total of 27 items, which is a combination of four subscale: perception (4 items), satisfaction (13 items), curriculum (5 items), and suggestions (4 items). Validation of the questionnaire was performed for the above-mentioned scale (explanatory factor analysis and confirmatory factor analysis) and was found a satisfactory fit. The reliability of the data collection instrument was further guaranteed by administering it to five experienced RT educators during a pilot study, who never participated in the initial discussions and developmental proceedings. The reliability of the tool was assessed by calculating and affirming a Cronbach's alpha reliability coefficient of $\alpha = 0.95$. Cronbach's alpha values for the four items domains ranged from 0.74 to 0.92. The SQ was scored using a Likert

scale (ranging from 1 [strongly disagree] to 5 [strongly agree]), a widely accepted and extensively used psychometric measure in educational research.

Study population

An enumerative sampling technique was used to collect 904 responses from the undergraduate and postgraduate students (at all level) who are perusing a degree in respiratory therapy at a recognized institution offering RC program across India. The study excluded all RT students who had spent less than a year at this campus. The 1st year students responded to the survey were at the end of their academic year; it was assured through the faculty responsible for coordinating the survey in each institution. The students were informed regarding the survey and encouraged to participate in it through their faculty, institutional authorities, and local coordinators of the professional organization.

Sampling procedure

Permission was obtained to send out survey invitations via E-mail to all institutions offering the RC program in India. A total of over 25 universities and affiliated colleges in every state, across rural, suburban, and urban areas, and with all socioeconomic levels were approached. It was anticipated to achieve a representative sample of respiratory therapy students. The principal researcher sent an E-mail to the heads of institutions, usually principals or other administrators, and requested that they sent the survey invitation to respiratory therapy students at their respective departments. Respondents completed the questionnaire in their own time, based on their availability and the availability of internet data. Invitations were sent out with a maximum of three reminders. Awareness of this survey was created among student groups to get a better response.

Data analysis

The data were analyzed using R statistical version 4.0.2 (R Core Team (2022), R Foundation for Statistical Computing, Vienna, Austria). Categorical data were reported as percentages and frequencies and continuous data were reported as mean and standard deviation. The student's *t*-test/Chi-square test was used to compare the difference between the groups. To determine the factors associated with satisfaction, step-wise logistic regression was done. $P < 0.05$ was considered statistically significant.

RESULTS

Participants' characteristics

Of the 904 respiratory therapy students, 554 were female (59%) and 349 were male (37%). Most of the responded students were from the state of Karnataka ($n = 526$) and Tamil Nadu ($n = 252$) [Figure 1]. The age range included from 18 years to above 30 years and majority (48%) of them were between 20 and 22 years. Out of 904 responded students, 856 were from bachelor degree (95%), diploma 2 (0.2%), and master degree 46 (4.8%). Responses were

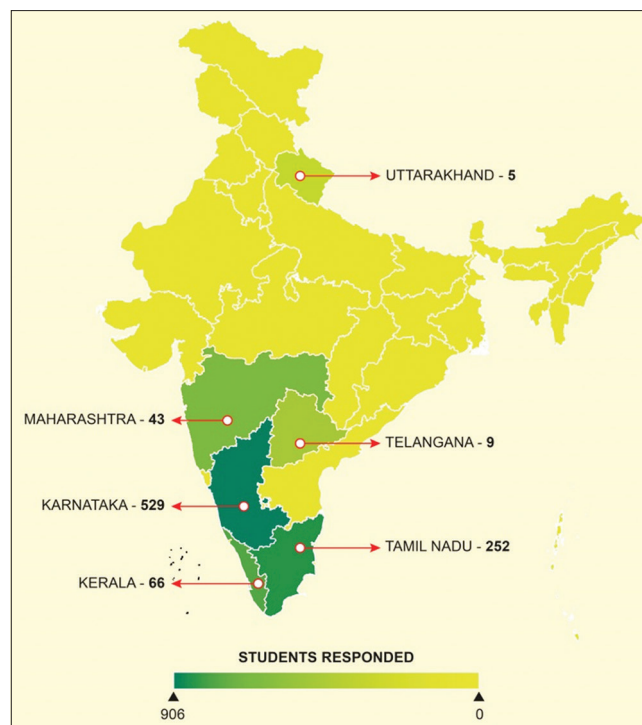


Figure 1: Mapping of the responded students in the survey

obtained from internship students 163 (17%), 1st year 218 (23%), 2nd year 280 (30%), and 3rd year 243 (26%) students as well. Average family income was < 1 lakh/annum in 60% of respondents. Around 89% of the respondents were new to the respiratory therapy field with no family members or relative being in the field before. Moreover, 90% of the respondents had plans of moving abroad for job opportunities. Table 1 provides further details on the demographic characteristics of the participants.

In total, 69% of respondents either agreed or strongly agreed that the nature of their work is physically and emotionally challenging. Gender-specific difference was observed only in this particular response, as 82.9% female agreed or strongly agreed that the work is physically and emotionally challenging, with a statistically significant difference ($P < 0.05$) between genders. The respondents also perceived that the RTs are not adequately recognized, as 83% of the respondents agreed or strongly agreed that RTs are not adequately recognized for their contributions, with no gender-specific difference in response [Table 2].

Satisfaction [Table 3] regarding the learning resources was rated high, 67% of the respondents agreed or strongly agreed that their institute facilities match international standards of respiratory therapy schools in physical facilities like classrooms, furnishing, computers, etc., and in using quality education tools (72%). When it comes to faculty members, 79% agreed or strongly agreed that their faculties have excellent academic, practical, and professional skills, with 76% agreeing or strongly agreeing that there exists good interaction and rapport between the students and teaching

Table 1: Demographical details of the study participants (n=904)

Characteristic	n (%)
Type of degree	
Bachelor	856 (95)
Diploma	2 (0.2)
Master	46 (4.8)
Current academic year	
Internship	163 (17)
First year	218 (23)
Second year	280 (30)
Third year	243 (26)
Age (years)	
18-20	380 (41)
20-22	446 (48)
23-25	53 (5.7)
25-30	11 (1.2)
Above 30	3 (0.3)
<18	11 (1.2)
Gender	
Female	554 (59)
Male	349 (37)
Other	1 (0.1)
Marital status	
Married	13 (1.4)
Prefer not to say	16 (1.7)
Unmarried	875 (94)
Annual income (lakhs)	
<1	539 (860)
>6	43 (4.6)
1-3	250 (27)
4-6	72 (7.7)
Type of family	
Extended family	12 (1.3)
Joint family	199 (21)
Nuclear family	693 (74)
Family member or relative in respiratory therapy field	
No	828 (92)
Yes	76 (8)
Enrolment to the program	
Educational loan from the bank	176 (19)
Fully supported by the family	662 (71)
Scholarship funded	16 (1.7)
Self-funded	50 (5.3)
Do you have plan for moving abroad for Job	
No	95 (10)
Yes	809 (90)

faculty. Around 76% of respondents agreed or strongly agreed that they gain excellent benefits from the clinical and practical trainings. Regarding the safety and security of the clinical training site, 80% of the respondents agreed or strongly agreed it to be safe and secure. Regarding the suggestions [Table 4] provided by the respondents, 85% either agreed or strongly agreed that career counseling needs to be provided by the university and 86% emphasized on the importance and urgent

need for establishing a regulatory body for RT, across the genders with no difference being found.

The students studying postgraduation in RT were 1.78 times more unsatisfied compared with undergraduates. Compared with 1st year students, others were 2.88 times more likely unsatisfied about the learning resources. The students who want to move abroad were 1.28 times more unsatisfied about the learning resources and career prospects. The students who perceived that In India, RTs are not recognized enough for their contributions were 2.98 times more likely to be not satisfied (adjusted odds ratio [AOR] = 2.98, confidence interval [CI] = 1.20–3.89). Students who perceived that RT works are physically and mentally challenging were 2.35 times more unsatisfied about the carrier prospects and learning resources [Table 5].

DISCUSSION

The current study provides valuable insights on the Indian RT students' perception regarding the career prospects and level of satisfaction regarding their learning resources. Most respondents are satisfied with the practical and theoretical trainings, quality of teaching, the available infrastructure, and the skill level of the faculties at their institutions. Majority of the respondents (83%) believed that there are no adequate recognition for RTs in India and 90% of the respondents had in fact were planning to move overseas seeking job opportunities. Moreover, regarding establishing regulatory body for RTs, 86% of the respondents believed that there is an urgent need to establish a regulatory body.

RTs are bedside specialists in RC who combine handling of technologically advanced equipment with their advanced knowledge of respiratory physiology. RTs are believed to understand the importance of research and evidence-based practice in their everyday practice.^[14] The multiple avenues and domains that RTs work on demand extensive theoretical as well as practical knowledge in the field and the respondents in the current study believe that they would be able to attain the same at their current institutions. The respondents were satisfied with the learning resources, infrastructure, and academic and practical knowledge of the faculties and strongly believed that the teaching provided in their respective institutions is of International standards. Students' satisfaction with curriculum depends on multiple factors. In the currently study, level of satisfaction showed great variation varied across academic term and was found to reduce with increase in their current academic year of study. For instance, when compared with 1st year undergraduate students, students studying in other years were 2.88 times more unsatisfied with the learning resources. Similarly, a comparison between undergraduate and postgraduate students showed that students in RT postgraduation to be 1.78 times more unsatisfied when compared to undergraduates. The difference could be due to the factors such as the teaching

Table 2: Students response for perception toward career prospects and learning resources

Based on the gender perception	Characteristic	Overall (n=904), n (%)	Female (n=554), n (%)	Male (n=349), n (%)	P
News stories about the RTs shortage	Don't know	149 (16)	91 (16)	58 (17)	0.055
	No	313 (35)	209 (38)	104 (30)	
	Yes	442 (49)	254 (46)	187 (54)	
Not enough new graduates to fill the increasing number of jobs/demand	Agree	281 (31)	184 (33)	96 (28)	0.5
	Disagree	70 (7.7)	46 (8.3)	24 (6.9)	
	Neutral	299 (33)	188 (34)	111 (32)	
	Strongly agree	233 (26)	122 (22)	111 (32)	
	Strongly disagree	21 (2.3)	14 (2.5)	7 (2.0)	
Work is physically and emotionally challenging	Agree	349 (39)	282 (50.9)	130 (37)	0.025
	Disagree	72 (8.0)	47 (8.5)	38 (11)	
	Neutral	199 (22)	46 (8.3)	77 (22)	
	Strongly agree	274 (30)	177 (32)	96 (28)	
	Strongly disagree	10 (1.1)	2 (0.4)	8 (2.3)	
In India, RTs are not recognized enough for their contributions	Agree	235 (26)	146 (26)	89 (26)	0.2
	Disagree	35 (3.9)	21 (3.8)	14 (4.0)	
	Neutral	117 (13)	65 (12)	52 (15)	
	Strongly agree	511 (57)	321 (58)	189 (54)	
	Strongly disagree	6 (0.7)	1 (0.2)	5 (1.4)	
Other careers are more attractive, so RTs change their profession	Agree	177 (20)	114 (21)	62 (18)	0.8
	Disagree	212 (23)	132 (24)	80 (23)	
	Neutral	289 (32)	175 (32)	114 (33)	
	Strongly agree	145 (16)	86 (16)	59 (17)	
	Strongly disagree	81 (9.0)	47 (8.5)	34 (9.7)	

RTs: Respiratory therapists

faculty, the contents of the curriculum itself, or the social factors, which changes across the course of the program.^[15]

Growing amount of professional burnout is reported to be associated with poor job performance, lack of energy, lack of patience, emotional problems, modest communication and listening skills, poorer patient outcomes, and poor attitude toward both patients and colleagues.^[16] Majority of respondents in the current study believe that their work is physically and mentally challenging, especially in females ($P < 0.05$), which is similar to the burnout at workplace widely reported by RTs across the world.^[17,18] Burnout is primarily coupled with three main factors, namely, emotional exhaustion, reduced personal achievement/accomplishment, and depersonalization.^[19] Feeling of reduced personal accomplishment is one of the three important factors involved in burnout. The respondents in the current study perceived that the RTs are not adequately recognized in India. Although the inadequate recognition of RTs in India both from the fellow medical professionals and from the Government of India has been reported previously,^[4,9] the perception of inadequate recognition could also be a symbol of burnout mentioned by the RT students, stating that their work is physically and mentally challenging.

The level of dissatisfaction also possibly affects the career choice of the students, as the students who wanted to go abroad were 1.28 times more unsatisfied with the curriculum and career aspects. The students who perceived that RTs are not adequately recognized enough in India were 2.98 times

more likely to be not satisfied with the carrier prospects and learning resources (AOR = 2.98, CI = 1.20–3.89).

The two noteworthy suggestions provided by a vast majority of the respondents are, providing career counseling services at the University and the urgent need to establish a regulatory body for RT at the Government level. Around 85% of respondents suggested that career counseling should be provided by the university/institution. The suggestion for career counseling could be attributed to two major factors. First, the respondents believe that there is not enough recognition for RTs in India, and therefore, a vast majority of them are planning to move abroad for job (90%). A career guidance to find a job either in India or abroad would be of benefit to the students. Second, nearly 92% of the students did not have any family members or relatives in the field of respiratory therapy to guide them regarding their future career prospects. The other important suggestion put forth by the respiratory therapy students is the urgent requirement to establish a regulatory body for RT in India. There is a quantum leap in the demand for RTs in India and this has resulted in establishment of increased number of institutions and universities offering respiratory therapy programs in the country with a majority of them running without any regulation or minimum standards of education.^[20] A regulatory body in respiratory therapy profession would help safeguard patients' well-being and safety by establishing minimum qualification, treatment standards, adequate teaching faculties, and a standard curriculum at

Table 3: Students response for satisfaction toward career prospects and learning resources based on the genders

Satisfaction	Characteristic	Overall (n=904), n (%)	Female (n=554), n (%)	Male (n=349), n (%)	P
In my knowledge and experience, the standard of my institute matches with the international standards of respiratory therapy institutions	Agree	338 (37)	210 (38)	127 (36)	0.2
	Disagree	66 (7.3)	44 (7.9)	22 (6.3)	
	Neutral	190 (21)	127 (23)	63 (18)	
	Strongly agree	271 (30)	150 (27)	121 (35)	
	Strongly disagree	39 (4.3)	23 (4.2)	16 (4.6)	
The physical facilities (e.g., classroom, furnishings, and computers) were appropriate	Agree	356 (39)	212 (38)	143 (41)	0.7
	Disagree	60 (6.6)	41 (7.4)	19 (5.4)	
	Neutral	184 (20)	117 (21)	67 (19)	
	Strongly agree	271 (30)	162 (29)	109 (31)	
	Strongly disagree	33 (3.7)	22 (4.0)	11 (3.2)	
Situation of educational environment (school/college/institution) and clinical training site environment is safe and secure	Agree	392 (43)	243 (44)	149 (43)	0.5
	Disagree	29 (3.2)	18 (3.2)	11 (3.2)	
	Neutral	139 (15)	89 (16)	49 (14)	
	Strongly agree	334 (37)	197 (36)	137 (39)	
	Strongly disagree	10 (1.1)	7 (1.3)	3 (0.9)	
There are adequate and quality education tools in our program	Agree	363 (40)	218 (39)	145 (42)	0.068
	Disagree	74 (8.2)	55 (9.9)	19 (5.4)	
	Neutral	155 (17)	99 (18)	55 (16)	
	Strongly agree	293 (32)	169 (31)	124 (36)	
	Strongly disagree	19 (2.1)	13 (2.3)	6 (1.7)	
Various course are well coordinated to ensure equality among student	Agree	373 (41)	220 (40)	152 (44)	0.5
	Disagree	50 (5.5)	42 (7.6)	8 (2.3)	
	Neutral	174 (19)	109 (20)	65 (19)	
	Strongly agree	294 (33)	177 (32)	117 (34)	
	Strongly disagree	13 (1.4)	6 (1.1)	7 (2.0)	
My faculty has excellent academic, practical and professional experiences	Agree	351 (39)	223 (40)	128 (37)	0.092
	Disagree	37 (4.1)	24 (4.3)	12 (3.4)	
	Neutral	132 (15)	86 (16)	46 (13)	
	Strongly agree	363 (40)	210 (38)	153 (44)	
	Strongly disagree	21 (2.3)	11 (2.0)	10 (2.9)	
The faculty members are keen enough on the completion of the course curriculum	Agree	378 (42)	233 (42)	144 (41)	>0.9
	Disagree	40 (4.4)	27 (4.9)	13 (3.7)	
	Neutral	164 (18)	103 (19)	61 (17)	
	Strongly agree	301 (33)	179 (32)	122 (35)	
	Strongly disagree	21 (2.3)	12 (2.2)	9 (2.6)	
Benefits gained by the students from the clinical/practical training sites are excellent	Agree	351 (39)	221 (40)	130 (37)	0.13
	Disagree	42 (4.6)	29 (5.2)	13 (3.7)	
	Neutral	158 (17)	104 (19)	53 (15)	
	Strongly agree	330 (37)	188 (34)	142 (41)	
	Strongly disagree	23 (2.5)	12 (2.2)	11 (3.2)	
My faculty has excellent academic, practical and professional experiences	Agree	353 (39)	220 (40)	132 (38)	0.11
	Disagree	35 (3.9)	23 (4.2)	12 (3.4)	
	Neutral	141 (16)	98 (18)	43 (12)	
	Strongly agree	358 (40)	205 (37)	153 (44)	
	Strongly disagree	17 (1.9)	8 (1.4)	9 (2.6)	
The faculty members are keen enough on the completion of the course curriculum	Agree	362 (40)	227 (41)	134 (38)	0.7
	Disagree	33 (3.7)	19 (3.4)	14 (4.0)	
	Neutral	185 (20)	119 (21)	66 (19)	
	Strongly agree	309 (34)	181 (33)	128 (37)	
	Strongly disagree	15 (1.7)	8 (1.4)	7 (2.0)	

Contd...

Table 3: Contd...

Satisfaction	Characteristic	Overall (n=904), n (%)	Female (n=554), n (%)	Male (n=349), n (%)	P
There is good interaction between students and teaching faculty during the classes	Agree	343 (38)	213 (38)	129 (37)	0.4
	Disagree	31 (3.4)	20 (3.6)	11 (3.2)	
	Neutral	164 (18)	110 (20)	54 (15)	
	Strongly agree	346 (38)	200 (36)	146 (42)	
	Strongly disagree	20 (2.2)	11 (2.0)	9 (2.6)	
The teachers covered all the key points of the current syllabus	Agree	320 (35)	202 (36)	118 (34)	0.3
	Disagree	39 (4.3)	23 (4.2)	16 (4.6)	
	Neutral	186 (21)	123 (22)	63 (18)	
	Strongly agree	322 (36)	181 (33)	140 (40)	
	Strongly disagree	37 (4.1)	25 (4.5)	12 (3.4)	

Table 4: Students response for suggestions toward career prospects and learning resources based on the genders

Suggestion	Characteristic	Overall (n=904), n (%)	Female (n=554), n (%)	Male (n=349), n (%)	P
Career counselling help should be provided by the university	Agree	340 (38)	202 (36)	138 (40)	0.6
	Disagree	14 (1.5)	6 (1.1)	8 (2.3)	
	Neutral	124 (14)	76 (14)	48 (14)	
	Strongly agree	422 (47)	267 (48)	154 (44)	
	Strongly disagree	4 (0.4)	3 (0.5)	1 (0.3)	
The clinical teaching is inadequate	Agree	125 (14)	85 (15)	40 (11)	0.4
	Disagree	261 (29)	152 (27)	109 (31)	
	Neutral	265 (29)	173 (31)	92 (26)	
	Strongly agree	48 (5.3)	31 (5.6)	17 (4.9)	
	Strongly disagree	205 (23)	113 (20)	91 (26)	
There is no systematic training	Agree	227 (25)	141 (25)	85 (24)	0.8
	Disagree	172 (19)	105 (19)	67 (19)	
	Neutral	49 (5.4)	29 (5.2)	20 (5.7)	
	Strongly agree	191 (21)	111 (20)	80 (23)	
	Strongly disagree	265 (29)	168 (30)	97 (28)	
There is no systematic training	Agree	255 (28)	145 (26)	109 (31)	0.25
	Disagree	63 (7.0)	36 (6.5)	27 (7.7)	
	Neutral	296 (33)	204 (37)	92 (26)	
	Strongly agree	263 (29)	152 (27)	111 (32)	
	Strongly disagree	27 (3.0)	17 (3.1)	10 (2.9)	

Table 5: Factors associated with students' satisfaction

Variables	AOR	95% CI	P
Type of degree (Reference=Undergraduate)	1.78	1.03-2.98	0.05
Current academic years (Reference=First year)	2.88	1.98-4.24	0.03
Do you have plan for moving abroad for job (Reference=No)	1.28	1.02-2.21	0.04
Work is physically and emotionally challenging (Reference=Not agreed)	2.35	1.25-4.56	0.01
In India, RTs are not recognized enough for their contributions (Reference=Agreed)	2.98	1.20-3.89	0.02

AOR: Adjusted odds ratio, CI: Confidence interval, RTs: Respiratory therapists

the teaching institutions,^[9] which would in turn improve the job opportunities for the RTs in India as well.

CONCLUSION

The respiratory therapy students believe that there is no

adequate recognition for RTs in India and a vast majority of them want to go abroad seeking job opportunities. A proper regulatory body for RT would help in standardizing both the academic and clinical aspects of RT, along with improving job opportunities for RTs in the future.

Availability of data and materials

The datasets generated and/or analyzed during the current study are not publicly available, but are available from the corresponding author on reasonable request.

Ethics declarations

This study was approved by the ethics committee of the Srinivas University, Mangalore, Karnataka, India (IRB number: SUEC 2020/001 Dated January 02, 2020). Participants provided informed consent electronically and anonymously. All study procedures were performed in accordance with the relevant institutional guidelines and regulations.

Competing interests

Mr. Jithin K Sreedharan serves as the Section Editor of the Indian Journal of Respiratory Care, and as the General Secretary of the Indian Association of Respiratory Care, in an unpaid leadership capacity. All other authors declare they have no conflicts of interest to disclose.

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Conflicts of interest

There are no conflicts of interest.

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