



1998

Personality and Practice Settings

Glen K. Teramoto
University of North Dakota

Follow this and additional works at: <https://commons.und.edu/pt-grad>



Part of the [Physical Therapy Commons](#)

Recommended Citation

Teramoto, Glen K., "Personality and Practice Settings" (1998). *Physical Therapy Scholarly Projects*. 437.
<https://commons.und.edu/pt-grad/437>

This Scholarly Project is brought to you for free and open access by the Department of Physical Therapy at UND Scholarly Commons. It has been accepted for inclusion in Physical Therapy Scholarly Projects by an authorized administrator of UND Scholarly Commons. For more information, please contact zeinebyousif@library.und.edu.

PERSONALITY AND PRACTICE SETTINGS

by

Glen K. Teramoto
Bachelor of Arts in Economics
University of Hawaii at Manoa, 1986
Bachelor of Science in Physical Therapy
University of North Dakota, 1997

An Independent Study

Submitted to the Graduate Faculty of the

Department of Physical Therapy

School of Medicine

University of North Dakota

in partial fulfillment of the requirements

for the degree of

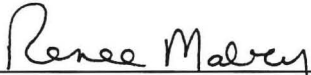
Master of Physical Therapy

Grand Forks, North Dakota

May
1998



This Independent Study, submitted by Glen K. Teramoto in partial fulfillment of the requirements for the Degree of Master of Physical Therapy from the University of North Dakota, has been read by the Faculty Preceptor, Advisor, and Chairperson of Physical Therapy under whom the work has been done and is hereby approved.



(Faculty Preceptor)



(Graduate School Advisor)



(Chairperson, Physical Therapy)

PERMISSION

Title Personality and Practice Settings

Department Physical Therapy

Degree Master of Physical Therapy

In presenting this Independent Study Report in partial fulfillment of the requirements for a graduate degree from the University of North Dakota, I agree that the Department of Physical Therapy shall make it freely available for inspection. I further agree that permission for extensive copying for scholarly purposes may be granted by the professor who supervised my work or, in her absence, by the Chairperson of the department. It is understood that any copying or publication or other use of this independent study or part thereof for financial gain shall not be allowed without my written permission. It is also understood that due recognition shall be given to me and the University of North Dakota in any scholarly use which may be made of any material in my Independent Study Report.

Signature 

Date 12/16/97

TABLE OF CONTENTS

LIST OF TABLES	v
ACKNOWLEDGMENTS	vi
ABSTRACT	vii
CHAPTER	
I INTRODUCTION	1
Myers-Briggs Type Indicator in Health Care	7
Physical Therapy Practice Settings	8
Purpose	13
II METHODS	14
Subjects	14
Survey Development	14
Data Analysis	16
III RESULTS	17
IV DISCUSSION/CONCLUSION	23
Discussion	23
Conclusion	25
APPENDIX A: Institutional Review Board Form	26
APPENDIX B: Survey	32
APPENDIX C: Follow-up Postcard	36
REFERENCES	38

LIST OF TABLES

Table	Page
1. The 16 Personality Types	4
2. Occupational Choices by Personality Types	5
3. Myers-Briggs Type Indicator Profile of Respondents	18
4. Current Practice Setting and Number of Years in Current Setting	19
5. Current Practice Setting and Major Personality Preference	20
6. List of Factors Besides Personality Preference	22

ACKNOWLEDGMENTS

I would like to thank my advisor, Renee Mabey, P.T., Ph.D., for her guidance, understanding, and encouragement during this independent study. Without her assistance, this study would not have been completed.

A special thank you is also extended to my family for their support.

ABSTRACT

The field of physical therapy has had substantial growth this decade and is considered one of the best career choices. One reason for this growth is the implementation of physical therapy in new settings. Physical therapists are no longer restricted to the traditional hospitals and rehabilitation settings as choices. Today, physical therapists can choose to practice in more dynamic settings such as the public school system, sports acceleration and rehabilitation facilities, aqua-therapy, hippotherapy, and industrial facilities. The purpose of this study is to determine if there is a correlation between personality traits and the practice settings for the University of North Dakota graduating class of 1995. In 1993, as junior students in the physical therapy program at the University of North Dakota, this class participated in a Myers-Briggs personality test. For this study, the 48 individuals from that class were sent a questionnaire to determine their current practice setting and years employed in that setting. Thirty-eight returned the survey for a response rate of 86.4%. Due to the small sample size, a non-parametric statistical analysis could not be performed; therefore, only descriptive trends were assessed.

Primary results of the study indicated that the feelers and sensors gravitated toward the hospital setting, while the extrovert gravitated towards the

private practice setting. This is similar to other allied health care professionals.
Further conclusions could not be drawn due to the small sample size.

CHAPTER I

INTRODUCTION

Choosing a career is a major event that has an enormous impact on a person's life. The career selection process involves the interaction of vocational ability, vocational interest, and occupational relevant personality.¹ Vocational psychologists and counselors use personality tests to obtain more information to build upon the existing base of interest and ability in guiding a person's career choice.² According to Holland, "members of a vocation have similar personalities and similar histories of personal development."^{3(p9)} He also states that "vocational satisfaction depends on the interaction between one's personality and the environment, which is usually made up of people with whom you have similar personalities so you are more likely to perform well and have greater satisfaction in a vocation in which you fit psychologically."^{3(p9)} Therefore, personality measures are frequently used to determine the occupation that best fits your personality type.

According to Lowman,¹ only a few types of personality tests have shown some degree of relevance for occupational purposes. The Myers-Briggs Type Indicator (MBTI) is one of them.¹ The MBTI is based on a theory created by Carl Jung. Jung proposed categorizing people by their psychological typology according to how they received information and how they used the information to

reach a conclusion.⁴ The MBTI is a questionnaire that determines a person's preference for a personality type and learning style.⁴⁻⁶ Four scales are used to determine a personality preference. The scales are extroversion or introversion (EI), sensing or intuition (SN), thinking or feeling (TF), and judgment or perception (JP). A person receives a dichotomous score on each of the four scales and their personality "type" is a combination of the four preferences.⁴

The EI scale determines your preference on where you like to focus your attention.⁵ Extroverts will tend to focus on the outer world. They tend to talk first and think later, do not mind interruptions, and prefer to be with a group.⁶ Introverts center more attention on their own inner world.⁵ Introverts are often reflective before responding, attentive to details, prefer to work alone, and think before acting.⁴⁻⁶

The SN scale focuses on our ability to acquire information.⁴⁻⁶ A person who works well with facts, is practical, and uses his senses to determine what is actually happening is considered to be a sensor. An intuitive person is one who goes beyond the information given from the senses in decision making, looks at the big picture, investigates new possibilities and values imagination and inspiration.

The third scale is the TF scale. This scale is an indication of how decisions are made and opinions are formed.⁴⁻⁶ A person is said to be a thinker if he or she makes decisions objectively based on cause and effects, prefers logical analysis, and centers on what is fair and truthful. A person is said to be a

feeler if his or her decision making style is person-centered, considerate of other's feelings, sympathetic, and compassionate.

The JP scale looks at how you adapt to the outer world and how you orient your life.⁴⁻⁶ The judgmental types are structured, orderly, like planning, and seek closure before beginning new projects. The perceiver prefers to be flexible, spontaneous, enjoys new tasks, and enjoys exploring the unknown.

These four major scales lead to 16 possible combinations of personality types (see Table 1). The type is a combination and interaction of the four major preferences which can be shown in shorthand by the four letter coding. An example of this would be the ISTJ (Introvert-Sensing-Thinking-Judging) profile who prefers to focus on the inner world: an introvert (I); who processes information based on solid facts and is careful about its accuracy: a sensor (S); who prefers to make decisions by logical analysis and sound fairness: a thinker (T); and who adapts to the outer world in an organized, planned, systematic procedure: a judger (J). The ISTJ's talents for organization and accuracy allow them to fit well in careers as auditors, accountants, managers, administrators, and police detectives^{4,6} (Table 2).

People tend to be attracted to and are most satisfied in jobs and careers that provide them with the best opportunity to express and use their personality.⁵ If your daily work has a decision making style that comes naturally to you, your decision will be better and be made with more confidence. According to Myers and Myers,⁴ the most influential scale with occupational choices is the SN

Table 1.—The 16 Personality Profile Types

<p style="text-align: center;">ISTJ</p> <p>I - Introvert S - Sensor T - Thinker J - Judger</p>	<p style="text-align: center;">ISFJ</p> <p>I - Introvert S - Sensor F - Feeler J - Judger</p>	<p style="text-align: center;">INFJ</p> <p>I - Introvert N - Intuitive F - Feeler J - Judger</p>	<p style="text-align: center;">INTJ</p> <p>I - Introvert N - Intuitive T - Thinker J - Judger</p>
<p style="text-align: center;">ISTP</p> <p>I - Introvert S - Sensor T - Thinker P - Perceiver</p>	<p style="text-align: center;">ISFP</p> <p>I - Introvert S - Sensor F - Feeler P - Perceiver</p>	<p style="text-align: center;">INFP</p> <p>I - Introvert N - Intuitive F - Feeler P - Perceiver</p>	<p style="text-align: center;">INTP</p> <p>I - Introvert N - Intuitive T - Thinker P - Perceiver</p>
<p style="text-align: center;">ESTP</p> <p>E - Extrovert S - Sensor T - Thinker P - Perceiver</p>	<p style="text-align: center;">ESFP</p> <p>E - Extrovert S - Sensor F - Feeler P - Perceiver</p>	<p style="text-align: center;">ENFP</p> <p>E - Extrovert N - Intuitive F - Feeler P - Perceiver</p>	<p style="text-align: center;">ENTP</p> <p>E - Extrovert N - Intuitive T - Thinker P - Perceiver</p>
<p style="text-align: center;">ESTJ</p> <p>E - Extrovert S - Sensor T - Thinker J - Judger</p>	<p style="text-align: center;">ESFJ</p> <p>E - Extrovert S - Sensor F - Feeler J - Judger</p>	<p style="text-align: center;">ENFJ</p> <p>E - Extrovert N - Intuitive F - Feeler J - Judger</p>	<p style="text-align: center;">ENTJ</p> <p>E - Extrovert N - Intuitive T - Thinker J - Judger</p>

Table 2.—Occupational Choices by Personality Types

ISTJ	ISFJ	INFJ	INTJ
Administrator/ Manager Dentist Police Detective Auditor/Accountant Law Civil Engineer	Nurse Teacher (preschool) Librarian	Education Consultant Clergy Teacher (English, arts) Science/Research Internal Medicine	Law Engineer Teacher (college) Neurology Pathology Philosophy
ISTP	ISFP	INFP	INTP
Farmer Mechanic Dental Hygienist Anesthesiologist Statistics	Nurse Bookkeeper Dental assistant Craftsman General Practice	Psychiatrist Psychologist Writers/Artist Social Work Music Composer	Computer Programmer Social Scientist Writer/Artist
ESTP	ESFP	ENFP	ENTP
Marketing Salesperson Auditor	Child Care Receptionist Health Care Troubleshooter Obstetrics	Rehabilitation Counselor Entertainer Journalism Advertising	Inventor Marketer Promoter Scientist
ESTJ	ESFJ	ENFJ	ENTJ
Business/Industry Construction General Practice Surgeon	Health Care Clergy Pediatrics	Teaching Entertainer Counseling Medical Faculty	Lawyer Mortgage Broker Manager

preference. The sensing types are drawn to occupations that let them deal with constant stream of facts and figures, whereas intuitives like situations in which they can look at the new possibilities.⁴ The next most important preference is the TF scale, which is how we make judgments and decisions.⁵ “People who prefer thinking are skillful in handling matters that deal with inanimate objects, machinery, principles, or theories—none of which have any inconsistent and unpredictable feelings and all of which can be handled logically.”^{4(p150)} The feeling types are better skilled in interacting with people and are concerned with what they value and how they can be persuaded or helped.⁴

The SN scale can be teamed up with the TF scale to produce a minor personality profile with four possible combinations. These are the 1) ST: sensing plus thinking, 2) SF: sensing plus feeling, 3) NT: intuition plus thinking, and 4) NF: intuition plus feeling scales. Each combination has qualities all its own arising from the way information is gathered, the SN scale, and the way decisions are made, the TF scale. People with the same combination are apt to be easiest to understand because they tend to consider the same things as important in decision making.⁴ People who differ will be hardest to understand as it is likely they will take the opposing views. If these clashes of view points are between co-workers and associates, this constant opposition can become stressful. “An even more destructive conflict may exist between people and their jobs, when the job makes no use of the worker’s natural combination of perception and judgment but constantly demands the opposite combination.”^{4(p4)} For example, the ST preference focuses on “facts and handles these with

impersonal analysis.”^{4(p5)} They tend to be successful in using their abilities in skills dealing with facts, objects, and money, which is why there is a high incidence of accountants and bankers with this preference.⁴ Another example is the SF preference, as these people are noted for handling facts well with a warm personal touch.⁴ They enjoy occupations that provide practical help and service to people, thus they do well in medical specialties including primary patient care and health related professions.⁴

Myers-Briggs Type Indicator in Health Care

The Myers-Briggs Type Indicator (MBTI) is a widely used tool in the assessment of personality type in the allied health fields.¹ Studies have confirmed that different personality types are found among the different health care fields using the MBTI.⁷⁻⁹ In a study by Friedman and Slatt,¹⁰ recent medical student specialty choices were examined with the MBTI taken in the first year of medical school. They found that students choosing family medicine were sensing, feeling, and judging types. Those students who chose obstetrics-gynecology were sensing, thinking, and judging types, while students who selecting psychiatry tended to be intuitive, feeling, and perceiving types. These findings are consistent with similar studies on medical students.^{4,11}

Personality traits have often served as an aid in selection and directing students toward an allied health field.^{8,9} Researchers have discovered that certain groups of allied health students have specific personality characteristics. “More students choosing the profession of physical therapy as well as physician’s assistant rate themselves as being more independent than students

in medical technology and cardiorespiratory sciences.”^{8(p246)} There were also more physical therapy students who described themselves as self-confident as compared to medical technology, cardiorespiratory science, and physician’s assistant students.⁸ Physical therapy students were empathetic and highly people oriented, while medical technology students were task oriented and clinical dietetics students have varying amounts of all three characteristics.⁹

Currently, there is only one published study correlating personality type and career choices of physical therapy students as a generalist or specialist clinician. According to Rovezzi-Carroll and Leavitt,¹² a generalist will practice in more traditional settings like hospital and rehabilitation centers. The specialist will practice in less restrictive settings and may be employed in more non-traditional sites such as public school systems, industrial and business facilities, and athletic training centers.¹² The study concluded that there exists a significant difference in personality types between those “who desired careers as generalist clinicians, who scored higher on the sensing and judging scale than those who desired careers as specialist clinicians, who scored higher on the intuitive and perceiving scale.”^{12(p1551)} Rovezzi-Carroll and Leavitt concluded that more research is needed and that the classification of specialist areas be expanded for further research.

Physical Therapy Practice Settings

According to the American Physical Therapy Association, a large portion of physical therapists are no longer practicing in a hospital setting.¹³ Other practice settings include private physical therapy offices, industrial health

centers, nursing homes, sports facilities, research institutions, rehabilitation centers, home health agencies, schools and colleges. The patient's diagnosis and population will be different in each setting leading to gathering and interpreting information in different ways. Indeed, each setting brings with it new responsibilities and duties.

The traditional hospital setting consists of acute and subacute patients with multisystem dysfunctions. Physical therapy services are often critical for restoring the functional mobility of patients with multisystem involvement. Basic key skills of the physical therapist in this setting involve time and caseload management and effective communication for patient and family teaching.¹⁴ Most patients in this setting have multisystem involvement which requires additional skills to quickly respond to their changing medical conditions. Once patients are medically stable, they are transferred to another level of care, such as home health, skilled nursing facilities, rehabilitation centers, or outpatient settings.¹⁵

Once the medical condition of the patient is stabilized, he/she could be transferred to a comprehensive rehabilitation center. These centers offer services to patients who can benefit from an intensive, coordinated, interdisciplinary rehabilitation program.¹⁵ Intensive therapy is provided daily and is expected to address a wide range of problems including physical, social, vocational, and psychological needs. The physical therapist works closely with other health professionals in evaluation and assessing patient's recovery from injury, surgery, or disease and in the development and implementation of a

treatment program. The therapist also teaches patients and families on the use of assistive devices, home exercise programs, and artificial limbs. A common goal of the rehabilitation setting is to assist the patient to achieve the highest level of function.

Some patients incapable of participating in an active comprehensive rehabilitation program may receive continued therapy at a skilled nursing facility or nursing home. Patients in a rehabilitation program who have plateaued functionally, making continuing inpatient rehabilitation impractical, may also be transferred to this type of setting. In other circumstances, if family care of the patient is unavailable or inadequate, the patient may be placed in a nursing home setting. The physical therapy treatment is still on a continued basis but on a less intensive level and goals are set for a longer period of time. The goals are to accomplish smaller increases in functional gains and maintain accomplishment already attained. The majority of patients in this population are the elderly who have a wide range of diagnoses and multisystem involvement and who are unable to perform activities of daily living independently.

The private physical therapy office setting typically treats patients on an outpatient basis. The setting is characterized as fast paced, utilizing a lot of technical equipment. The primary patient population has an orthopedic disorder with back injury as the most prevalent impairment.¹⁶ The outpatient facility may also have a sports related rehabilitation component. The involvement of the physical therapist is to assess performance ability, implement a sports specific

conditioning program, and recommend assistive and safety equipment to reduce injury.¹³

In business and industry, the physical therapist assesses fitness requirements for a specific job and screens and evaluates employees' health conditions with respect to job related physical needs.¹³ The physical therapist also identifies potential dangerous work sites and modifies task performance to prevent job related injury. The physical therapist who works in the industrial setting works closely with industry professionals such as business and corporation management. The physical therapist needs the ability to communicate in the business and industry language in order to function successfully.

Today, there is a growing concern to reduce health care costs. To reduce cost, patients are having shorter stays in hospitals with continued care at home. The home health care setting goes beyond the traditional homemaking services. These services now include physical, occupational, and speech therapies as well as nursing, psychology, and social work. The treatment sessions are done in the patient's home. The therapist works closely with the family and must feel comfortable in different cultural and home situations. Some of the skills necessary to work in this setting include working independently and being creative in treatment planning due to the inaccessibility of highly technical equipment.

Managing the pediatric patient requires working closely with social and educational professionals.^{17,18} The role of the physical therapist is to evaluate

and develop a treatment program to assist the family and child in attaining the highest level of independence. The physical therapist works within a multidisciplinary team in alleviating specific handicaps and improving the quality of life. The pediatric physical therapist develops a long term relationship with the child and family as treatment may last for years. The physical therapist working in this setting needs to break away from the conservative restrictive medical model with strict schedules and rules and change the treatments towards the educational model where the goals are to develop independence through learning. Also, functional outcomes are addressed toward the educational needs as related to the school environment. The physical therapist visits many schools in a single day and works independently.

The academic setting is located on a major university or college campus and involves the development of curricula to prepare students for careers in physical therapy.¹³ In this setting, the emphasis is on teaching physical therapy, reviewing pathologies, and conducting research rather than direct clinical treatment. The therapist in this setting needs to be able to adjust his or her communication style depending on the learning style of the student.

The field of physical therapy has had substantial growth this decade. One reason for this growth is the implementation of physical therapy in newer settings. Physical therapists are not longer restricted to the traditional hospitals and rehabilitation settings as choices. Today, physical therapists can choose to practice in more dynamic settings. The development of these newer settings have required physical therapists to acquire advanced knowledge and skills

which have led them to become specialists. These setting may require a different way of gathering information and decision making. Therefore, a physical therapist who possesses a matching personality type can function more effectively, make better decisions, and thus improve patient care and job satisfaction. The decision of the physical therapist to choose from a number of diverse practice settings may be influenced by the personality type of the physical therapist.

Purpose

The purpose of this pilot study is to determine if there is a correlation between personality types as measured by the MBTI and practice settings of physical therapists from the University of North Dakota graduating class of 1995. As junior students in 1993, these individuals participated in a Myers-Briggs Type Indicator assessment. It has been two years since their entry into the physical therapy profession which is enough time to become acquainted with opportunities in the physical therapy profession and to choose a setting that best fits their personalities.

CHAPTER II

METHODS

A human subjects review form was submitted to the Institutional Review Board (IRB) at the University of North Dakota prior to initiating this independent study. The approval from the IRB was obtained. (See Appendix A.)

Subjects

Forty-eight individuals from the physical therapy graduating class of 1995 were selected to receive the survey. In 1993, while junior students in the physical therapy program at the University of North Dakota, these individuals participated in a Myers-Briggs Type Indicator assessment. At the time the surveys were sent, it was a little over two years since the students' initial entry into the physical therapy profession. The two years of working in the field should be enough time to become acquainted with all the possible opportunities and make a decision on the setting that seems appropriate for the individual. The names and addresses of these individuals were obtained from the University of North Dakota Physical Therapy Department.

Survey Development

The survey questions were developed from the review of the current literature regarding physical therapy career choices.^{13,19} The survey contained questions which addressed current physical therapy employment status, current

practice setting and length of time in that setting, and other factors which may have influenced the choice of setting.

The scores from the Myers-Briggs Type Indicator (MBTI) previously administered were used as the personality profile. The MBTI is an established tool in assessing personality types in the allied health fields.⁴ The reliability data of the MBTI for both internal and test-retest reliability have proven satisfactory in recent assessment with coefficients above .80.²⁰ Validity data are reported to be satisfactory in correlation with other personality measures.²¹

Mailing

An envelope containing a cover letter, a survey (see Appendix B), and a postage-paid self-addressed return envelope was mailed to the individual's home address. In order to maintain confidentiality, each survey was issued a specific identification number on the top right-hand corner. The identification number given corresponded to an individual on the master list of subjects and the envelope was mailed to the subject's corresponding address. Two weeks after the initial mailing, a follow-up postcard (see Appendix C) was sent to each subject reminding the subject to complete and return the survey and to serve as a thank you to those who already participated. Return of the survey implied participation in this study and, therefore, provided authorization to retrieve the results of the prior Myers-Briggs Type Indicator assessment score. (See Appendix B).

Data Analysis

The Myers-Briggs Type Indicator scores and the information from the surveys were inputted onto a computer statistical program to analyze the data. Due to the small sample size, the minimum required subjects in each practice setting were not attained; consequently, a non-parametric statistical correlation could not be performed. The data were therefore analyzed to look for descriptive trends.

Reporting

The results of the survey were reported in aggregate to protect the confidentiality of the respondents. This Independent Study will be available for inspection to the faculty and students at the University of North Dakota Physical Therapy Department. The results of this study will also be sent to respondents who requested a copy.

CHAPTER III

RESULTS

There were 48 graduating physical therapy students in 1995. Two graduated students did not have a forwarding address so no surveys were sent to them. Out of the remaining 46, two surveys were returned by the postal service without a forwarding address. Thirty-eight responded to the survey, making the response rate 86.4%.

The personality profile of the 38 respondents is presented in Table 3. The major typology profile included 18 introverts, 20 extroverts, 27 sensors, 11 intuitives, 13 thinkers, 25 feelers, 22 judges, and 16 perceivers. In the minor typology, there were 8 sensor/thinkers, 19 sensor/feelers, 5 intuitive/thinkers, and 6 intuitive/feelers. There were 13 of the 16 combinations present from the respondent pool.

The demographic profile of the 38 respondents included 9 (23.7%) males and 29 (76.3%) females. All the respondents (100%) are currently employed full-time in physical therapy.

In comparing years of practice in the setting and the type of setting, the results were mixed. The hospital setting is where the highest number of the respondents are employed, 12 out of the 38 (31.6%); this was followed by the rehabilitation center setting with 9 out of 38 (23.7%) and extended care or

Table 3.—MBTI Profile of Respondents

PERSONALITY PROFILE	n (number of respondents)
Introvert	18
Extrovert	20
Sensor	27
Intuitive	11
Thinker	13
Feeler	25
Judger	22
Perceiver	16
Sensor/Thinker	8
Sensor/Feeler	19
Intuitive/Thinker	5
Intuitive/Feeler	6

nursing home with 7 out of 38 (18.4%). Ten out of 12 (83.3%) in the hospital setting, along with 6 out of 9 (66.7%) in the rehabilitation setting, have been there since graduating three years ago. In comparison, four out of seven (57.1%) who are employed in the extended care or nursing home setting have been employed there less than a year (Table 4).

The distribution of personality type and practice settings are presented in Table 5. The hospital setting with 12 (31.6%) respondents is where the highest number were employed. In the hospital setting, the greatest difference in major personality types was between the thinkers (3) and the feelers (9). This was followed next between the sensors (8) and intuitives (4). The second highest,

Table 4.—Current Practice Setting and Years in Current Setting

SETTING	Less than 1 year	Between 1 and 2 years	Between 2 and 3 years
Hospital	2	0	10
Rehabilitation Center	1	2	6
Extended Care/Nursing Home	4	0	3
Private Physical Therapy Office	1	1	3
Home Health Agency	1	1	0
Public or Non-Public School	0	1	0
Business/Industrial	0	0	0
Academic Institution	0	0	0
Other	0	1	1

Table 5.—Current Practice Setting and Major Personality Preference

Setting	(I) Introvert	(E) Extrovert	(S) Sensor	(N) Intuitive	(T) Thinker	(F) Feeler	(J) Judger	(P) Perceiver
Hospital	6	6	8	4	3	9	7	5
Rehabilitation Center	5	4	5	4	5	4	5	4
Extended Care/Nursing Home	4	3	5	2	2	5	5	2
Private Practice Therapy Office	1	4	4	1	2	3	2	3
Home Health Agency	1	1	2	0	1	1	2	0
Public or Non-Public School	1	0	1	0	0	1	0	1
Business/Industry	0	0	0	0	0	0	0	0
Academic Institution	0	0	0	0	0	0	0	0
Other	0	2	2	0	0	2	1	1

nine, (23.7%) were employed in the rehabilitation center setting. In the rehabilitation center and extended care or nursing home settings, the major personality types were distributed evenly. In the private physical therapy office setting, there was a preference of extroverts (4) over introverts (1) and sensors (4) over intuitives (1). There were not enough respondents in the other practice settings to report any types of descriptive trends.

Twenty-six respondents out of the 38 listed other factors besides personality preference as their primary reason for choosing a setting and 15 out of the 26 listed more than one factor. Out of the 26 respondents who indicated other factors, 10 listed geographic location as a primary concern. Being close to home and working in a small town setting were frequently mentioned. Five listed the opportunity to increase their knowledge by being able to rotate into different areas or specialties and learning from an experienced physical therapist. The few who chose home health preferred the flexibility to set their own schedule, freedom to work independently, and an increase in quality time with patients as their primary reasons for choosing this setting. A list of the factors are presented in Table 6.

Table 6.—List of Factors Besides Personality Preference

FACTORS:	No.	
Geography		10
Close to Home	5	
Small Town Setting	3	
Location	2	
Learning Experience		5
Patient Care		5
Increase Autonomy	3	
Increase Quality of Time with Patient	1	
Increase Flexibility of Work Schedule	1	
Management/Staff		4
Salary and Wages		1
Only Job Available		1
Total		26

CHAPTER IV

DISCUSSION/CONCLUSION

Discussion

The purpose of this study was to examine if a correlation exists between personality types and practice settings for the University of North Dakota Physical Therapy graduating class of 1995. This study was to go beyond the generalist and specialist classifications of Rovezzi-Carroll and Leavitt and probe further into more specific practice settings.

The limitation of this study is the small sample size. There were not enough respondents for each of the 16 personality types and practice settings to perform non-parametric analysis. Therefore, only descriptive trends could be analyzed.

Out of the 12 respondents who were employed in a hospital setting, nine were feelers compared to three thinkers. According to Myers and Myers,⁴ feelers were described as warm, sensitive, and people oriented. Feelers are effective in the sympathetic handling of people where personal issues become important like the hospital setting. The result of having a majority of feelers in the hospital setting is similar to personality types of hospital nurses.²² In addition, of the 12 respondents in the hospital setting, eight were sensing and four were intuitives. The sensors' strengths include working well with details, being careful, and

taking a systematic approach to problem solving. Characteristics of sensors are their preferences to follow step by step protocols and focus on here and now. This personality type works well in a hospital acute setting where the focus is on the immediate needs of the patient.

The extrovert likes to be oriented to the outer world, enjoys meeting people, and needs a variety of environment. This explains why more extroverts chose a private practice office setting, which is described as fast paced and less structured. In the other settings, no other descriptive trends were noted. This could have been influenced by numerous factors. These factors could be the small sample size and the fact that 68.4% of respondents stated other influences on choice of setting, such as location and small town atmosphere.

The predominant personality type of the respondents, with 19 out of 38 (50%) identified as sensor/feelers, was also found to be the majority personality type of other health care professionals according to Myers and Myers.⁴ The sensor/feeler personality type is noted for handling facts well with a warm personal touch and enjoys providing practical help and service to people, thus a personality match for a health care professional. The majority of respondents (55.3%) were employed in the hospital or rehabilitation settings. This can be explained as hospitals and rehabilitation settings often serve as a training ground for new graduates who work in these settings to gain experience.¹⁵

As the field of physical therapy continues to expand into new settings, there will be an ongoing need for this type of study. A follow-up survey on the respondents in 10 years could provide interesting results; as the respondents

gain experience, they should gravitate towards settings of their interest. Future research should consist of a large enough sample size to be able to perform non-parametric correlations.

Conclusion

This preliminary study involved a small sample size represented by one University of North Dakota Physical Therapy class. The descriptive trends indicated that feelers and sensors gravitated toward the hospital setting while the extroverts gravitated toward private practice. These results were similar to other published material on allied health field professionals.^{4,7,8,11,12,23} Due to the small sample size, further conclusions could not be drawn from this study.

APPENDIX A

27
REPORT OF ACTION: EXEMPT/EXPEDITED REVIEW
University of North Dakota Institutional Review Board

DATE: September 11, 1997 PROJECT NUMBER: IRB-9709-038
NAME: Glen Teramoto DEPARTMENT/COLLEGE: Physical Therapy
PROJECT TITLE: Personality Types and Physical Therapy Practice Settings

The above referenced project was reviewed by a designated member for the University's Institutional Review Board on September 12, 1997 and the following action was taken:

- Project approved. **EXPEDITED REVIEW** No. _____.
Next scheduled review is on _____.
- Project approved. **EXEMPT CATEGORY** No. 2. No periodic review scheduled unless so stated in the Remarks Section.
- Project approved **PENDING** receipt of corrections/additions. These corrections/additions should be submitted to ORPD for review and approval. **This study may NOT be started UNTIL final IRB approval has been received.** (See Remarks Section for further information.)
- Project approval **deferred**. **This study may not be started until final IRB approval has been received.** (See Remarks Section for further information.)
- Project **denied**. (See Remarks Section for further information.)

REMARKS: Any changes in protocol or adverse occurrences in the course of the research project must be reported immediately to the IRB Chairperson or ORPD.

cc: R. Mabey, Adviser
Dean, Medical School

Lynn Anderson
Signature of Designated IRB Member
UND's Institutional Review Board

9/12/97
Date

If the proposed project (clinical medical) is to be part of a research activity funded by a Federal Agency, a special assurance statement or a completed 310 Form may be required. Contact ORPD to obtain the required documents.

EXPEDITED REVIEW REQUESTED UNDER ITEM _____ (NUMBER[S]) OF HHS REGULATIONS
 EXEMPT REVIEW REQUESTED UNDER ITEM 3 (NUMBER[S]) OF HHS REGULATIONS ?

UNIVERSITY OF NORTH DAKOTA
HUMAN SUBJECTS REVIEW FORM
FOR NEW PROJECTS OR PROCEDURAL REVISIONS TO APPROVED
PROJECTS INVOLVING HUMAN SUBJECTS

PRINCIPAL
INVESTIGATOR: Glen Teramoto TELEPHONE: (701) 777-9157 DATE: 8/30/97

ADDRESS TO WHICH NOTICE OF APPROVAL SHOULD BE SENT: 207 State Street Apt 208, Grand Forks, ND 58203

SCHOOL/COLLEGE: UND DEPARTMENT: Physical Therapy PROPOSED PROJECT DATES: 8/01/97 - 06/30/98

PROJECT TITLE: Personality types and physical therapy practice settings

FUNDING AGENCIES (IF APPLICABLE): None

TYPE OF PROJECT:

NEW PROJECT CONTINUATION RENEWAL THESIS RESEARCH STUDENT RESEARCH PROJECT
 CHANGE IN PROCEDURE FOR A PREVIOUSLY APPROVED PROJECT

DISSERTATION/THESIS ADVISER, OR STUDENT ADVISER: Renee Mabey Ph.D.

PROPOSED PROJECT: INVOLVES NEW DRUGS (IND) INVOLVES NON-APPROVED USE OF DRUG INVOLVES A COOPERATING INSTITUTION

IF ANY OF YOUR SUBJECTS FALL IN ANY OF THE FOLLOWING CLASSIFICATIONS, PLEASE INDICATE THE CLASSIFICATION(S):

MINORS (<18 YEARS) PREGNANT WOMEN MENTALLY DISABLED FETUSES MENTALLY RETARDED
 PRISONERS ABORTUSES UND STUDENTS (>18 YEARS)

IF YOUR PROJECT INVOLVES ANY HUMAN TISSUE, BODY FLUIDS, PATHOLOGICAL SPECIMENS, DONATED ORGANS, FETAL MATERIAL, OR PLACENTAL MATERIALS, CHECK HERE

1. ABSTRACT: (LIMIT TO 200 WORDS OR LESS AND INCLUDE JUSTIFICATION OR NECESSITY FOR USING HUMAN SUBJECTS.)

The field of physical therapy has had a substantial growth this decade and was considered one of the best career choices. One reason for this growth is the implementation of physical therapist in newer settings. Physical therapists are no longer restricted to the traditional hospitals and rehabilitation settings as choices. Today, physical therapists can choose to practice in more dynamic settings such as the public school system, sports acceleration and rehabilitation facilities, aqua-therapy, hippo-therapy and industrial facilities. The decision of the physical therapist to choose from the number of diverse practice settings may be influenced by the personality of the physical therapist. The purpose of this pilot study is to determine if there is a correlation between personality traits and practice settings of physical therapist.

The Myers-Briggs type indicator is a widely used tool to determine personality traits in health professionals. The Myers-Briggs indicator categorizes personality types as either extrovert or introvert, sensing or intuition, thinking or feeling, and judging or perceiving. In 1993, a Myers-Briggs personality test was conducted on the physical therapy graduating class of 1995. By conducting a survey on the practice setting of these individuals, this study will examine if a correlation exists between personality traits and practice settings. The application of the results can also be used to guide physical therapist into a setting where their personality type can be utilized in the job performance. This will improve the clinical decision making of physical therapist, job satisfaction and improved health care for the patients.

PLEASE NOTE:

Only information pertinent to your request to utilize human subjects in your project or activity should be included on this form. Where appropriate attach sections from your proposal (if seeking outside funding).

2. PROTOCOL: (Describe procedures to which humans will be subjected. Use additional pages if necessary.)

Subjects- Forty-Eight individuals from the graduating physical therapy class of 1995 will be asked to participate in the survey. A listing of the individual names and addressees will be obtained from the University of North Dakota Physical Therapy Department.

Survey development- The Myers Briggs personality type indicator is a tool used to describe the preference for a personality type. The Myers-Briggs personality type indicator was administered in 1993 to the graduating physical therapy class of 1995. The survey questions were developed from the review of the current literature regarding physical therapy career choices.

Procedure- In order to correlate personality traits with practice settings, each survey will be given a reference number that will correspond to a predetermined subject. Each survey will be mailed with a self addressed postage paid return envelope. Also included will be a cover letter requesting approval to access the results of the personality test taken previously and requesting participation in the survey.

All subjects will receive a follow-up post card mailing two weeks after the original mailing. The purpose of the follow-up post card mailing is to serve as a reminder to complete and return the survey, and as a thank you to those who have already participated.

Statistical Data- All data will be analyzed for descriptive trends and correlation. These will be reported in aggregate.

3. BENEFITS: (Describe the benefits to the individual or society.)

This pilot study can be utilized by academic advisors to help guide physical therapy students and physical therapists to an employment setting that may suit their personality trait. The practice setting that will best use their personality type can make patient interaction and clinical decision making more comfortable. This will lead to decision making with more confidence, greater job satisfaction, and improved health care for the patients.

4. RISKS: (Describe the risks to the subject and precautions that will be taken to minimize them. The concept of risk goes beyond physical risk and includes risks to the subject's dignity and self-respect, as well as psycho-logical, emotional or behavioral risk. If data are collected which could prove harmful or embarrassing to the subject if associated with him or her, then describe the methods to be used to insure the confidentiality of data obtained, including plans for final disposition or destruction, debriefing procedures, etc.)

The survey responses will not be anonymous. However, the identity of the individual respondents will only be known to Renee Mabey Ph.D. and Glen Teramoto. The risk for confidentiality to the subject will be minimized by using a reference number on the survey instead of surname to identify the individual. The results of the survey will be reported in aggregate to further protect confidentiality. All returned surveys will be kept on file at the University of North Dakota Physical Therapy Department for a minimum period of two year, after which time the surveys will be shredded by the physical therapy department staff.

5. **CONSENT FORM:** A copy of the **CONSENT FORM** to be signed by the subject (if applicable) and/or any statement to be read to the subject should be attached to this form. If no **CONSENT FORM** is to be used, document the procedures to be used to assure that infringement upon the subject's rights will not occur.

Describe where signed consent forms will be kept and for what period of time.

No consent form will be utilized. Participation will be voluntary. Return of the survey will constitute consent to access the results of the prior personality test and to use the survey information in this pilot study as stated in the cover letter.

6. For **FULL IRB REVIEW** forward a signed original and thirteen (13) copies of this completed form, and where applicable, thirteen (13) copies of the proposed consent form, questionnaires, etc. and any supporting documentation to:

Office of Research & Program Development
University of North Dakota
Box 8138, University Station
Grand Forks, North Dakota 58202

On campus, mail to: Office of Research & Program Development, Box 134, or drop it off at Room 101 Twamley Hall.

For **EXEMPT** or **EXPEDITED REVIEW** forward a signed original and a copy of the consent form, questionnaires, etc. and any supporting documentation to one of the addresses above.

The policies and procedures on Use of Human Subjects of the University of North Dakota apply to all activities involving use of Human Subjects performed by personnel conducting such activities under the auspices of the University. No activities are to be initiated without prior review and approval as prescribed by the University's policies and procedures governing the use of human subjects.

SIGNATURES:

Principal Investigator

DATE: _____

Project Director or Student Adviser

DATE: _____

Training or Center Grant Director

DATE: _____

APPENDIX B

My name is Glen Teramoto and I am a senior in the Physical Therapy Program at the University of North Dakota. I am conducting a pilot study to determine if personality traits may have influenced the type of setting in which you have chosen to practice.

It was brought to my attention that you had completed a personality assessment test while still a Physical Therapy Student at University of North Dakota. The test was administered by Ms. Gloria Beckley, mother of your classmate Kellie Beckley. The test called a Myers-Briggs Type Indicator determined your preferences for each of the four scales. (Extroversion or Introversion, Sensing or Intuition, Thinking or Feeling, and Judgment or Perception) Currently your personality assessment results are held in confidence with Renee Mabey PT, Ph.D..

At this time I am requesting your approval to access the results of the Myers-Briggs personality test and use this information in my pilot study. In order to complete my study I respectfully ask again for your assistance in filling out the enclosed survey that should not take longer than 15 minutes to complete. Your name will be used to correlate information on the survey to your personality type already determined. Furthermore your name will not appear in the study and will be held in strict confidence.

Completing and returning the survey will imply permission for me to access the results of your personality test and use the information obtained from the survey to conduct my pilot study. Only your class had the opportunity to take part in a personality assessment test, so your involvement is important. If you desire a copy of the results of my study, please enclose a note requesting a copy and a return address with your returned survey.

Thank you for your assistance. If you have any questions regarding the above matter please give me a call at the University of North Dakota Physical Therapy Department at (701)777-2831 or contact my advisor Renee Mabey PT, Ph.D. at the same phone number.

Thank you,

Glen Teramoto

Encl.

General Information: (please circle the most appropriate answer)

- 1) Indicate your gender:
- 1) Male
 - 2) Female

Career Information: (please circle the most appropriate answer)

- 2) Are you currently employed (full-time or part-time) as a Physical Therapist?
Yes / No
If you answered yes, go to question # 5
If you answered no, go to question # 3

- 3) How long ago did you leave the field of physical therapy?
- 1) 1 year ago
 - 2) 2 years ago
 - 3) 3 years ago
 - 4) 4 years ago
 - 5) Never practiced physical therapy
- If you answered either 1, 2, 3, or 4, go to question #4
If you answered 5, you may stop here. Thank you

- 4) Before leaving the field, Circle which one of the following best describes the type of setting in which(or for which) you did all or most of your work:
- 1) Hospital
 - 2) Rehabilitation Center
 - 3) Extended Care Facility or Nursing Home
 - 4) Private Physical Therapy Office
 - 5) Home Health Agency
 - 6) Public or Non-Public School (K through 12)
 - 7) Business or Industrial
 - 8) Academic Institution
 - 9) Other (specify) _____

You may stop here. Thank you for taking the time to fill out this survey. Please return this survey in the enclosed return envelope

- 5) Circle which one of the following best describes your current employment status?
- a) Full-Time (30 or more hours/weekly)
 - b) Part-Time (under 30 hours/weekly)
 - c) On-Call (call in basis)

- 6) Circle which one of the following best describes the type of setting in which (or for which) you do all or most of your work:
- 1) Hospital
 - 2) Rehabilitation Center
 - 3) Extended Care Facility or Nursing Home
 - 4) Private Physical Therapy Office
 - 5) Home Health Agency
 - 6) Public or Non-Public School (K through 12)
 - 7) Business or Industrial
 - 8) Academic Institution
 - 9) Other (specify) _____
- 7) How long have you been practicing at this setting?
- 1) less than 1 year
 - 2) between 1 and 2 years
 - 3) between 2 and 3 years
 - 4) between 3 and 4 years
- 8) Were there other factors besides your physical therapy practice preference that influenced your choice of setting? Yes / No
If you answered yes, please specify other factors and indicate by putting an asterisk (*) on the side of the primary reason.

Thank you for taking the time to fill out this survey. Please return this survey in the enclosed return envelope.

APPENDIX C

Dear Sir/Madam:

Approximately two weeks ago you should have received a survey from me regarding personality traits and practice settings. If you haven't yet completed the survey, please do so and return it as soon as possible.

If you have already returned the survey, thank you very much.

If you have any questions or need another copy of the survey, please contact me or my advisor Renee Mabey Ph.D., PT at the Univ. of North Dakota Physical Therapy Department at (701) 777-2831.

REFERENCES

1. Lowman RL. The Clinical Practice of Career Assessment; Interests, Abilities, and Personality. Washington, DC: American Physical Therapy Association; 1991.
2. Watkins CE, Campbell VL. Testing in Counseling Practice. Hillsdale, NJ: Lawrence Erlbaum Associates, Inc; 1990.
3. Holland JI. Making Vocational Choices: A Theory of Careers. Englewood Cliffs, NJ: Prentice-Hall Inc; 1973
4. Myers IB, Myers P. Gifts Differing. Palo Alto, Calif: Consulting Psychologists Press, Inc; 1980.
5. Myers IB. Introduction to Type: A Description of the Theory and Application of the Myers-Briggs Type Indicator. Palo Alto, Calif: Consulting Psychological Press, Inc; 1992.
6. Kroeger O, Thuesen J. Type Talk. New York, NY: Dell Publishing; 1988.
7. Rezler AG, Buckley JM. A comparison of personality type among female student health professionals. J Med Educ. 1977;52:475-477.
8. Firestone DT. A re-examine of personality differences among allied health students. College Student Journal. 1990;24(3):241-248.
9. Rovezzi-Carroll S, Fitz PA. Predicting allied health major fields of study with selected personality characteristics. 1984;18(1):43-51.

10. Friedman Cp, Slatt LM. New results relating the Myers-Briggs Type Indicator and medical specialty choices. *J Med Educ.* 1988;63:325-327.
11. McCaulley MH. *Application of the Myers-Briggs Type Indicator to Medicine and Other Professions.* Washington, DC: U.S. Department of Health, Education and Welfare; 1978.
12. Rovezzi-Carroll S, Leavitt R. Personality characteristics and expressed career choices of graduating physical therapy students. *Phys Ther.* 1984;64(10):1549-1552.
13. *A Future in Physical Therapy: A Hands-on Health Care Profession.* Alexandria, Va: American Physical Therapy Association.
14. Curtis KA, Martin T. Perception of acute care physical therapy practice: issues for physical therapist preparation. *Phys Ther.* 1993;73(9):581-597.
15. England B. *Medical Rehabilitation Services in Health Care Institutions.* Chicago, Ill: American Hospital Publishing, Inc; 1986.
16. Jette AM, Davis KD. A comparison of hospital-based and private outpatient physical therapy practices. *Phys Ther.* 1991;75(5):366-374.
17. Tecklin JS. *Pediatric Physical Therapy.* 2nd ed. Philadelphia, Pa: J. B. Lippincott Co; 1994:446-455.
18. Eigstri H, Artez M, Shannon L. Pediatric physical therapy in a rehabilitation setting. *Pediatrician.* 1990;17(4):267-277.
19. Danielson K. *A Survey: The Documentation of Manual Therapy.* Grand Forks, ND: University of North Dakota; 1995. Independent Study.

20. Carlson JG. Recent assessment of the Myers-Briggs Type Indicator. *Journal of Personality Assessment*. 1985;77(4):356-365.
21. Stricker LJ, Ross J. Intercorrelations and reliability of the MBTI scales. *Psychological Reports*. 1963;12:287-293.
22. Bean CA, Holcombe JK. Personality types of oncology nurses. *Cancer Nursing*. 1993;16(6):479-485.