Physiotherapy in a Third World Country: One Therapist’s Observations

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Objective:
Upon completion of the lecture, attendees should be better prepared to:
▪ Describe limitations to lack of resources for education purposes
▪ Discuss importance of basic methods to physiotherapy
▪ Constructed and educated on importance of including the family unit for rehabilitation

Abstract:
Third world countries possess limited resources for medical equipment and personnel trained to provide care. They struggle to treat acute and chronic diseases, but are unable to offer rehabilitative care necessary for functional return. Physiotherapists who participate in international outreach can provide education on basic therapy techniques important in decreasing the impact of physical disabilities on the victim’s ability to contribute to their family and community.

A thorough review of literature, utilizing the terms: austere environment, 3rd world country, physical therapy, rehabilitation, physiotherapy, South Africa, and burn care, revealed a paucity of publications describing the role of the physiotherapist in international medical outreach. The occupational therapist developed educational presentations focusing on the care of burn-injured patients and gathered equipment for hands on training in preparation for travel to Llongwe in Malawi, South Africa.

The World Confederation for Physical Therapy website reported that 200 physiotherapist had been trained in Malawi. However Nkhoma Hospital and its’ 9 outpatient clinics, had only 2 persons trained to provide physiotherapy; a clinical officer in charge of the department and a physiotherapist technician. Formalized acute and outpatient physical therapy does not exist and patients are returned to their families without the education essential for a safe and successful recovery. The therapist had the opportunity to train both hospital and clinic staff in techniques, including contracture prevention, splint fabrication, and perioperative positioning. Additionally, education was provided to a patient and his family during home visits. This patient received training in the proper use of a cane for safety with ambulation, sit to stand transfers and bed mobility.

There is a paucity of literature describing international physiotherapy outreach. Lack of resources limits medical treatment to only the most essential care, thereby eliminating the possibility for rehabilitation. The experience of one therapist revealed that physiotherapy was not a priority and was rarely provided. Education and training
improved the ability of hospital and clinic staff to provide care that could profoundly impact a patient’s ability to regain function and contribute to their family.

References and Resources:


World Confederation for Physical Therapy. (December 2017). WCPT Country Profile: Malawi.

Disclosure:
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