

EDITORIAL

INTERNATIONAL
PROFESSIONALISM

The Eighth International Congress of the World Confederation for Physical Therapy is upon us and this may be an opportune moment to reflect on what it is all about. Reasons for attending such a meeting vary from individual to individual, but there are basic concepts common to all international organizations.

Exchange of professional knowledge, stimulation of new ideas, further research and visits to professional institutions in the host country would be primary aims. Possibly more important, if secondary to such a meeting, is contact on a more personal level leading to better understanding of differences in culture, language, political ideas and the like. These subtle influences are often more far-reaching and effective in achieving positive results.

Thus we meet as individuals from specific backgrounds, but with a common interest, our profession. Those of us that will meet in Israel could dwell on the words of Eugene Michels, President of the World Confederation for Physical Therapy (W.C.P.T. Bulletin 64, November 1977):

"Within our own countries, we are both citizens and physical therapists. As citizens, we have certain responsibilities which vary according to the laws and customs of our countries. As physical therapists, we are responsible for working individually and collectively to help people who need physical therapy, to advance our profession of physical therapy, and to help our colleagues and ourselves improve in professional knowledge and skills. In other words, our responsibilities as citizens in our own countries may differ but our responsibilities as physical therapists are much the same everywhere.

At an international level, as in the World Confederation for Physical Therapy, we must give full effort to attempting to fulfil the responsibilities we share as physical therapists. As difficult as it may be, at times, to ignore the differences between our responsibilities as citizens of different countries, we must deliberately set aside those differences if we are to meet our worldwide responsibilities as physical therapists."

Those of us that stay at home could also benefit from this message and cope in this manner with internal as well as international differences and unite as physiotherapists to work for the welfare of the communities we serve first and the profession we belong to secondly.

VAN DIE REDAKSIE
DIE MULTIDISSIPLINÊRE
SPAN

Hierdie uitgawe is met rehabilitasie gemoeid. Effektiewe en doelgerigte rehabilitasie het gelei tot die daargestelling van die multidissiplinêre span. Vir sommige, wat soveel jare alleen die mas moes opkom, is die beginsel van spanwerk soms vreemd en lei tot gevoelens van ongemak, onsekerheid en selfs uitgesproke aggressie.

Wat behels so 'n span? Dis geen kunsmatige onding wat spesiaal geskep moet word nie. Dit bestaan uit die persone van die mediese en verwante beroepe wat eerstens beskikbaar is, tweedens op 'n spesifieke tydstip noodsaaklik is ter rehabilitering van die pasiënt en derdens (en belangrikste van alles) belang stel in die pasiënt en sy welvaart.

Die lede van so 'n span benodig egter besondere eienskappe om ware rehabilitasie te vermag. Elkeen moet goeie kennis dra van sy eie bekwaamhede en vermoë, en veral sy beperkinge. Elkeen moet ook weet wat om van ander lede van die span te verwag, waar hulle inskakel, en bereid wees om hulp aan te vra op die regte tydstip. Daar sal egter heelwat sogenaamde "grys areas" wees waar twee of meer lede se pligte en vermoë oorvleuel, waar hulle mekaar kan aanvul of vervang. Dis duidelik dat lede van so 'n span aanpasbaar en buigsaam moet wees.

Soos enige span, moet daar 'n leier wees wat die pas aangee, besluite neem en/of bekragtig en die finale verantwoordelikheid dra. Tradisioneel (en volgens wet tans in Suid-Afrika) vul die geneesheer (of senior geneesheer waar meer as een betrokke is) hierdie rol. Enige ander lid kan egter die rol vul en dit sal hoofsaaklik van omstandighede in elke geval afhang.

Die voordeel verbonde aan spanwerk is tydsbesparing, die voorkoming van verwarring by die pasiënt en spanlede, en die daargestelling van die beste en geïntegreerde diens aan die pasiënt. Daar is egter ook die gevaar dat die pasiënt aan te veel persone op een tydstip blootgestel word en dit kan lei tot psigiese uitputting en selfs verwarring. Dienslewering kan onnodig ingewikkeld raak en die pasiënt kan "opdroog" en so oorweldig wees dat die eindresultaat negatief is.

Die belangrikste en hoofvereiste is egter kommunikasie — met mekaar, die pasiënt, sy naasbestaendes en die gemeenskap waarheen ons die pasiënt terug wil stuur. Daarsonder kan geen rehabilitasie plaasvind nie.