

Report to Spirit
Submitted by :
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INTRODUCTION

This report highlights the contribution and inputs made by Spirit in supporting the development of appropriate rehabilitation services in Asia, in partnership with Livability.

THE NEED

It is estimated that there are 650 million disabled people in the world. UN figures show that 82% disabled people remain living below the poverty line in developing countries. The World Bank estimates that 20% of the world's poorest people are disabled and tend to be regarded in their own communities as the most disadvantaged. Investment in basic services, such as health or education, is insufficient and going down - not up, it is estimated that only 2% of disabled people in developing countries have access to rehabilitation and appropriate basic services, including health and education (DfID Disability Poverty and Development, Feb 2000).

Alongside there has been little investment in facilities to develop the skills and knowledge of healthcare staff involved in the provision of such services. The resulting impact of a general lack of rehabilitation services and rehabilitation training has and continues to condemn many disabled people to a life of hardship, to medical complications, economical dependence, emotional torment, social isolation and in many cases early and unnecessary deaths.

There is also often a strong sense of isolation for those working in the field of rehabilitation within their respective countries. This results from a lack of investment and specialisation in the rehabilitation field and through the fact that there are usually few or no other rehabilitation centres to learn from and share with, within in the same country. As such there is a great need for regional and international networking, collaboration and learning.

Finally the attainment of rights and delivery of services for disabled people in the developing world has not been an area of priority for many National, Regional and International Governments and bodies. The voices of disabled people usually go unheard. While there is a growing awareness about the extent of the problem much more needs to be done to raise awareness of the causes of disability, its consequences and its direct link with poverty in the developing world. Alongside there is a need to advocate for increased services and to highlight, through real-life examples, that it is possible to grow and sustain locally managed, appropriate rehabilitation services for disabled people.

ADDRESSING THE PROBLEM

Livability has been working in partnership with a number of organisations/agencies including Spirit, the Asian Spinal Cord Network, Handicap International Vietnam and the International Spinal Cord Society in order to address some of these problems. Livability and Spirit have been working in partnership since the formation of the Asian Spinal Cord Network in 2001 in a variety of ways. Specifically Spirit's inputs have been supporting:

1. National Service Development at the Spinal Injury Rehabilitation Centre in Nepal
2. Regional Networking through the Asian Spinal Cord Network conference
3. International Collaboration through the provision of Observership for ASCoN fellowships awarded to outstanding professionals working in the field of SCI management.

1. NATIONAL SERVICE DEVELOPMENT AT SPINAL INJURY REHABILITATION CENTRE (SIRC) NEPAL

The Spinal Injury Rehabilitation Centre, Nepal was founded as a charitable, non profit organization in 2002 in order to address the largely unmet needs of people sustaining spinal injuries in Nepal. Initially the centre operated from rented accommodation and through time, successfully raised funds to purchase land and to construct a purpose built rehabilitation centre, the first of its kind in Nepal.

Although it is a great achievement to have a new building from which to provide services, this in itself is not enough, and it is important to have, within the new building, structures, systems and skilled staff that can deliver appropriate and effective services.

In order to support the development of this process the Director of SIRC, accompanied by the Head of Overseas Development of Livability undertook an observational and learning visit to the Midlands Centre for Spinal Injuries (MCSI) for 3 days in July 2007. The overall aim of the visit was to learn from the experiences of the MCSI in the treatment and rehabilitation of persons with spinal injuries in the UK in order to support the further development of services for people with spinal injuries in Nepal.

Following a comprehensive tour of MCSI a series of meetings and discussions were held with members of the multi-disciplinary team.

LESSONS LEARNT:

Patient treatment and rehabilitation management and co-ordination – the visit provided a good insight into the systematic and co-ordinated approach to the management of the patient from admission through to discharge and reintegration which helped the SIRC team to develop similar appropriate services in their own setting in Nepal.

Design of rehabilitation centre. The Director of SIRC shared the plans for the new rehabilitation centre in Nepal with the rehab team at MCSI which resulted in a number of recommendations that could be applied to make the new SIRC centre more appropriate to the service users.

Patient Education: Similar to MCSI the SIRC places great emphasis on the quality of family and patient education. The Education tapes and powerpoint presentations available at MCSI were an excellent resource and SIRC plans to develop similar materials.

In addition the physiotherapist – in – charge at SIRC undertook an observational and learning visit to MCSI in October 2008. During his placement he learnt about medical management, advanced physiotherapy, occupational therapy, hydrotherapy, goal setting, pre-discharge skills, trans house facilities, role of nursing, wheelchair skills and games and research on stem cells.

In the spirit of partnership and cooperation the visit was supported by MCSI where staff provided advice, suggestions and encouragement; by SPIRIT who supported accommodation and meals and by Livability who supported travel costs.

2. REGIONAL NETWORKING THROUGH THE ASIAN SPINAL CORD NETWORK CONFERENCE

ASCoN was formed in 2001 and consists of a group of organisations in the Asia region that have come together to share and learn from each other in all aspects of spinal cord injury management, from initial treatment of the patient to re-integration of the person. ASCoN's objectives are:

To strengthen spinal injury services and human resource development for organisations and people working in spinal injury management in the Asia region;
To share information, ideas and knowledge of best practices in spinal cord injury management among members.

The major activity of ASCoN is the organisation of the annual regional conference which is hosted by an ASCoN member organisation. The conference covers all aspects of spinal cord injury management, treatment, rehabilitation and community integration. It also provides an opportunity for people in Asia to come together and to network with others regionally and internationally, to share ideas and to discuss or debate dilemmas and the latest developments and innovations in spinal injury management.

The activities of ASCoN culminated at the end of 2008 with the organisation of the 7th ASCoN Conference in Vietnam hosted by Bach Mai Hospital and HI Vietnam. The conference brought together a range of speakers from around the globe to an audience of 420 participants from 22 different countries.

Spirit has supported this and other annual ASCoN conferences, by providing funding to the host organisation, to support conference organisation costs and to enable delegates to attend. Other supporters included ISCoS, ICORD, Livability and HI Vietnam.

3. INTERNATIONAL COLLABORATION THROUGH THE PROVISION OF OBSERVERSHIP FOR ASCON FELLOWSHIPS AWARDED TO OUTSTANDING PROFESSIONALS WORKING IN THE FIELD OF SCI MANAGEMENT.

In the context of fostering research and exchange during the Annual ASCoN Conferences, the ASCoN Fellowship Award is presented to the best speaker(s) selected by a panel of judges. The Fellowship Award entitles the winner to attend a recognised institution providing comprehensive SCI management and to deepen his/her knowledge in a specific topic close to his/her professional interest as well as to the interest of the institution he is working for.

To date 3 ASCoN Fellowship Awards have been presented and 2 of the winners elected to attend the MCSI for their Observership. The first Fellowship was awarded to [redacted] Physiotherapist from India who elected to undertake his Observership at MCSI in Feb 2009. The 2nd Fellowship was awarded to Md [redacted] Occupational Therapist from Bangladesh who also elected to undertake his Observership at the MCSI in Nov 2009.

In relation to the ASCoN Fellowship awards, the costs relating to flight/visa are supported by Livability while accommodation/meals has been provided by SPIRIT.

CONCLUSION

We gratefully acknowledge our appreciation for the support and inputs provided by Spirit for the above activities. We sincerely hope the partnership continues and develops in the future.