

History of the South African Society of Physiotherapy (SASP®)

The Origins of Physiotherapy in South Africa

In 1921 a small group of masseurs in Cape Town banded together to form the Certified Masseurs Association, primarily in order to fight for inclusion in the forthcoming Medical, Dental and Pharmacy Act of 1928. In this they were partially successful and in 1931 registration of masseurs was gazetted, although it was not made compulsory.

In the same year that the first pioneer group in the Cape formed the first South African association, a similar group in Natal formed a branch of the U K Chartered Society of Massage and Remedial Gymnastics.

Realizing the need for a countrywide organisation, these two groups met to hold the inaugural meeting of the South African Society of Massage and Medical Gymnastics, in December 1924. The first meeting of the Central Governing Board took place in Durban in August 1925.

The first journal of the South African Society was published in 1929 and in 1932 the Society changed its name to the South African Society of Physiotherapists. After the Second World War in 1954, the name was changed to the present one - the South African Society of Physiotherapy.

Physiotherapy in South Africa today

SASP Membership is open to all registered physiotherapists and the Society recognised as being representative of the profession of physiotherapy in South Africa as well as around the world.

The Society has the dual objectives of ensuring the highest possible standard of physiotherapy services to all peoples throughout South Africa, and of ensuring the welfare and advancement of all its member physiotherapists.

The SASP was a founder member of the World Physiotherapy (Previously known as the World Confederation for Physical Therapy or WCPT), representing 125 countries and over 660 000 physiotherapists from different parts of the world.

The SASP Research Committee facilitates research into all aspects of physiotherapy. It will also allow the private and business sectors to contribute to research in health care pertaining to physiotherapy intervention.

Evidence-based and best practice is a high priority of the SASP and is committed to a national quality improvement programme and is in the process of developing Evidence Statements about conditions applicable to the needs of the South African population.

Physiotherapy Education

Although the original training courses offered were 3-year diploma courses based on the syllabus of the Chartered Society of Physiotherapy, the trend towards degree courses started in the late 1940s. All eight training institutions now offered a 4-year university B.Sc. Physiotherapy or B Physio courses, with honours status.

The Physiotherapy, Podiatry and Biokinetics (PPB) Professional Board, one of the 12 Professionals Boards of the Health Professionals Council of South Africa (HPCSA) develops the scope of profession and lays down minimal standards for training courses for Physiotherapy. All universities offering physiotherapy training are associated with academic and affiliated teaching hospitals, and the minimal clinical practice over the four years of training is upwards of 1000 hours. Final examinations include clinical as well as written assignments.

All universities require external examiners and the Professional Board carries out inspections of each training centre at approximately 5-year intervals.

Although both universities and the SASP have offered continuing education courses for many years, formal postgraduate education has only developed in the last three decades. Most universities are now offering honours, masters and doctoral programmes.

In both continuing physiotherapy education and postgraduate studies, the most popular clinical fields are neuromusculoskeletal therapy and pain management with neurological rehabilitation/neuro-developmental therapy, intensive care, respiratory therapy, trauma, sports, animal health, women's, community-based rehabilitation and occupational health medicine drawing increasing interest.

Professional Status

Compulsory registration of physiotherapy qualifications was established gradually in different magisterial districts during the 1960s. In 1971 provision was made for the establishment of separate professional boards under the umbrella of the South African Medical and Dental Council, and the Professional Board for Physiotherapy was the first of these boards to be established, in 1974. Since then, registration of recognised physiotherapy qualifications has been a prerequisite for practice in South Africa.

In 1985 physiotherapists were granted First Line Practitioner status when the rule requiring formal medical referral was reworded. Physiotherapists can therefore evaluate, diagnose, treat and refer patients as needed to Specialists and for basic X-rays. Sick notes from physiotherapists should also be accepted.

Physiotherapists are experts in exercise prescription, which is a modality used in almost all physiotherapy interventions. The scope of physiotherapy profession

covers a wide variety of conditions from the acute stage of injury or disease to final stage rehabilitation, including return to work, sport and social activities.

The future

As per updated statistics from the HPCSA dated 2 August 2021, the number of registered physiotherapists is 8354, although it is uncertain how many of these physiotherapists are still working or in South Africa. This gives an estimated physiotherapist: population ratio of 1: 6823.

The profession must look at ways and means of increasing the number of physiotherapy graduates, as well as giving consideration to the training of other categories of health workers. Unfortunately, the approved Diploma in Physiotherapy Technology that had been approved since 2002 could not be commenced due to the lack of a service provider.

Undoubtedly, also, the provision of services has become more community based, with the focus being on promotive and preventive health care. Physiotherapists are trained to serve the community in which they live. At the same time, the needs of these communities must not be underestimated and it is essential that the resources of tertiary level care are available to even the most isolated communities. The responsibility for the planning and provision of services in the community must remain with the graduate physiotherapist.

At the one end of the spectrum, therefore the current involvement of the profession is with the provision of physiotherapy care according to the needs of the very diverse population. At the opposite end, the tertiary level issues of research and specialisation are assuming increasing importance.

Physiotherapists, throughout the country, are working towards Universal health coverage in order for quality physiotherapy care to becoming available to all

peoples throughout South Africa and in principle support the philosophy of the National Health Insurance.