

Therapist Availability in Bangladesh – Matching Resources with Posts

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Introduction

Physiotherapy is an essential part of the health care services delivery system. Physiotherapists work in a variety of settings providing treatment and rehabilitation and they are involved in the prevention of disability and health promotion.

History of Therapy training in Bangladesh

Training of graduate professional Physiotherapists in Bangladesh was started in 1973 in the country's main orthopaedic hospital in the capital, Dhaka. This was precipitated by large numbers of casualties in the aftermath of the War of Independence in 1971. Foreign therapists were recruited specifically for the task of training therapists. Two groups of students were trained to BSc degree level before the course was stopped. No more professional therapy training occurred again until 1993, twenty years later. Most of the 25 therapists trained left the country. Only five physiotherapists remained to work in Bangladesh. They were joined by a further 4 qualified physiotherapists trained in West Pakistan and India.

In 1980 and again in 1985 the government published plans to create posts for degree and diploma in Physiotherapists in all the main divisional hospitals and clinics and all the district hospitals, medical colleges and the leprosy hospitals (Bangladesh Gazette Jan 1985). The posts were never filled according to the original plan. A handful of posts only were filled by suitably qualified personnel. (In UK registered working Physiotherapists number over 35,000)

The present situation emerging in Bangladesh

Therapy training was again started in 1994. Six institutes in the capital city are presently training BSc graduates in Physiotherapy, Bangladesh Health Professions Institute (CRP) is training to degree level. By the end of 2004 in Bangladesh 404 graduate physiotherapists will have qualified. 620 physiotherapy students will still be training.

This represents a total potential workforce of 1024 graduate therapists who will become available over the next four years.

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Employment opportunities

The newly qualified graduates however are finding that no government posts are available for which they can apply and therefore they are either unemployed or are trying to secure private practice mostly in the richer parts of the capital city. Three have left the country. A small number have gained employment as teachers in private institutes or work part time in private hospitals. A small number have been employed by NGO's. Of these, only three national graduates are employed in the field of Community Based Rehabilitation. Non-government organisations however cannot employ all the graduates despite the stark needs for these services throughout the country.

The following table shows the numbers of professional Physiotherapists in Bangladesh.

BSc. Graduates in Physiotherapy (2004)

Name of Institute	Qualified	Trainees
BHPI (Dhaka University)	105	84
NITOR (Dhaka University)	199	100
People's University (Privt.)	69	132
Gono University (Privt.)	31	64
Bangladesh Medical College	Nil	200
State University	Nil	40
Total	404	620

These will all have been trained as autonomous health professionals and are eager to obtain Class One Government posts in the health services.

Present post availability for Physiotherapists

A small number only government posts have been advertised at class two level (technicians) only and those occupying these posts are mainly receiving third class salary. This is creating dismay and disillusionment amongst newly qualified professionals and trainees who are studying for up to 5 years to obtain their qualification. Meanwhile the public continue to be denied quality rehabilitation service throughout the country. A repetition of history is set to occur where qualified unemployed national therapists exit the country. This situation calls for immediate action.

In Bangladesh, there are 64 districts and 464 thanas. It is feasible that at least one graduate Physiotherapist could be placed in each main medical facility and this would immediately start to provide referral services for the wider community and allow these vital rehabilitation services to flourish.

Diploma/ Technician Level Therapy training

Therapy training to diploma level in Bangladesh has been fuelled by the lack of availability of qualified therapy teachers. On some technician courses, no therapists are included in the teaching staff. The diploma level training has produced a largely non-professional technical work force lacking autonomy and with a low level of skills. By March 2004, 178 diploma holders in physiotherapy had been registered by the State Medical Faculty. A number of other non-government organisations are currently running short technician-type training courses. These include organisations in Chittagong, Bogra and previously in Magura. Recently, a private university, The Peoples University in Dhaka has started a diploma training in Physiotherapy.

After qualification, physiotherapy technicians practice under the instruction of doctors. Most doctors have little or no awareness of the professional development that has occurred in the therapy professions and the levels of professionalism that are now available. Evidence based practice, autonomy and client centred approaches practised by well-trained therapy professionals seem extraordinary to medical personnel in Bangladesh.

Diploma level training is being phased out in most developing countries and diplomats are upgrading to BSc level through further study following educational recommendations of the World Confederation of Physical Therapy in 1994 (WCPT, Declarations of Principle and Position Statements). This move could also be achieved in Bangladesh and would improve clinical standards of therapy service delivery and provide more standardisation in therapy training.

Creating a continuum of the services to the grass root level

A growing number of personnel are being trained to provide primary rehabilitation services in the community. Their training is shorter and more basic but they are trained to identify the need to refer to professional service providers. Unfortunately, the lack of referral services available reduces their effectiveness. A variety of community rehabilitation workers are being trained, the largest group of these are Community Handicap and Disability Resource Persons (CHDRP) who will number 530 in 2004. They are working in the field of disability covering 54 districts and have been trained by CDD (Community & Disability in Development). Community Rehabilitation Technicians are being trained at

the CRP (centre for the Rehabilitation of the Paralysed) and Leprosy technicians have been trained in Bangladesh since 1992. A small number of organisations have trained paediatric developmental therapists to work in their own organisations. Of these, the Shishu hospital paediatric assessment unit has proposed a one-year diploma training for developmental therapists.

Recommendations for the development of therapy services in Bangladesh

It is possible to establish a continuum of therapy services from grass roots level in the community through to thana, districts and divisional specialist centres if there is a co-ordination of services and most importantly the appropriate deployment of available therapy resource personnel.

Post Creation

Physiotherapy

Creation of government posts is immediately called for at Class One level for graduate physiotherapists. There are already sufficient numbers of physiotherapy graduates to fill Class One level posts in each district hospital. Subsequent Class One level posts for graduate Physiotherapists in each thana health complex should follow. Within the next 4 years sufficient numbers will qualify to fill these posts.

Qualifications

Present diploma courses should be discontinued in favour of graduate level training now available. Qualified diplomats in therapy should be provided with opportunities to upgrade their level of qualification to graduate level, in accordance with recommendations by the World Confederation of Physiotherapists. The effect of this will be to improve the quality of therapy services available and utilise their skills more adequately in the field of disability.

Without the active cooperation of the government in these matters the valiant attempts to train therapy personnel to minimise the disabling effects of disease and injury in Bangladesh will fall flat.

References

- WCPT (1997), Declarations of Principle and Position Statements*
- The Bangladesh Gazette, Jan 5 1985*