

Is survival enough? Strengthening rehabilitation towards the 2030 agenda

Dr Cliona O'Sullivan

UCD School of Public
Health, Physiotherapy and
Sports Science



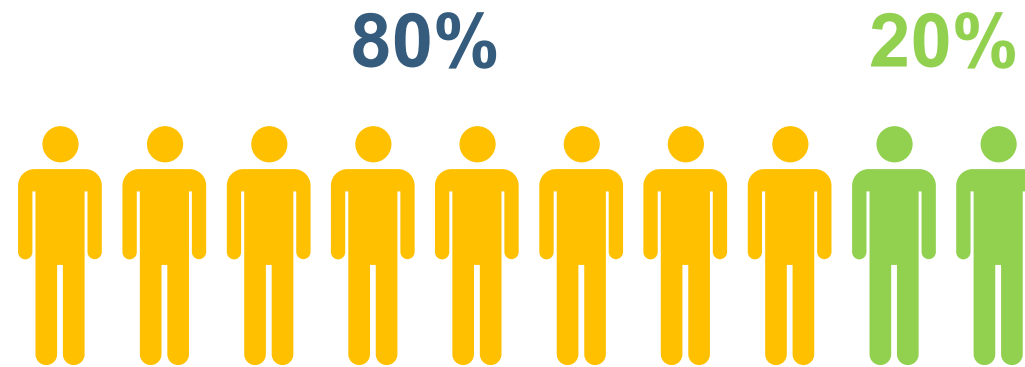
Aim

- To raise awareness of the need to strengthen rehabilitation within health systems, particularly in low income countries
- To highlight the challenges
- To discuss the way forward- Partnership

REHABILITATION

— 2030 —

a call for action



‘Global trends in health and aging require a major scaling up of rehabilitation services in countries around the world and in low- and middle-income countries in particular’,

WHO 2017

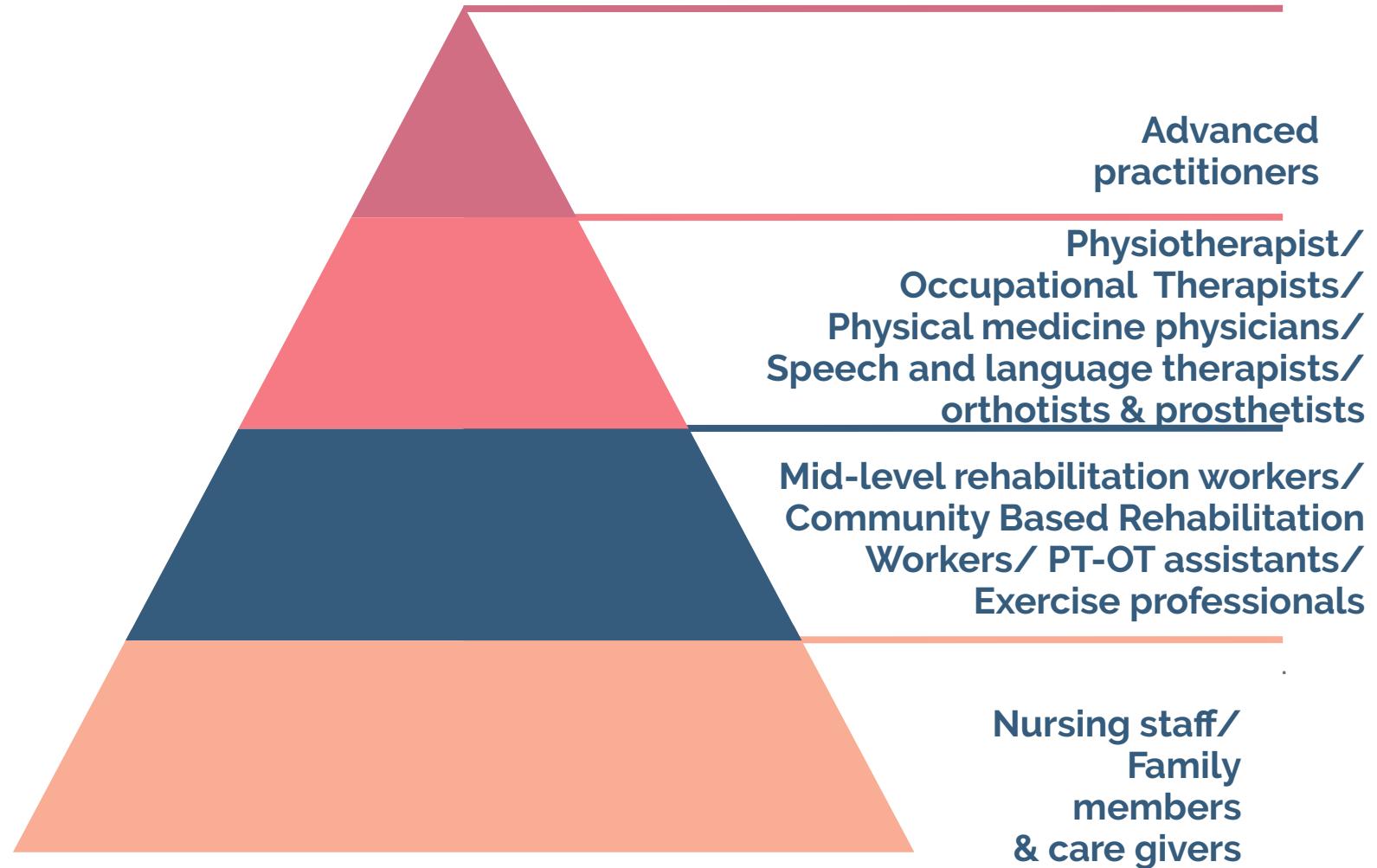


Rehabilitation

- 'A set of measures that assist individuals who experience or **who are likely to experience** disability to achieve and maintain optimum functioning in interaction with their environment'
- (WHO 2011)
- 'Demand is high, Awareness is low'
- (Cieza, A, 2018)

Human Resources for Physical Rehabilitation

Who are the workforce ?

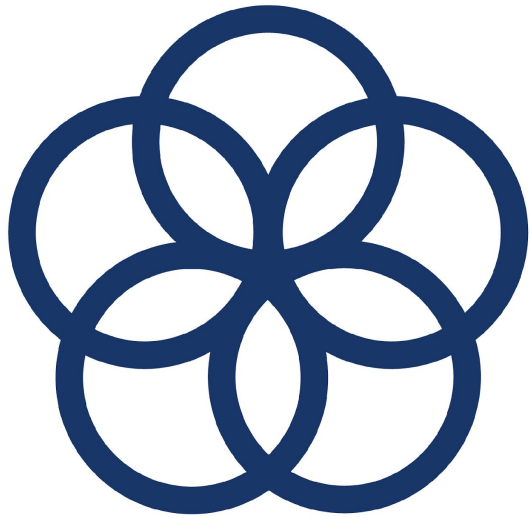


How do you strengthen rehabilitation where there is very little?

The Challenges



17 PARTNERSHIPS FOR THE GOALS



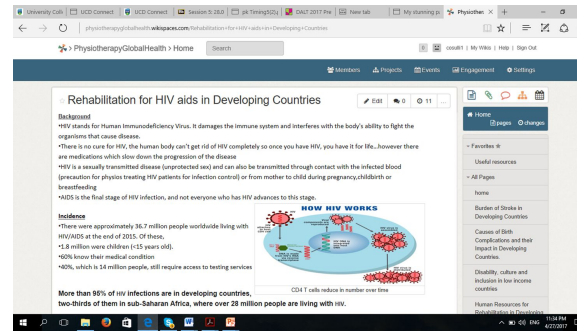
Partnerships

- Partnerships for advocacy and policy
- Partnerships for clinical practice
- Partnerships for education and training
- Partnerships for learning
- Partnerships for research

Partnerships for education and training



- What if you could harness the university's vision to engage globally and build **partnerships?**
- University to university
- University and NGO
- Opportunity for cross sectoral working
- Harnessing local capacity
- Understand the context e.g. geographical context, cultural context



Constructing a Global Learning Partnership in Physiotherapy: An Ireland–Uganda Initiative

Cilona O'Sullivan^{1*}, Herman Kazibwe², Zillah Whitehouse² and Catherine Blake¹

¹School of Public Health, Physiotherapy and Sports Sciences, University College Dublin, Dublin, Ireland, ²Department of Physiotherapy, Makerere University of Science and Technology, Makerere, Uganda



Partnerships for learning



Partnerships for research

- Robust evidence base
- Prevent and manage a range health conditions
- Across the lifespan
- Improve function, participation and quality of life
- But limited research in the context of LMICs
- Resources for research

DISABILITY AND REHABILITATION
<https://doi.org/10.1080/09638288.2018.1501617>



REVIEW ARTICLE



A systematic review of physical rehabilitation interventions for stroke in low and lower-middle income countries

Muireann Dee, Olive Lennon and Cliona O'Sullivan

UCD School of Public Health, Physiotherapy and Population Science, University College Dublin, Dublin, Ireland

ABSTRACT

Purpose: Approximately 70% of strokes occur in low and middle income countries, yet the effectiveness of physical rehabilitation in these contexts remains undetermined. This systematic review identifies and summarises the current evidence supporting physical rehabilitation interventions post-stroke in low and lower-middle income countries.

Methods: Five databases were comprehensively searched (April 2017) for randomised controlled trials, clinical controlled trials, and cohort studies testing rehabilitation interventions post-stroke in these countries. The Effective Public Health Practice Project Tool assessed quality of included studies.

Results: Sixty-two studies (2115 participants) were included. Interventions addressed upper limb ($n = 26$), lower limb ($n = 22$), and other ($n = 14$) outcomes. Seven studies were rated as strong in quality, 16 moderate and 39 rated as weak. Overall, in addition to usual care, physical rehabilitation interventions improved outcomes for stroke survivors. Best evidence synthesis provides level 1 (b) evidence supporting constraint induced movement therapy and mirror therapy to improve upper limb functional outcomes. Level 1 (b) evidence supports multimodal interventions that include lower limb motor imagery to improve gait parameters. Level 1 (b) evidence supports sit-to-stand training to improve balance outcomes.

Conclusions: Exercise-based and brain training interventions improved functional outcomes post-stroke in low and lower middle income countries. Further high-quality studies including participation outcomes are required.

IMPLICATIONS FOR REHABILITATION

- Low-cost physical rehabilitation interventions requiring minimal resources can improve functional outcomes after stroke in low and lower-middle income countries.
- Exercise-based interventions can improve upper limb, lower limb, gait, and balance outcomes after stroke.
- Brain training paradigms such as mirror therapy and motor imagery, when included in therapy packages, can improve upper limb and gait outcomes.
- The proven efficacy for rehabilitation interventions in improving stroke outcomes in low and lower-middle income countries supports the need to strengthen the rehabilitation workforce in this context.

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KEYWORDS

Stroke; physical rehabilitation; developing countries; cerebrovascular diseases; lower income countries



To conclude...

- Survival is not enough...
 - ... The rehabilitation workforce must be strengthened
- To ensure healthy lives and promote well being for all at all ages



Thank you!

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