

Title: Disparities in healthcare in developing countries: a look into physical therapy access and availability

Background: The list of disparities between developing and developed countries are long. Haiti, ranked the 17th poorest country in the world, and Malawi, ranked 6th, differ greatly from the United States, which stands as the 13th richest.¹⁻² In terms of health services, physician density in the three countries contrast at 0.236, 0.018 and 2.554 per 1,000 people³, respectively. Specifically, non-emergent healthcare services, like physical therapy (PT), are rare to find in developing countries and not often used in healthcare provision. The purpose of this research is to identify such inconsistencies between countries in regard to PT and in turn, find solutions to address such marked differences and help advocate for the profession.

Methods: This qualitative study was derived from one-on-one interviews of individuals with experience living in the designated country and knowledge of the country's healthcare system. An American physical therapist conducted interviews in Malawi in May and June of 2017, in English. An American social worker conducted interviews in Haiti in October of 2017, with the help of a local translator. Interviews were also conducted in the United States by those who were familiar with Haiti's healthcare system. The following topics were addressed during questioning: common occupations, common illnesses and injuries, pain management and access to health services including PT. The interviews were transcribed and reviewed by four individual assessors to identify common themes. A literature review was performed highlighting the need for PT services to address a wide range of health conditions and evidence was collected to support possible means of extending this healthcare option to all world citizens.

Results: In total, 19 people were interviewed. The study population in Malawi consisted of seven Malawians and one Canadian who has lived in the country for over 20 years. All were fluent in English with seven reporting English as their second language. Eleven participants were interviewed regarding Haiti's healthcare system; eight were Haitian natives and three were Americans who have spent a minimum of six months in the country. All interviewees have or are currently working towards a college degree. Upon analysis of the interviews, four major themes were identified: common medical conditions prevalent in the country, current treatment options for these conditions, accessibility to PT services and awareness of the PT profession.

Discussion: Following the study, it was determined that PT in developing countries is currently obstructed by a number of barriers. However, it is also recognized that this healthcare service could address many of the common conditions seen in such locations, ranging from cancer to road traffic accidents to pediatrics and beyond. Although present efforts to improve healthcare are being made by both governmental and non-governmental agencies, they are falling short.⁴⁻⁷ Pain management is still being treated with basic, sometimes unavailable, medications. Children with disabilities remain out of school. Labor workers continue to strain their bodies with no plan for a solution. Moreover, there are necessary specialty services that continue to be lacking, like PT. While one simple solution to address this absence does not exist, this research lent itself to possible avenues of increasing PT services in developing countries. Some of these include the use of volunteerism, financial training, educating citizens about the profession and offering services in homes or at village centers.⁸⁻⁹

Conclusion: It is important to acknowledge that introducing PT is just one healthcare entity among a long-line of resources that developing countries lack access to. However, PT has been shown to improve quality of life, making it a service that deserves to be available to every member of the world. Change will not happen all at once, but with one step at a time, progress can be made.

Works Cited

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