The changing directions of physiotherapy

The physiotherapy profession is one that has changed dramatically in the recent past. Its early history was characterized by practitioners working under strict instructions from medical practitioners to treat a range of significant pathologies and injuries, most commonly in a hospital environment. In the past 30 years physiotherapists in many countries around the world have become far more independent with primary practitioner status, and now lead the way in a range of rehabilitation and preventative approaches that are firmly based around a strong body of research evidence.

It was only in the 1970’s that physiotherapists began a significant involvement in the area of sport, an endeavour in which they are now well known. It was only in the 1980’s that physiotherapists began to embrace the idea of developing a research base to support the wide-ranging areas that they were working in. This engagement in research is what gave a certain level of independence and respect to physiotherapy as a profession, and it is only more recently that other allied health professions are pursuing the same path. Not only has this focus on research influenced our standing in the medical and health fraternity, but it has allowed us to train our future physiotherapists to be leading practitioners that understand and respect the role that research and evidence plays in managing an increasing range of more complex and chronic conditions.

So where do physiotherapists head to next? The training provided to physiotherapists is broad and provides an appreciation of a range of treatment and preventative processes. I suggest that physiotherapists utilise their knowledge from a health promotion perspective. The conditions afflicting modern society across developed and developing countries alike are predominantly the chronic non-communicable diseases, often referred to a “lifestyle diseases”. We are all acutely aware that rates of obesity and physical inactivity are rapidly rising. We also know that diabetes, heart disease, and cancer impact on the health and well-being of an increasing number of people. There is strong evidence that physical activity has graded health benefits on a range of these conditions, and that not being active enough is an independent risk factor for such conditions.

With their knowledge of exercise and how it interacts with a range of pathologies, physiotherapists are in a unique position to be at the forefront of health promotion through physical activity. This will mean a shift from dealing with people who are usually injured or unwell, to a population who, by virtue of their lifestyle, are at risk of a range of significant non-communicable diseases. This will also mean a broadening of the health care team that we work with to include more commonly other professions such as psychology, sport and exercise science, public health experts, and health promotion specialists.

I encourage you to explore the many opportunities in this area and establish what you can contribute to the group effort needed to tackle the modern lifestyle diseases that impact on individual health and our health care systems. To make an important contribution to this area we will also need to ensure that our training programs for physiotherapists incorporate education around health promotion, public health, and the role that physiotherapists can play.

Gregory S. Kolt
University of Western Sydney
Editor-in-Chief, Journal of Science and Medicine in Sport

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