

## CORRESPONDENCE

### To the Editor:

re: "The Poor Image of Physiotherapy" by H. David published in the February 1985 issue.

I do not believe that Physiotherapy has a poor image nor are physiotherapists becoming "an endangered species". Prof. Le Roux's article refers to the lack of physiotherapists in the Durban area rather than the poor image of Physiotherapy.

Never before has South Africa had so many registered physiotherapists nor so many Society members. Never before has the demand for physiotherapy services been so great. The demand far exceeds the possibility of supplying these services. Scarcity does not lead to a poor image; it leads to an increase in the value of the commodity.

The 16th Council Meeting of the South African Society of Physiotherapy will be considering the future goals and objectives for the Society. Included in these is the evaluation of physiotherapy care. It is hoped that the Society will take a more active role in the supporting and encouraging professional development and in monitoring the quality of the service rendered.

I believe that physiotherapists are proud of their profession and know their value to their patients and medical colleagues. It is true that poor treatments, lack of communication and unprofessional behaviour will lower the standards. Let us rather hope that a poor image of Physiotherapy is a rare phenomenon.

*P. Bowerbank*

Control Physiotherapist, Groote Schuur Hospital.

*To the Editor: My article did not state that there was a scarcity of physiotherapists nor that a lack of physiotherapists is related to their "poor image". It was also not intended to imply that there are no quality physiotherapists.*

*I am sure that it is encouraging for the readers to know that the future goals and objectives will be discussed at the Council Meeting. I hope that the following points will be considered if Physiotherapy is to stride forward towards a bright future:-*

1. Professional changes need to be made by salary increases for specialist expertise, parity of salaries for all race groups and improvement of management at all levels.
2. Relations must be improved by report-back to medical colleagues as well as within the community by means of media education.
3. New structures should be developed to meet the needs of the community.
4. Goals of excellence and effectiveness must be set by each individual physiotherapist.
5. Research must become a high priority.
6. Education must be updated.

7. There should be more definitive and recognized areas of specialisation.

8. Training of basically educated therapists is essential to supply the vast needs of rural areas.

*These points are a summary of part of a poster "Physiotherapy - the future in the balance" presented by me for the April Physiotherapy Congress.*

*As a last point, I believe that many physiotherapists tend to evade their responsibilities to their profession. There must be more active involvement in the Society by all members at all levels (special interest groups, branches, Council). The Society is a tool to be used by its members to bring about change. In this way we can help to shape our own future.*

*H. David*

Private Practitioner, P.O. Box 1751, Rivonia 2128.

### To the Editor:

I am writing to inform our membership of a new symbol that has been designed to denote the practice of Physiotherapy (Fig. 1). To date this symbol has been adopted by the Australian Physiotherapy Association and the New Zealand Society of Physiotherapists, and its further international use is envisaged. In fact there are plans to have it placed on the Agenda of the International Meeting of Public Relations Representatives at the 1987 W.C.P.T. Conference.



The official colour for Australia is green or black on white, and for New Zealand it is blue or black on white. This symbol in no way competes with or replaces the logos of the above national Societies. In Australia and New Zealand the Society logo is only used by the Society and its authorised committees, whereas the symbol is for use by the membership at large. For example it can be used on: stationery, business cards and signboards of private practitioners; physiotherapy department signs in hospitals; clothing; equipment bags and so on.

If South African physiotherapists wanted to use this symbol, all that is required is for the National Executive to write to the Australian Physiotherapy Association, just as the N.Z. Society did.

Recently this Symbol was submitted to the National Executive of our Society, and was rejected.

In this letter I ask the National Executive to explain to the membership their reasons for denying South

African Physiotherapists the opportunity to use this symbol if they choose.

*Haddon G. B. Speakman*

Professor and Head, Department of Physiotherapy, University of the Witwatersrand and Chief Physiotherapist, Johannesburg Hospital

*To the Editor: The National Executive Committee have given this matter due consideration, but felt that there was nothing to be gained by South African physiotherapists adopting this logo.*

*It is not specific to the profession of Physiotherapy or South Africa in particular.*

*However, the Committee was not totally against the concept and would welcome comments from members.*

*E. M. Botting*

General Secretary

## OBITUARY

### IONE SELLARS (née Leach) (1938-1985)

The sudden death of Ione Sellars in March was a great shock and a deep loss to her many friends, colleagues and students. She is sadly missed by all.

Ione was born in the Ladysmith district, Natal, and went to London to obtain her basic training in Physiotherapy at St. Mary's Hospital School of Physiotherapy, in 1960. Her clinical experience included a time at the McCord Zulu Hospital, where she set such a high standard that it later became a profitable venture. She returned to London where she obtained her Teacher's Diploma in 1966. It was during this time that she met and married Sean.

Her special interest in Anatomy and teaching Anatomy runs as a thread throughout her career. Before taking on teacher training she did a course in Anatomy and Physiology at St. Mary's Hospital. After obtaining her Diploma in Teaching Physiotherapy, she lectured in Anatomy and Pathology, as well as Physiotherapy subjects, at the Royal National Institute for the Blind School of Physiotherapy (now the North London School of Physiotherapy for the Visually Handicapped). She also had a short spell as Lecturer in Anatomy at the Orthoptic School, Royal Berkshire Hospital, Reading. The family then moved to Cape Town where Sean took up a post in the Department of Otolaryngology at the Medical School and Groote Schuur Hospital, Cape Town. She spent 1973 and 1974 as a Part-time Lecturer at the Department of Physiotherapy, University of Cape Town. In 1975 she moved over to the Department of Anatomy as Part-time Lecturer to the paramedical

students. In 1979 she became a Full-time Lecturer and soon took on responsibilities for part of the teaching to medical students as well. In 1982 she was appointed as a Senior Lecturer and carried quite an extensive load in lecturing to both paramedical and medical students in the Department of Anatomy.

Ione demonstrated a special knack and great enthusiasm for whatever she tackled. She made Anatomy come alive for several generations of undergraduate students at the Medical School, UCT. Her special teaching skill was most stimulating and inspiring and her enthusiasm very contagious. The video tapes on posture and movement produced by her are but a small legacy of this expertise. She willingly put in extra time to help out with extra-curricular teaching to specialist post-basic groups and produced some high quality articles for publication in the SASP Journal of Physiotherapy for the special requirements of physiotherapy.

Her support of Sean in his career and her family in their private life was unwavering and loyal. She found time in a busy professional life to see to their particular interests and to give to professional as well as mutual friends. She also had a particular interest in upgrading the education of black South Africans and was very involved in such a scheme.

We can only echo the words of Professor J. C. de Villiers at her memorial service. Ione was truly a person who lived every moment of her life to the full and gave as much as she was capable of giving, and more, to those who came in contact with her. She will be sorely missed by students, past students, colleagues who knew her as well as her personal friends and her family. Our deepest sympathy and condolences to Sean, Maria and Christian during this very sad time of mourning.