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The South African Society of Physiotherapy celebrated its 75th anniversary in September 2000. A milestone such as this is always a good time to pause and reflect on past achievements and future directions. I believe that some reflection on our knowledge base would be appropriate as we enter the new millennium and the next phase of our professional development. The strength of any profession lies in its knowledge which should reflect solid evidence-based research. This research then becomes the backbone of clinical practice.

Is physiotherapy a science? The answer to that question is a qualified yes. Physiotherapy is slowly developing its own science and slowly developing its own evidence-base for its practice. Increasingly the term "evidence-based" is being used by some academics and some clinicians.

Providing the evidence on which good physiotherapy practice can be based requires research to be undertaken by members of our profession. In fact research is now an essential part of our practice not only for the well being of our patients but also for the survival of our profession. The emphasis in the health care sector now is "value for money". It is no longer good enough to say something works, we must be in a position to provide the evidence that it does. Research is not a luxury for a profession but the basis on which professions are built. It is also a necessary part of providing quality care for our patients.

What universities need to be doing is to produce graduates who are research-minded. By that is meant physiotherapists who understand the research process and who have learned to read and critically evaluate the literature. In addition they need to produce physiotherapists who constantly evaluate what they are doing and are sufficiently critical and honest about their practice that they base what they are doing on the available evidence in the literature.

In addition both the universities and the profession itself should actively encourage physiotherapists who have the

interest to pursue research careers. One of the goals of the society should be to assist in financing research to a greater extent than at the moment. Universities should be encouraged to build up their research programmes and collaborate with each other and the profession.

Hockey 1985 described the attributes of a good researcher as the following-being curious, being competent, having integrity, having common sense and a sense of humour. These are the attributes of a good physiotherapist! So how does a good physiotherapist become a good researcher? Hockey's advice is simple-explore what is written about the research process, work with research colleagues and practice. Perseverance and humility could be added to that advice as well!

The profession led by the HPCSA and the society should encourage evidence-based continuing education courses. These courses should be rewarded by more CPD points than those which are not evidence-based. In fact Jules Rothstein in his editorial in *Physical Therapy* in November 1999 goes even further. He says that learning about treatments that are not supported by the evidence does not make sense. It is both unethical and immoral. He suggests that the givers of courses should ensure that they have the evidence for their new techniques and strategies prior to giving the courses. He feels that it is time for a moratorium on untested ideas and treatments.

Physiotherapists need to be encouraged to join their nearest medical library and learn to read critically. After all it is probably cheaper than most courses and ultimately more rewarding because reading critically may well lead to a far more critical evaluation of our practice. Reading the literature will also be rewarded by CPD points in the future.

The benefits to the profession of a solid research base are immense. The evidence will be there when negotiating with health funders; the evidence will be there to provide the best clinical practice and the evidence will be there to increase the status of the profession.

AIMEE STEWART
Assistant Editor