

East Timor

Resourcefulness in a time

In February this year, Meredith James from Sydney and Tanya Brown from Perth, travelled to East Timor to complete a one-month project. The physiotherapists worked as volunteers for the Ryder Cheshire Foundation, based at the Klibur Domin home in Tibar. The project was to follow up rehabilitation aides who had previously received training conducted by Australian physiotherapists in 2002.



Maria and Gregorio (translator and Rehabilitation Aide). Maria takes her first steps with her newly constructed frame.

THE RYDER CHESHIRE FOUNDATION (RCF) established the Klibur Domin home in Tibar to care for sick and disabled persons. In early 2002, Australian surgeons visiting East Timor identified that the lack of physiotherapy services, particularly in rehabilitation, was affecting the successful outcome of surgery. RCF was approached to provide a solution to this problem, and the idea of training East Timorese people as rehabilitation aides to work in communities and hospitals was conceived. With the support of the Ministry of Health, training was held at the National Centre of Health and Education Training. Ten participants completed a twelve-week training program, conducted by physiotherapy volunteers from Australia.

Follow up visits from Australian physiotherapists continued until December 2002. Most of the newly trained aides were visited in their workplace. Unfortunately, some course participants had been unable to secure paid work as rehabilitation aides and had pursued other work, including nursing. Those visited received one-to-one onsite training, including revision of background knowledge, and assessment and treatment techniques. The follow up was gratefully received by the rehabilitation aides, who requested further training.

“Working in East Timor is a challenging and brilliant experience”

of need

By Meredith James and Tanya Brown



Meredith teaching gait re-education to the course participants in Dili.

In February 2004, we travelled to East Timor to assess the current state of physiotherapy there and to train rehabilitation aides. We established relationships with local health service providers, and met with key personnel within government departments. At present there are seven physiotherapists, who received nine months training through the International Committee of the Red Cross, working in the Dili National Hospital. Rehabilitation aides, who completed the twelve-week training, are the only source of physiotherapy outside the capital in East Timor.

We visited the rehabilitation aides in their workplace. We assessed their skills and training needs and provided onsite practical training. Most of the aides were employed by hospitals. Their caseloads were mainly inpatients, with a small number of outpatients. They treated people with stroke, arthritis, fractures, and tuberculosis of spinal and peripheral joints. The outpatients were mainly children with cerebral palsy and developmental delay. Many people who would benefit from physiotherapy were unable to attend the service because of mobility and transport difficulties. We attended home visits for several of these patients to advise on education, assessment, and treatment strategies. The aides were unable to provide a home-visiting service to these people because of a lack of access to hospital vehicles. We helped the aides write proposals requesting regular access to vehicles, and we liaised with high level Ministry of Health staff to arrange the access. We hope we raised the profile of the rehabilitation aides through liaison with various government departments and local radio.

Rehabilitation aides and nurses from all over East Timor attended a three-day training course in Dili. The course included an anatomy review,

‘different uses of everyday objects can make a difference’

education about disability, normal development, manual handling, human rights, equipment prescription and making, principles of rehabilitation, and exercise prescription. We had resources translated and used role plays and the students’ own case studies to assist learning. The course was well received and the students requested it be held again.

We were asked to review a ten year old girl named Maria who has cerebral palsy, spastic diplegia. Until recently, it has not been possible for Maria to receive physiotherapy or equipment to assist her to maximise her abilities. We travelled to Maria’s home to meet her and her supportive family. Maria, who had a wheelchair supplied by RCF, was able to sit on the floor independently, but had difficulty moving in and out of the position and could not roll on the floor. We spent time teaching Maria and her mother how to assist her to move independently on the floor and into a seated position. She was able to take steps with her body weight fully supported, and her family was keen to improve her walking abilities.

We decided to make some modifications to a pick-up frame that would give her independent mobility. With the donation of sturdy rubber wheels from Bunnings Caringbah, in NSW, and the assistance of a local welder, Alan Cardoso, a new frame was constructed. The gutter forearm

supports of an old pair of crutches were cut to size and the wheels were attached to the frame. Within minutes of receiving the frame, Maria was able to take steps independently for the first time!

The provision of equipment is very difficult. East Timor is the fourth poorest nation in the world, and has very limited resources. East Timor relies on donations and local ingenuity to provide equipment including wheelchairs or walking frames. An Australian carpenter volunteers at the local prison and teaches the inmates simple carpentry. The inmates have been able to make simple seating equipment for children with disabilities. They have more recently made a block trolley with sturdy wheels for the East Timor terrain.

Working in East Timor is a challenging and brilliant experience. Despite the lack of resources, simple modifications and different uses of everyday objects can make a difference. Discarded water containers can be turned into bedpans, a sack of rice has multiple uses, a solid tree branch makes an affective crutch, and discarded plywood can be turned into a cut-out table.

At present, East Timor relies on volunteers to provide physiotherapy and education. In the next six months, the Cambodia Trust, an international charity, plans to open a prosthetic and orthotic rehabilitation centre in Dili. The centre will provide physiotherapy services to patients receiving orthotics or prosthetics. Tanya Brown will be going back to East Timor for four months, starting in late August, to assist the project. Tanya is looking for sponsorship to support her trip. If you are able to assist Tanya, or would like further information, please email <Tanya.Brown@health.wa.gov.au> or <merry_j@yahoo.com>.