# FAST FACTS ABOUT DISABILITY & REHABILITATION IN SOUTH AFRICA

#### National Statistics:

- SA disability prevalence: 7.5% (2.87 million people)
- Disability rates steadily increase over the age of 30. 50% of persons aged 80+ have a disability.
- Women (8.3%) more affected than men (6.5%)
- Over a million adults have a disability grant because they cannot work.

## Children with Disability:

- Children > 5 with disability: 10.8% (440 000+)
- 67% of children who need assistive devices do not get them.
- More than ⅓ of children with walking disabilities do not attend school.
- Children with disabilities are less likely to attend secondary school or tertiary education.

#### Rural Statistics:

- Disability prevalence is higher in all rural and farm areas.
- People with disability in rural and farm areas are more likely to have no formal education;
  affecting both their health, and life opportunities
- On average, people with disabilities in rural provinces live on less than R1250 per month
- Accessible transport for people with disabilities to a health centre or rehabilitation service can cost R200-R400 per visit
- Rural people have poorer access to assistive devices than urban people.

Statistics from Census 2011, Department of Social Development 2013, and the Human Resources Strategy for the Health Sector 2012-2017 Without effective rehabilitation it is impossible to break the vicious cycle of poverty and disability in the vulnerable and interdependent communities typical of rural areas in South Africa.

#### What RuReSA's Members Say:

"I love working in a multidisciplinary team, improvising and improving services and serving the rural community to enable communities to have access to medical treatment and therapy. I would be privileged to be part of such an initiative in SA." Therapist WC

"It is an amazing and much needed platform for rehabilitation in rural work, and has so much potential in creating a movement where Rehab is exposed more and understood better even in places where we are known as a profession. The dedication of the team members is inspiring!" Occupational *Therapist, EC* 



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A better life for rural communities through rehabilitation for all



Our Vision is that rehabilitation services are provided within a PHC framework to all rura communities, and are high-quality comprehensive, appropriate, accessible, and equitable.







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#### **WHO WEARE**

Rural Rehab South Africa is a multidisciplinary organisation of people committed to providing an effective rehabilitation service in rural areas. We are passionate about changing people's lives through rehabilitation which will:

- Prevent disability and related health problems in people at risk.
- Provide **early intervention** which reduces the impact of health conditions on people's lives.
- **Promote** healthy and active lives for people who sustain physical, intellectual, emotional and sensory impairment.
- Enable people with disabilities to participate fully in community life and fulfil the government goal of "a long and healthy life for all South Africans"

#### WHAT IS OUR MISSION?

- To ensure rehabilitation is integrated into health policy and planning at all levels
- To develop and share best practice models for high-quality, appropriate, accessible, acceptable, and effective rehabilitation services
- To disseminate information and research on: the health needs of rural people, rural rehabilitation, and health policies
- To provide support to recruit, retain and inspire rural therapists.
- To influence the actions of the service delivery community.

# Why Rehabilitation?

At the moment, our health system focuses on saving lives but little is done to ensure those lives become socially, economically and personally meaningful. Disability places an enormous strain on individuals and their families, both financially and socially, and

therefore has wide-reaching effects.

We look to the quality of those lives. "Quality of life" is not about being more comfortable — it's about being able to go to the toilet with dignity, to realise your right to education, to work, be part of your family; and contribute socially and economically to the household, the life of the community and the nation as a whole.

## Why Rural?

**Poverty** and the **Prevalence** of disability is higher in rural areas. Rural people have poorer access to all health services, and little or no access to rehabilitation services. Where rehabilitation services are available they are often rudimentary.

### **Rehabilitation Statistics:**

Nationally there is approx. 1 therapist per 750 people with disabilities, but the majority of these therapists work in cities or privately.

In the public sector there is just 1 therapist per 3225 people with disabilities.



#### Who do we work with?

Rehabilitation workers and students: Our members include Audiologists, Midlevel Rehabilitation Workers, Occupational Therapists, Orientation & Mobility Trainers, Orthotists, Physiotherapists, Prosthetists, Psychologists, and Speech & Language Therapists. We build supportive networks, share resources and represent rural rehabilitation workers in policy and professional issues.

**Universities:** to influence training and research relevant to rural rehabilitation and health.

Health policy makers: ensuring policies are rural-friendly and support good rural rehabilitation.

**Rural communities:** by strengthening the provision of effective rehabilitation services.

We are proud to **partner** with the following rural health and advocacy organisations: The Rural Alliance (RHAP, RuDASA, and PACASA), The South African Society of Physiotherapy, The Occupational Therapy Association of South Africa, and the South African Speech, Language and Hearing Association.

