

The right to rehabilitation: From policy development to implementation

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This collection of papers forms the second issue of the South African Journal of Occupational Therapy that focuses on human rights related to the theme: The right to access rehabilitation. There is no doubt that the view of rehabilitation has broadened over the last decade. In current international and national policies, rehabilitation goes far beyond the health field and embraces a wide range of issues including education, social counseling, vocational training, transportation, accessibility and assistive technology. Our focus in clinical practice has extended beyond bedside and ward programmes to encompass communities, courts of law, industry and school settings. Rehabilitation International argued that rehabilitation is a unique tool that "consists of a wide range of services that empower the individual, placing the individual in control of both his/her own [re]habilitation plan but also a shaper of national and international [re]habilitation policy"^{1,2}. We have moved significantly from seeing rehabilitation as a process for an individual to realising that it involves a collective process as well. Occupational therapy practitioners now have two national policies that inform their work, namely, the White Paper on an Integrated National Disability Strategy (INDS)² and the National Rehabilitation Policy³.

At a global level, the UN Convention on the Rights of Persons with Disabilities⁴ informs our policy processes, service delivery and practice into the next decade. Stein⁵ has pointed out that the Convention is a holistic human rights treaty, as it encompasses civil and political rights as well social economic and cultural rights. Setting apart [re]habilitation as its own article both highlights its importance as a *human right* and provides greater clarity to what is an extremely cross-disciplinary issue¹. Article 26.1: Habilitation and rehabilitation of the UNCRPD⁴ calls on States to "take effective and appropriate measures, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability and full inclusion and participation in all aspects of life"^{4,19}.

Within the Convention, the State is firstly responsible for the organisation and implementation of programmes and services, particularly in areas of health, employment, education and social services, through multidisciplinary teams for assessment of individuals' needs and strengths as well as supporting the participation and inclusion in their communities. Three papers provide ample evidence of the challenges we face in implementing policies and programmes to meet the needs of disabled people and their families.

The importance of *promoting transparency and access to information* as a means to protect the rights of employees to receive Workmen's Compensation is powerfully reflected in Landman and Bucanan's⁶ paper. They raise the need for occupational therapists to be pro-active in creating space for positive action measures, and emphasises the need for disabled people to steer their own [re]habilitation plans by being adequately informed.

In an attempt to understand how occupational therapists sustain economic empowerment of disabled people through open labour market employment as a strategy towards the right to work, Engelbrecht and Lorenzo⁷ describe the tensions between earning a salary and receiving a grant. The connection between the two worlds of *private, corporate world and public health and social service providers* was identified as an essential relationship in developing productive citizens. The research revealed the important role of the companies in *strengthening agency* by building individual's strengths and abilities.

Adams and Galvaan⁸ explore the transition of a group from a support group to a self help group and highlight the need to *strengthen the agency of individuals* while *facilitating the agency of the group* to advocate for the development of disabled children and their families within communities.

The second aspect is the initial and ongoing training for professionals and staff. Van der Merwe's⁹ paper offers an honest appraisal of the relevance of human rights to occupational therapy philosophy and practice in pursuit of restoring the human dignity of all citizens begin-

ning with the occupational therapists themselves. She maintains that "In order to practice ethically we need to carry knowledge of the role and potential power of advocating for the rights of clients and patients who are the most marginalised". The paper proposes ways to cultivate a human rights culture through the curriculum, practice and research in occupational. Dayal's¹⁰ paper provides the rationale for practitioners and researchers to understand the political systems and structures involved in the planning and the development of rehabilitation services within the district health system.

Thirdly, the State needs to promote the availability, knowledge and use of assistive devices and technologies required for full (re)habilitation. Mc Intyre's¹¹ paper presents four case stories related to provision of assistive devices in achieving the rights of participation in opportunities, and the ethical dilemmas of aid in the form of donor wheelchairs. Further ethical dilemmas of funding practices of medical aid schemes illustrates that there is not much difference between private and public service. The need for reliable statistics on the provision of wheelchairs will promote transparency and access to information through research in monitoring provision of assistive devices.

The papers challenge all occupational therapists to take cognisance of the international and national policies of the different ministries at all levels of government so that we can mobilise and maximise the available resources in realising the right to rehabilitation. The papers in this collection reveal the link between research, policy and practice. The use of term 'disabled people' or 'people with disabilities' has been left to the discretion of the individual contributors. The opportunities and possibilities for strengthening a rights based approaches to rehabilitation in order to secure dignity and respect for disabled persons and their families are open to all of us.

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