

In April 1993, the Chairman of the SASP, Mrs F Glauber stated that fragmentation of the Society was being caused by a breakdown in communication resulting in an "invisible barrier" which divided the NEC from Branches and Branches from the Groups¹. She felt that the time was ripe for a complete restructuring of the Society, starting from the top with Council and the NEC.

After the National Council meeting, an ad-hoc committee was formed, comprising members from all areas of the country and from different fields of practice. Many long soul-searching meetings have been held and a draft proposal of the new Society should be completed for presentation at this coming National Council meeting in May.

But what is a Professional Society and what are its functions?

Mrs Levy in her Presidential Address in 1985 pointed out that associations and societies came into existence many centuries ago, when groups of people with similar goals and shared interests banded together in order to solve mutual problems². As a Society grows, more authority must be handed down to delineated areas and groups for the control and management of their own affairs. In the past, there was strong opposition by members of the society to the formation of Special Interest Groups on the ground that they would splinter the whole framework of the Society. These fears were felt to be groundless by Mrs Levy who stated that the Central Administration could not have functioned effectively without the Groups.

What has therefore gone wrong and who is to blame for the perceived "fragmentation of the society"? What are the Functions of a Society?

According to Professor Bromilow-Downing, Professional Societies should act as a union to ensure that its members are adequately remunerated and that they receive due recognition from their employers and regulating bodies³. But he said that a Society must also maintain high professional standards and ensure its members provide good patient care. Communication is essential when campaigning for the recognition of one's professional status by other professionals.

Mrs Levy (1983) added that a society should also be concerned with the health needs of different communities and of the role of physiotherapy in meeting these needs². She urged the society and profession to ensure that physiotherapists do not remain in hospital and private practice departments, but that they become an integral part of the community services in

those areas where physiotherapy has not yet come into its own.

The SASP has done much to meet its obligation to its members and has strived to keep up with the demands placed on it. Although we waited seven years to react to the challenge of future health needs, a very active committee is looking into the role of the physiotherapy profession in future health care delivery systems. It is envisaged that final positional papers will be available shortly.

In order to maintain high standards of practice and to improve the image of physiotherapy, the concept of Quality Assurance has been accepted. Packages are being compiled for practitioners to be used as self-evaluation tools in various fields of practice and an educational component will assist the physiotherapist to improve his/her skills and competence.

Another plan is the establishment of an Ethics Committee which will deal with problems arising between physiotherapists and their patients or between different practitioners. Calls for nominations for a Chairman and three Vice-Chairmen of the proposed committee are set out in this Journal (page 20) and members are invited to become involved in this venture.

As we enter a new era in our country's history, with its fears, hopes and challenges, our Society is also moving to a more open and relevant association. Hopefully this will encourage every physiotherapist to join the SASP and make the society truly representative of our profession. As Mrs Gilder stated in her Editorial in 1977 "physiotherapy is on the brink of a very exciting era and it's up to every physiotherapist to exploit and explore this"⁴. This is even more true today than it was in 1977 and everyone can and should do something for our profession if we truly believe in its worth.

With the increasing number of physiotherapists receiving post-graduate degrees, a greater number of research articles can be expected from physiotherapists. Many research articles are being received from other university departments, which keep the Journal going, but it would be nice if most of the publications are from physiotherapists themselves. This should be another New Year resolution that each of us makes!

References

1. Glauber F. Guest Editorial. *Physio Forum* 1993;7(3):1.
2. Levy M. Editorial. *SA J Phys*. 1985;41(3):67-69.
3. Bromilow-Downing B. Presidential Address. *SA J Phys*. 1973;29(4):13-14.
4. Gilder N. Editorial. *SA J Phys*. 1977;33(3):1.