

A REPORT ABOUT THE
GLOBAL PHYSICAL
THERAPY PROFESSION
2019



**World Confederation
for Physical Therapy**



- 1 | Background
- 2 | WCPT membership
- 3 | Gender
- 4 | Education
- 6 | Specialisation
- 7 | Regulations
- 8 | Other global data
- 8 | Disclaimer



WCPT collects data and information from its member organisations.

Since 2017, the data collection has taken place on an annual basis, providing comparisons at a national, regional and global level. WCPT and its member organisations can use this data to influence policy decisions around health, health service delivery, human resource planning, and education – and show variations in the density of physical therapists in different countries and across WCPT regions.

In 2019, 120 WCPT member organisations were sent an online survey, which included questions for the relevant country about:

- the number of
 - individual members for the WCPT member organisation
 - practicing physical therapists
 - support personnel
 - entry level and postgraduate physical therapy programmes
- physical therapy specialisation
- professional name used
- special interest groups
- publications and conferences
- professional practice
- sources of funding
- regulation.

The high response rate, **87.5%**, in 2019 demonstrates strong engagement between WCPT and its member organisations and the reliability of the data. The census date for 2019 was 30 June.

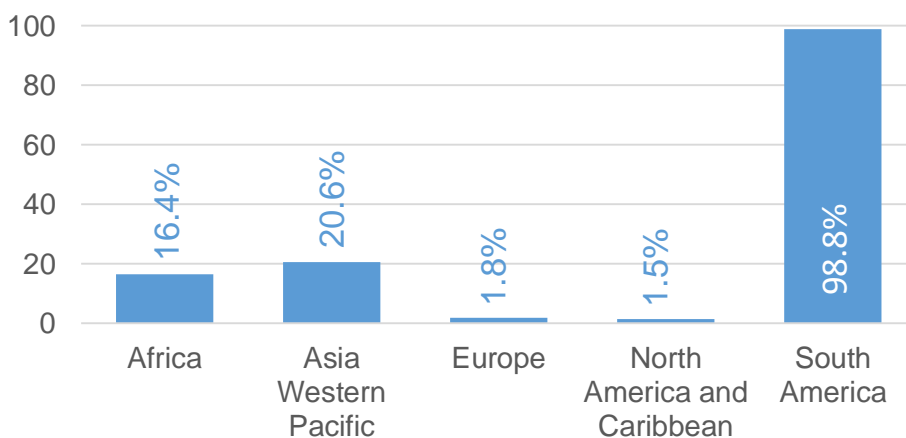


At a global level, individual membership of WCPT member organisations has increased by 10.3% during the previous year. In 2019 WCPT had 120 member organisations, representing 463,606 physical therapists (2018: 420,254). The total number of practicing physical therapists globally has increased by 1% to 1,600,606 (2018: 1,583,361). This demonstrates an increase in marketplace penetration to 29% (2018: 26%) in relation to the total number of physical therapists.

70% of respondents said membership of their organisations had increased. The following factors may have influenced this increase:

- formal approval of 13 member organisations at the WCPT General Meeting in Geneva in May 2019
- growth in membership for WCPT member organisations
- more accurate reporting of membership numbers

Membership growth across WCPT Regions



These variations may be influenced by organic growth, a rise in member organisations in one region (eg Africa), more accurate reporting (eg Indonesia has increased from 1,697 to 13,337 and Chile has increased from 300 to 6,000).

Membership growth in the South America region is influenced by two key factors:

- Costa Rica became a WCPT member organisation in 2019 and represents 18.5% of the total membership in the region.
- This region has the smallest marketplace penetration because only 4% of physical therapists in the region are part of a WCPT member organisation, compared with 27% in the European region and 65% in the Asia Western Pacific region.

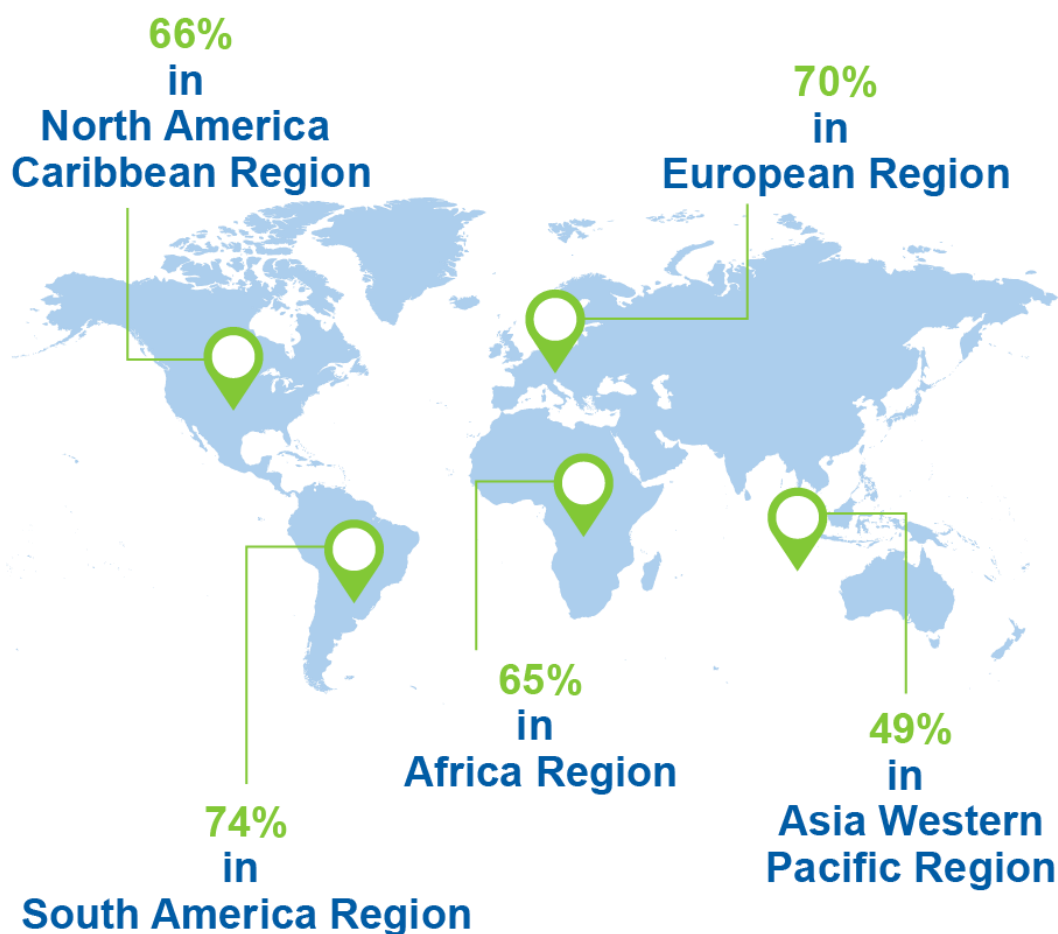
Globally **66%** of physical therapists are **female**



Of 86 member organisations that provided data on gender for their country/territory, men outnumber women as practicing physical therapists in only 17 countries/territories.

For three member organisations, 90% or more practicing physical therapists are women. In 10 member organisations, 80% or more practicing physical therapists are women while the figure rises to 70% or more for 34 member organisations.

Percentage of female physical therapists in WCPT Regions



Education programmes, at entry and postgraduate level, are the foundations of every healthcare profession and can offer insights into the development of a profession in a particular location.

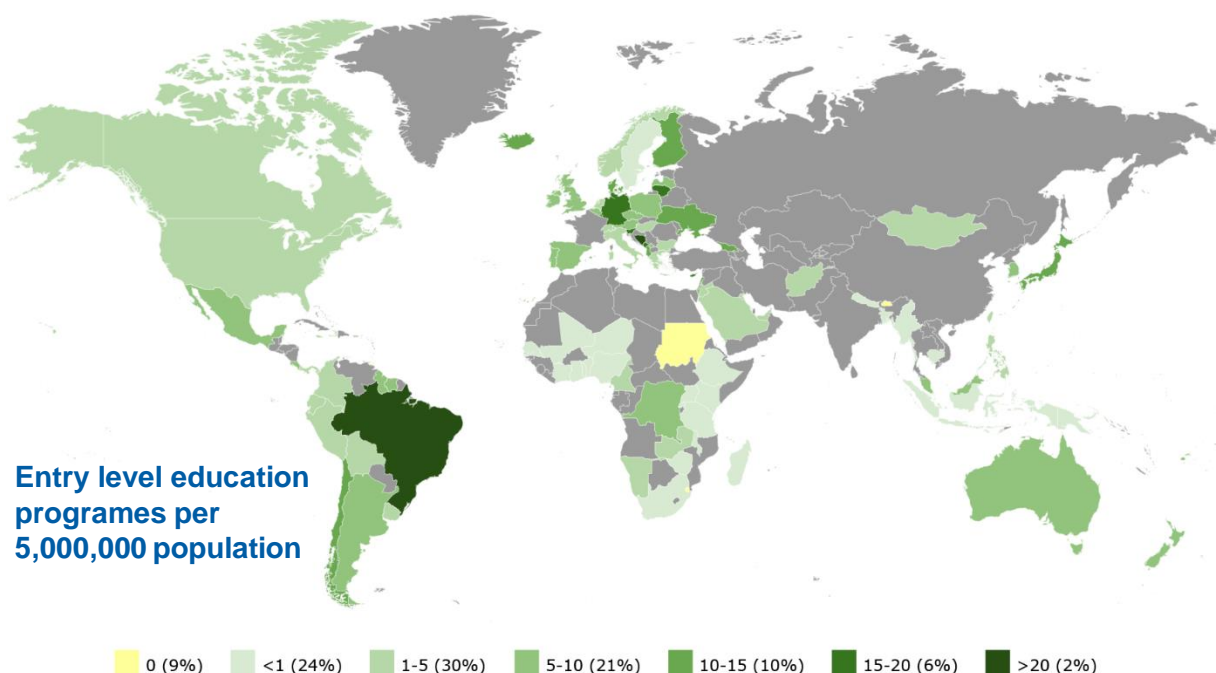
Globally, there are 3,702 physical therapy entry level education programmes but this varies between and within different WCPT regions. However, the average number of education programmes per 5 million population is used to offer comparisons for different countries/territories. The size of a country/territory may also be a factor as some do not offer a physical therapy education programme and this results in the local physical therapists travelling overseas to receive training.

AFRICA

Of 24 respondents, 19 have less than one programme per 5 million population. Congo (Democratic Republic) is the exception, with 110 programmes (6.5 per 5 M). Nigeria has 15 programmes, and all other countries/territories in the region have eight or less programmes. The average ratio for the region is 0.98 programmes per 5 million population, which is the lowest at a global level.

ASIA WESTERN PACIFIC

Of 23 respondents, 13 have less than two programmes per 5 million population, eight have less than one programme. In contrast, Japan has the highest ratio with more than 10 programmes per 5 million. There is a clear difference between high income countries (eg South Korea, Australia, New Zealand), which have more than seven programmes and the rest of the region. The average ratio in the region is three programmes per 5 million population



Europe

Of 36 respondents, 15 have more than 10 programmes per 5 million population. Bosnia and Herzegovina has 27.08 programmes. However, 6 countries/territories have a ratio of less than three programmes. The average ratio for the region is 8.98 programmes per 5 million population.

North America Caribbean

Some countries/territories (eg Barbados, Bermuda, St Lucia) in this region have no physical therapy entry level programmes due to the low population. Haiti, the poorest country in the western hemisphere, has two programmes for more than 11 million population. However, Suriname has 8.6 programmes per 5 million population. The average ratio for the region is 2.4 programmes per 5 million population, which is the second lowest at a global level.

South America

There are some variations in this region for programmes per 5 million population : 3.4 in Peru, 7 in Costa Rica, 12 in Chile. However, Brazil has 1,434 programmes, and, with a ratio of 34.2 per 5 million population, has the highest ratio at a global level. Excluding Brazil, the average ratio for the region is 5.6 programmes per 5 million population but including Brazil, this rises to 8.4 programmes per 5 million population.

There is a clear relation between the number of physical therapy entry level education programmes and the income level of a country/territory. Low income countries/territories, where there is a higher need for healthcare professionals, have the lowest ratios of physical therapy entry level education programmes in relation to the size of the population.

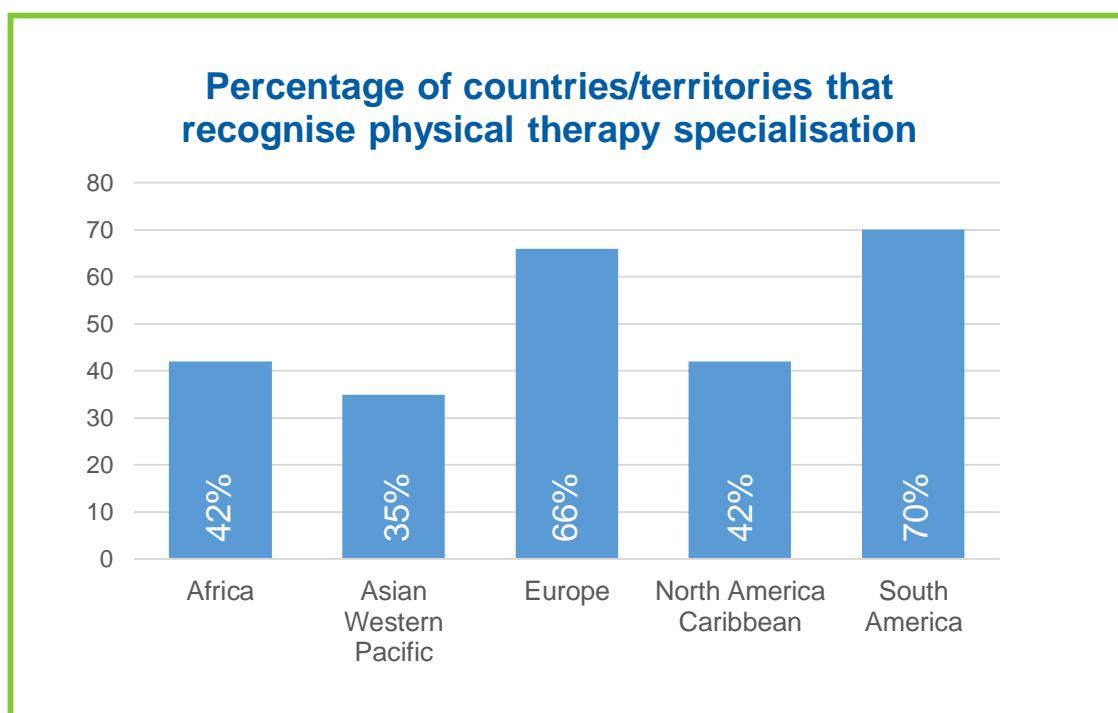
62% of respondents said some postgraduate training programme was available in their country/territory and 69% respondents said a continuous professional development schedule was provided through their website.

Recognition of physical therapy specialisation is one of the steps to measure the development of the profession at a national level. Where specialisation is recognised it means the expertise of a physical therapist in a certain field is more highly valued by the wider multidisciplinary team and by the people being treated.

However, only 48% of respondents said specialisation in physical therapy was recognised in their country/territory.

The most commonly recognised specialisations are neurology and orthopedic/manual therapy, 35% of respondents said these specialisations were recognised in their country/territory. 34% of respondents said sports therapy was recognised, 33% said cardiorespiratory was recognised, and 32% of respondents said pediatrics was recognised. Other specialisations (eg women's health, older people, occupational health and ergonomics), were reported by 25-28% of respondents to have recognition.

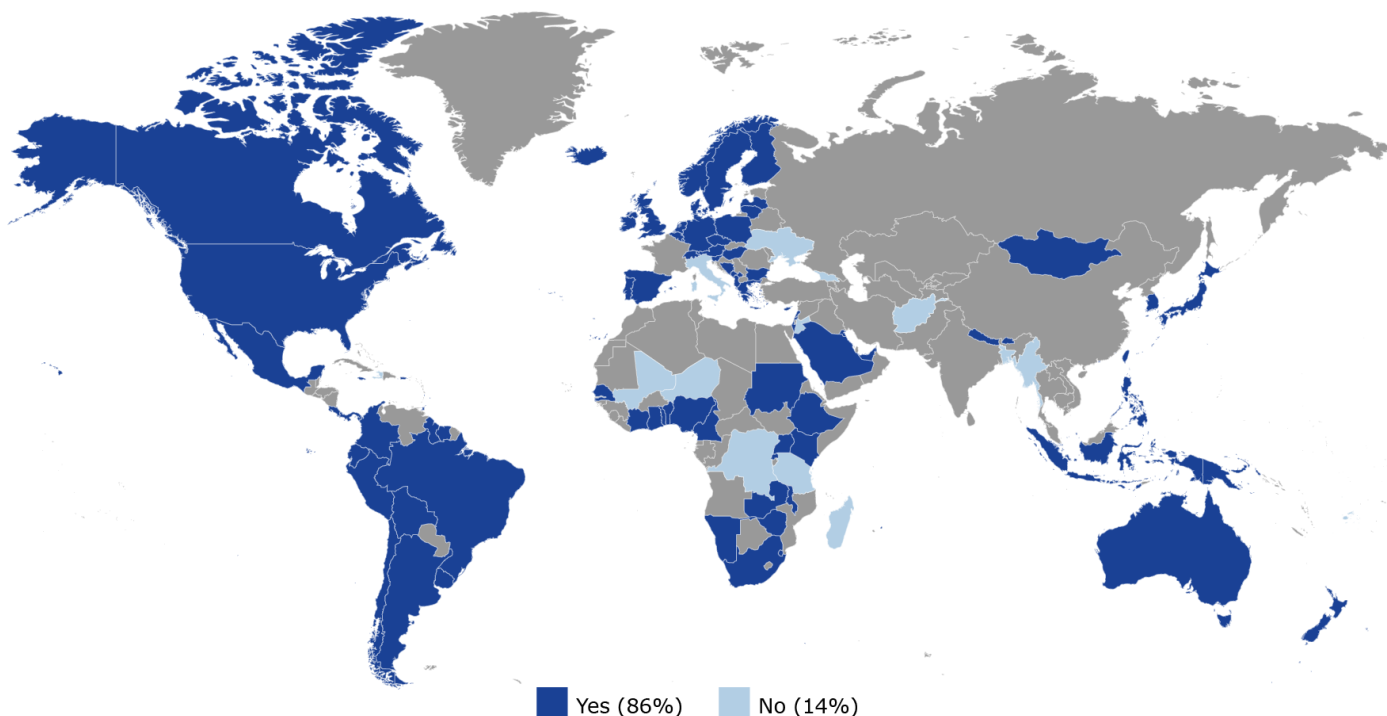
The South America region has the highest level of recognition, 70% of respondents, as Ecuador, Mexico and Uruguay are the only countries/territories that do not recognise physical therapy specialisations. In the European region 66% of respondents said their country/territory recognised physical therapy specialisations. 42% of respondents in the Africa and North America Caribbean regions recognise physical therapy specialisations. 35% of respondents in Asia Western Pacific region said physical therapy specialisations was recognised.



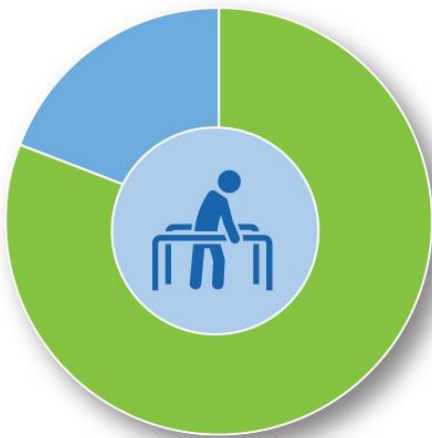
Systems to regulate the physical therapy profession vary around the world. However, 89 respondents (85%) said a national/regional body provided registration/licensing for physical therapists in their country/territory.

In contrast, 16 member organisations (15%) said it was not compulsory to issue a license to practice. In most of these countries/territories there is no system of regulation. Some (eg in Ukraine, Fiji and Bangladesh) have partial regulation or are developing a regulation system. In Cambodia, to comply with the Law on the Regulation for Health Practitioner (Royal Degree), all graduates must register to be a member of the physical therapy council to get a license to practice. However, because there is no physical therapy council in Cambodia, all Cambodian Physical Therapy Association (CPTA) members are able to use their CPTA membership card to support their practice or establish themselves for private practice.

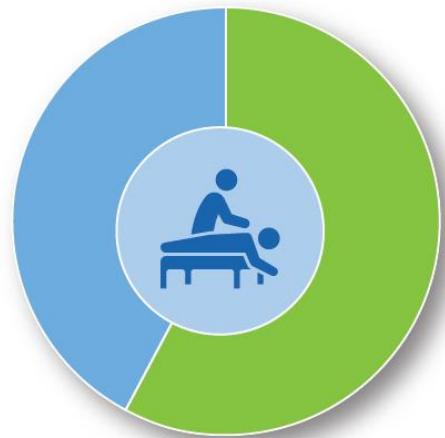
Do physical therapists need to be registered/licenced by a national/regional body to practice in the country or certain regions of the country?



Other highlights within the global data



81% of respondents said there was no law preventing private practice in their country



58% of respondents said there was direct access in their country and people could refer themselves to a physical therapist without a referral



31% of respondents said their member organisation published a peer reviewed journal

DISCLAIMER: Some data in this report has been collated from other sources available to WCPT. All information about WCPT regions can be found [here](#). Further information about each member organisation can be found in the [member organisation](#) section. For more information, please contact countryprofile@wcpt.org