AFRICAN FEDERATION
OF ORTHOPAEDIC
TECHNOLOGISTS

Ensuring access to appropriate orthopaedic and rehabilitation services
Right to quality of care

6th International Seminar of FATO

ARUSHA Tanzania

19 - 24 September 2011
CONTENTS

I. Introduction ....................................................................................................................................................... 7

II. Background of the project ................................................................................................................................. 7

  2.1. Description of the project .......................................................................................................................... Erreur ! Signet non défini.
  2.2. The promoter of the seminar ...................................................................................................................... Erreur ! Signet non défini.
  2.3 The partners of the project .......................................................................................................................... Erreur ! Signet non défini.

III. The Scientific programme ............................................................................................................................... 14
    3.1. The Scientific committee ......................................................................................................................... 14
    3.2. Material and human resources ............................................................................................................... 14
    3.3. The participants to the seminar .............................................................................................................. 15

IV. Project financing ............................................................................................................................................... 17

V. BUDGET GLOBAL ............................................................................................................................................. Erreur ! Signet non défini.
### ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGRAAD</td>
<td>Gabonese Association of Orthopaedic Technologists</td>
</tr>
<tr>
<td>AGUIPAR</td>
<td>Guinean Association of Rehabilitation Professionals</td>
</tr>
<tr>
<td>SIDA</td>
<td>Swedish International Development Agency</td>
</tr>
<tr>
<td>AMOP</td>
<td>Mauritanian Association of Orthopaedic Technologists</td>
</tr>
<tr>
<td>AMOP</td>
<td>Morocco Association for Orthosis and Prosthesis</td>
</tr>
<tr>
<td>AMAPAO</td>
<td>Malian Association of Rehabilitation Professionals</td>
</tr>
<tr>
<td>ANATOCI</td>
<td>National Association of Orthopaedic Technologists from Ivory Coast</td>
</tr>
<tr>
<td>ANPAON</td>
<td>National Association of Rehabilitation Professionals from Niger</td>
</tr>
<tr>
<td>ANTOB</td>
<td>National Association of Orthopaedic Technologists from Burkina</td>
</tr>
<tr>
<td>ANTOPC / Brazza</td>
<td>National Association of Orthopaedic Technologists from Congo/ Brazzaville</td>
</tr>
<tr>
<td>AOPB</td>
<td>Association of Orthopaedic Technologists and Rehabilitation Professionals from Benin</td>
</tr>
<tr>
<td>APORT</td>
<td>Association of Rehabilitation Professionals from Chad</td>
</tr>
<tr>
<td>ASTOP</td>
<td>Association of Orthopaedic Technologists from Togo</td>
</tr>
<tr>
<td>ATOC</td>
<td>Association of Orthopaedic Technologists from Congo</td>
</tr>
<tr>
<td>ATOS</td>
<td>Association of Orthopaedic Technologists from Senegal</td>
</tr>
<tr>
<td>ATOPABU</td>
<td>Association Orthopaedic Technologists and Rehabilitation Professionals from Burundi</td>
</tr>
<tr>
<td>CBM</td>
<td>Christian Blind Mission</td>
</tr>
<tr>
<td>CICR</td>
<td>International Red Cross Committee</td>
</tr>
<tr>
<td>COMESA</td>
<td>The Common Market for Eastern and Southern Africa</td>
</tr>
<tr>
<td>CRAPH</td>
<td>Rehabilitation Centre for Disabled Persons</td>
</tr>
<tr>
<td>FSH</td>
<td>Special Funds for Disabled</td>
</tr>
<tr>
<td>HI</td>
<td>Handicap International</td>
</tr>
<tr>
<td>IAR</td>
<td>African Rehabilitation Institute</td>
</tr>
<tr>
<td>SIAT</td>
<td>Swedish Institute for Assistive Technologies</td>
</tr>
<tr>
<td>ISPO</td>
<td>International Society for Prosthetics &amp; Orthotics</td>
</tr>
<tr>
<td>JICA</td>
<td>Japanese Agency for International Cooperation</td>
</tr>
<tr>
<td>LORA</td>
<td>The Liberian Orthopaedic &amp; Rehabilitation Association</td>
</tr>
<tr>
<td>LRBBO</td>
<td>Research Laboratory for Biomechanics and Biomaterials in Orthopedics</td>
</tr>
<tr>
<td>MISEREOR</td>
<td>Katholische Zentralstelle Für Entwicklungshilfe e.V</td>
</tr>
<tr>
<td>NAPO</td>
<td>National Authority for Prosthetics and Orthotics</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
</tr>
<tr>
<td>NGO</td>
<td>Organisation Non Gouvernementale</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations for Development</td>
</tr>
<tr>
<td>RI</td>
<td>Rehabilitation International</td>
</tr>
<tr>
<td>SLOPA</td>
<td>Sierra Leone Orthotics and Prosthetics</td>
</tr>
<tr>
<td>SPONG</td>
<td>Permanent Secretariat for NGOs</td>
</tr>
<tr>
<td>TALITHA CUM</td>
<td>Association of Orthopaedic Technologists in Rwanda</td>
</tr>
<tr>
<td>TATCOT</td>
<td>Tanzanian Training Centre for Orthopaedic Technologist</td>
</tr>
<tr>
<td>AU</td>
<td>African Union</td>
</tr>
<tr>
<td>UEMOA</td>
<td>West African Monetary Union</td>
</tr>
<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
</tr>
</tbody>
</table>
FATO ACTIVITIES

1992: Establishment of FATO

1999: At the seminar which was held in February at Bamako, Burkina Faso and organised by Handicap International and Swedish Institute of Assistive Technology, the following main events were deliberated and constituted:
- FATO was granted official recognition
- FATO Executive Board was elected
- Four National Member Associations were registered

2000:
- Completion of FATO’s first three-year Action Plan
- Launching of web site
- Establishment of database of professionals, rehabilitation and professional training courses were structures
- A partnership agreement between FATO and Handicap International was established
- The number of National Member Associations rose to six (6)

2001:
- Launched FATO-Newsletter Info which is produced four times a year (quarterly)
- Involved in evaluation of the CNO School, Lome, Togo
- Collaborated with ISPO International to organise three international training courses
- Attained membership status with ISPO International
- Participated in the Congress of ISPO France
- The number of National Member Associations rose to ten (10)

2002:
- Organised an international seminar on Amputation and Prosthetic Devices, a multidisciplinary team (physiotherapist, orthopaedic technician, and physician) at Niamey, Niger, in collaboration with HI, and ISPO
- Participated at an ISPO France Congress at Marseille
- The number of National Member Associations rose to fifteen (15)

2003:
- FATO was granted Non Government Organisation (NGO) status
- FATO attained membership status of Rehabilitation International (RI)

2004:
- Organised in collaboration with ISPO and HI an international seminar on “Poliomyelitis and Prosthetic Devices” in Lome, Togo, which was attended by fifty professionals (physiotherapists, orthopaedic technicians and rehabilitation physicians) from seven countries
- Concluded partnership and funding agreements with SIDA, SHI, MISEROR and Luxembourg Cooperative Mission
- FATO was co-opted as a member of Open Executive Board of ISPO International
- Organised a training course on “Scientific Communication in Writing and Speech” in Ouagadougou, Burkina Faso which was attended by ten people from six National Member Associations
- Co-organiser of a seminar and meeting in Ouagadougou, Burkina Faso on the UN convention of the rights of persons with disabilities in cooperation with Inclusion Africa and Indian Ocean
- The number of National Member Associations rose to seventeen (17)

2005:
- Organised in collaboration with HI, ISPO and SHI an international training seminar “Training of orthopaedic consultation teams in management tools, within the framework of a better durability of structures and fairness of care” in Dakar, Senegal, involving one hundred professionals in the field of rehabilitation (orthopaedic technicians, physiotherapists, rehabilitation medical practitioners, directors of rehabilitation and assistive technology centres) from 28 countries
• Election of a new Executive Board which marked a development of the organisation with regard to gender of membership and extension to the English-speaking countries. A female orthopaedic technician became a member of the Board, and three posts are occupied by English-speaking orthopaedic technicians from Zimbabwe and Sierra Leone.

• FATO entered into a co-operation arrangement with the WHO and the President of FATO took part in a meeting which was held in Geneva on directives relating to medical rehabilitation.

• Signed a partnership agreement with Handicap International for a period of three years.

• FATO participated actively alongside federations and associations of disabled persons in the feasibility study of the information network on disabilities in 11 countries in West Africa. This study was conducted by the President of the FATO

• Participated in a meeting of the African Decade of Persons with Disabilities held in Ethiopia and organised in September at the same time as a workshop on prefabricated orthopaedic equipment organised by the WHO and Disability & Development Partners.

2006: A follow-up was made on the new funding request through the Swedish Handicap Institute, SIDA agreed to finance the second phase of the project.

2007:

• Through the positive and encouraging results obtained during the first phase of the project MISEREOR accepted the funding of the second phase.

• Organised an international training seminar “How to endow the African countries with sufficient professionals to face the rehabilitation needs of people with disabilities” on May 21-25 in Kigali, Rwanda. The seminar was attended by more than 200 professionals in the field of rehabilitation (orthopaedic technicians, physiotherapists, rehabilitation medical practitioners, from about 40 countries in Africa, Europe and Asia. It was organised in collaboration with the Rwanda government through the State Secretariat in charge of the Fight against HIV/AIDS and other diseases and with several technical and financial partners such us: WHO, SIDA, MISEREOR, CBM, HI, VSO, Belgium Embassy in Rwanda/CTB, PROTEOR, OTTO BOCK, CICR, CR Equipments SA and Disability and Development Partners

• Participated at the ISPO World Congress which was held in Vancouver, Canada from 29 July to 03 August 2007, Thanks to the contribution of our partners, i.e. ISPO, HI, Clinical Orthotic Consultants, etc.

• Participated in a workshop to validate the strategic plan of the Regional Office for West Africa of the African Rehabilitation Institute (ARI) from 10 to 12 September 2007 in Ouagadougou, Burkina Faso

• Participated in a 2008-2010 workshop on planning activities of the various departments of the ENAM (National School of Medical Auxiliaries) of Lome in Togo, from 1 to 5 October 2007

• Participated at the RI Congress in Djerba in Tunisia from 24-26 October 2007

2008:

• Participated in collaboration with HI, Association of Orthopaedic Technicians of Ivory Coast (ANATOCI) and the Centre “Vivre Debout” in Abidjan in a training workshop in the scope of the recovery project of orthopaedic components. The workshop was held from March 31 to April 4, 2008.

• President of FATO attended a reflection day on wheelchairs in Tunis from 17-18 April 2008, to discuss with the authorities on the next Congress of FATO to be held in Tunisia in 2009.

• Participated on a workshop for development of curricula of the School of P&O in KHI (Kigali Health Institute) in Rwanda from 12-16 May 2008.
• Participated on the International Trade Fair, Leipzig, Germany from 21-25 May 2008

• Participated on Regional Consultation on the Global Report on Disability, organized by WHO in Dar-Es-Salaam in Tanzania, from 28-29 May 2008.

• FATO Secretary General participated in the ISPO France Congress in Marseille, from 13-14 November 2008

2009:

• Organized an international congress with the theme: « Disability and Technologies – Analysis of the situation in African countries », from 27-30 April 2009 in Hammamet in Tunisia.

• Re-elected the outgoing board for a 4 year period with the inclusion of women in the new board.

• Participated in the first meeting of P&O training schools organized by WHO in Johannesburg South Africa in August 2009

• Participated in seminar on physical rehabilitation held in Teheran, Iran organised by ICRC and the Red Crescent of Iran

• Participated on a Regional Study on components and raw materials available in West Africa (Burkina Faso, Niger, Mali and Togo). The Study was sponsored by Handicap International and conducted by the National Member Associations from the identified countries

2010:

• Signing of a partnership agreement with ICRC/SFD. Achievement of a mission of evaluation in Burkina Faso for SFD. The partnership takes into account the reinforcement of the secretariat of the federation and the partial support of the bilingual secretary salaries.

• Setting up of the scientific committee and the national organizing committee of the seminar in Arusha in Tanzania from 19 to 24 September 2011.

SOME RESULTS

- Recruitment in the civil service of all unemployed Orthopaedic technologists in Senegal.
- Setting up of a diploma training course in Rwanda after the seminar of FATO in 2007.
- Recognition by ISPO for the Level II training in Lomé in Togo
- Thematic training at the request of national associations from one or several countries (RIC, Burkina, Rwanda, Niger, Togo, Senegal, Mali
- Obtaining of training scholarships from WHO, HI, Belgium Cooperation for candidates of the member countries of FATO.
- Recognition of diplomas by the following countries: Senegal, Rwanda, Burkina Faso, Cameroon, Mali, Congo Brazzaville, Guinea Conakry, Cape Verde, Niger, Gabon, RCA….
- From 4 to 23 national associations officially recognized
- Adjustment of States’ participation in the operating budgets of these national centres: Mali, Senegal, Burkina Faso, Niger, RIC, etc…
- Partnership contracts reinforced with about fifteen international organizations, services and orthopaedic components providers.
1. Introduction

The African Federation of Orthopaedic Technicians (FATO), the federal structure of orthopaedic professional associations in Africa which has currently more than thirty countries with National Member Societies, has initiated a number of seminars for professionals in the field off rehabilitation medicine. The organization conducts regular congresses, i.e. once every after a period of two years whereby professionals, associations, disability organizations, policy makers, representatives of manufactures/producers of technical orthopaedic consumables, financial and technical partners meets and exchange or shares their expertise in the field. A keen interest is paid following an implementation of the right-approach in the scope of the International Convention on the Rights of Persons with Disabilities. The initiatives of training of professionals has bared positive fruits and resulted in a significant change through the training schools in Tanzania, South Africa for English speaking countries, Togo and Morocco for the French speaking countries respectively. The continuing education remains a difficult problem to solve because it is rarely a priority for most of the African countries. This situation is seen in the whole chain of minimal support for disabled people in the field of rehabilitation and therefore leaving millions of African people with disabilities.

Given the difficulty of states to set priority of right to access quality rehabilitation care and services for people with disabilities, a number of international organizations have invested in various countries in Africa for years to meet the most urgent need of preventive, curative and short/long term rehabilitation measures. It must be recognized that this mode of intervention is not at all long-term sustainable and in any case it is now reaching its limits because not very often registered in a national policy / action plan in medium and long term. In order to remedy this situation, FATO has strategically structured itself to attempt strengthen by establishing formal relations and collaboration at national, regional and international level. The plans are to develop national rehabilitation plans in two steps and through a complete overview and recommendations for the development of national plans by 2013. This process should take into account all the actors in the field of rehabilitation of the member countries of the federation and to influence and sensitise governments to have a desire to have accurate information that can assist decision-making in improving the quality of life of persons with disabilities who will in turn contribute to the family, community and national development as their level of independence will be grossly increased.

2. Background of FATO Congress

The African Federation of Orthopaedic Technicians (FATO) International Congress to be held in Arusha, Tanzania in September 2011 will be the first of its kind in English-speaking East Africa. In fact, it should be noted that since its creation in 1992, the previous seminar of FATO were held in French speaking countries, i.e. Niger (2002); Togo (2004); Senegal (2005); Rwanda (2007) and Tunisia (2009).

The themes which have been discussed and presented in the previous congresses are as follows:

- Niamey (Niger) in 2002 “Amputations and related components.”
- Lome (Togo) in 2004 “Poliomyelitis and related components.”
- Sally (Senegal) in 2005 “Training of orthopaedic consulting team on the management tools for a better sustainability of structures and for equity of care.”
- Kigali (Rwanda) in 2007 “How to endow African countries with sufficient professional to face the rehabilitation needs of disabled people.”
- Hammamet (Tunisia) in 2009 “Disability and Technologies. Analysis of the situation and appropriate development in African countries.”

The main focus on these congress was the capacity building of professionals namely of Orthopaedic technologists with the understanding that, the quality of a service passes inevitably by a quality of the initial and continuous training of these professionals. These various trainings gathered about 700 participants coming from about sixty countries of Africa, Europe and America. There was always a close collaboration and consultation with the other members of the rehabilitation team, i.e. Orthopaedic Surgeons, Medical Doctors, Physiotherapist, Orthopaedic Technicians/Technologists, Prosthetists/Orthotists, Representatives of Disabled People Organisations, policy makers and other stake holders. This demonstrated precisely the importance and necessity of working in a team in a concerted manner around the disabled person and not in a partitioned way as it is often the case in Africa.

3. Projections of 2011-FATO Congress

Referring to the previous five (5) congresses which were held, the focus was mainly on training of a multidisciplinary team and technology advances in favour the disabled persons. The question at hand is whether, do the people with physical disability aware of the availability of rehabilitation services or is there a system of educating, disseminating information to the community on the services available to prevent, correct or elevate the
function/deficiency of a disability? The theme of the next congress therefore will be to evaluate, share experience on “Ensuring access to appropriate orthopaedic and rehabilitation services- Right to quality of care”.

There will be plenary and syndicate sessions whereby expertise with their various long-term experiences will share their national/institutional implementation policies, strategies and projections. These discussions and documentation will take into account the framework of the “International Convention on the Rights of Persons with Disabilities” and the implementation of “National surveys in for the development of national action plans for a period of 6 years up to 2013” in about thirty African countries which are members of the federation. The next congress is intended to have the context of providing elements for decision to various governments and decision makers of member countries of FATO at the image of national plans of health and social development existing or in process.

4. Venue 2011-FATO Congress

The FATO-Executive Committee proposed for the 6th FATO Congress to be held in Arusha, Tanzania as from 19 to 24 September 2011 in Arusha, Tanzania. This choice of location is justified by the will to organize the seminar in East Africa which is an English-speaking country for the first time and that the Tanzanian Training College for Orthopaedic Technologists (TATCOT) and the Association of Prosthetists & Orthotists, Tanzania (APOT) did indicate their desire to serve as local organisers for the congress. Tanzania for the past 29 years has been housing a school for training professionals in wheelchair, technical orthopaedics at certificate, diploma and degree level. The professional output has not only improved the services but also increased extensively the number of professionals and quality of life of people with mobility disability from several English/French-speaking African, Portuguese, Asia and Latin America. This success deserves to be known and can be a driving force to several member countries of FATO. Tanzania has the trust of financial partners and provides optimal working conditions. The only disadvantages are the accessibility and transportation costs, given the geographical breakdown of the members of the federation.

It is a privilege to have the opportunity to host this congress in Tanzania (2011) as it will enable a high number of Tanzanian professionals, policy makers, Disabled People Organisations, Representatives of different Institutions/Organisations involved with rehabilitation of persons with disabilities to participate, share experience and expertise with others, elevate their knowledge on rehabilitation issues, gather information on state of the art and the development in the field.

4.1 Desired Congress Venue, Tanzania

The Congress will be held at Naura Springs Hotel, Arusha. The Naura Springs Hotel, Arusha, provides the following facilities:

- 24 Hour Rooms Service
- Mini Bar
- Coffee / Tea Making facilities
- Dry Cleaning and Laundry
- Safe Deposit Lockers
- Airport Transfer on Request
- 24 Hour Security

The main reasons for the choice are as follows:

- The hotel has an adequate number of rooms to accommodate approximately 400 participants/delegates
- The conference hall/side rooms are adequate for the plenary and syndicate group Discussions
- The price for accommodation and congress package is fare
- Other facilities i.e. conference office, computers, breakaway room are free of charge
- The other essential facilities, i.e. LCD Projector, Printer, Internet Café, Wireless connection, Interpretation Equipment, Screen, flip chart board with paper & makers, A.V appliances – i.e. TV & Video and OHP, P.A System
- Interpreters are available
- Arrangement of transport from-to Airport and town is possible
5 Overall Objective of the Congress
The overall objective is to improve the quality of service provided by the actors in the field of functional rehabilitation (better link between governments, organizations of persons with disabilities, financial and technical partners and organizations of professionals) in African National Member Association registered by FATO.

5.1 Specific objectives
In order to achieve the realization and the implementation of the national action plans in all member countries of FATO by 2013, the present seminar will be a unique opportunity to validate and formulate some recommendations on the results of the national surveys led in advance by participating countries (about more than 30 African countries). In fact, one year before the seminar, each country is expected to develop a national survey taking into account the following aspects:

- Inventory of the assistive technology and functional rehabilitation An analysis of what is existing in terms of human resources, structures, technology, national policies, presence of development actors (NGO, International Institutions, humanitarian and Aid to Development institutions) and training schools for P&O Technicians and therapists.

- According to international standards and WHO recommendations coupled with the International Convention on the Rights of Persons with Disabilities, propose a 6 years plan in order to improve substantially the situation found by developing a realistic national action plan and its budget.

- Training schools namely TATCOT, ENAM, AFSUD, MOROCCO is expected to present an action plan in the perspective of recognition of their structures for sub-regional institutions concerned as a school of excellence but also will propose as to how support and supervision can be made to elevate the number of professionals.

6 Expected results
- The national surveys of member countries of FATO are validated and some recommendations are made for the elaboration of national plans
- People with disabilities have access to functional rehabilitation care of quality
- The understanding of the situation is improved as a result of the surveys/inventory
- Proposals to improve the situation are made and shared with government stakeholders, financial and technical partners
- All the actors intervening in the field of rehabilitation are informed of the results and are committed in their planning
- Training schools are recognized as centres of excellence by sub-regional organizations.

7 Congress Organiser
This international congress is organized by the African Federation of Orthopaedic Technicians (FATO), in collaboration with the Tanzania Training Centre for Technical Orthopaedic (TATCOT).

7.1 The African Federation of Orthopaedic Technicians (FATO)
FATO was established in 1992 in Lome, Togo and officially recognized in November 1999 by Decree No. 99,122 / LS / GS / DG AT / DLPAJ of the Ministry of Territorial Administration and Security of Burkina Faso. Since July 2003, FATO became a Non Governmental Organization recognized by the Direction of Monitoring of NGOs (DSONG) and member of the Permanent Secretariat of NGOs (SPONG) Burkina Faso. To-date it has more than thirty countries in which professionals are organized into associations and/or groups. About twenty national associations have yet received official recognition by the governmental authorities of their countries. There are French-speaking countries, English-speaking countries, Portuguese countries and Arab countries which are spread throughout Africa.

FATO is committed since the meeting which was held in Bamako whereby the election of the current board was made, to find solutions to the multiple needs and obstacles that face professionals in establishing/development of functional rehabilitation centres. In fact, access to services of quality and financially and geographically affordable, remain a concern for most disabled people and their organizations in Africa.

The commitment of FATO is relayed by the new board elected at the general meeting in Dakar in June 2005
and Tunisia in April 2009 with a partial replacement of board members including a woman and a better taking into account of the representation of the sub-region in Africa. The area of implementation of the project is Burkina Faso (the headquarters of the FATO) and 35 countries of West, Central, North and South Africa.

7.2 Member Countries
- **West Africa:** Burkina Faso, Mali, Niger, Togo, Benin, Ivory Coast, Sierra Leone, Liberia, Guinea Conakry, Gambia, Senegal, Mauritania, Chad, Nigeria et Cape Verde
- **North Africa:** Morocco, Tunisia and Algeria
- **Central Africa:** Cameroon, Gabon, Republic of Central Africa, Democratic Republic of Congo and Congo-Brazzaville
- **East & South Africa:** Rwanda, Burundi, Ethiopia, Somalia, Zimbabwe, Zambia, Uganda, Kenya, Tanzania, Mauritius, Mozambique, Namibia and South Africa

7.2.1 Contacts: FATO, President: Mr. NIANG Masse
Address: 06 BP 9882 Ouagadougou 06 Burkina Faso
Tel : (226) 50 38 77 41 ; Fax : (226) 50 38 77 41 Mobile : (00235) 63626776
E-Mail : fato@fatoafrique.org; ou masseniang@yahoo.fr
Web-Site: www.fatoafrique.org

Local Partners: National Organising Committee
Prosthetist/Orthotist: Harold SHANGALI
TATCOT P. O. BOX 8690 Moshi
Tél : +255 27 2753986-7 Mobile: +255 787267154
Fax : +255 27 2752038
E-Mail: ispo@kilinet.co.tz
Web-Site: www.tatcot.org

8 Collaborating Partners:

8.1 Ministry Of Health and Social Welfare - Tanzania
The Ministry of Health and Social Welfare is a government ministry of Tanzania. Central offices are located in Dar es Salaam. The vision of the Ministry of Health and Social Welfare is to provide Health services of high quality, effective and accessible to all, delivered by a well performing and sustainable national health system. Its mission is to ensure that all health employees and providers deliver health services for the achievement of improved health status of the public. It does
- Formulation of Health Policy
- Provision of:
  - Hospital services
  - Preventive services
  - Chemical management services
  - Forensic science services
  - Food and drug quality services
  - Reproductive Health services
- Promotion of traditional medicine
- Inspection of health services
- Participating in international health and medical organizations
- Developing human resource under the Ministry
- Overseeing extra ministerial development parastatal and projects under the Ministry
- Supervising government agencies under the Ministry

Apart from the training of medical doctors, Ministry of Health & Social Welfare trains different professionals in Allied health sciences, which provides clinical health care distinct from medicine, dentistry, and nursing. Allied health professionals make approximately 60% of the total health workforce. They work in health care teams to make the healthcare system function by providing a range of diagnostic, technical, therapeutic and direct patient care and support services that are critical to the other health professionals they work with and the patients they serve.
8.1.1 Tanzania Training Centre for Orthopaedic Technologists (TATCOT)
TATCOT was founded with the material, financial and human resource support of the government of Tanzania and the Federal Republic of German in June 1981. The centre represents one of the first supra-regional training centres in the area of Orthopaedic Technology in Africa. It enrolls students from all English speaking African and other interested countries.

TATCOT is under the auspices of the Directorate of Training and Manpower Development of the Tanzanian Ministry of Health and Social Welfare, Tanzania. It is situated on the premises of “Kilimanjaro Christian Medical Centre” (KCMC), Moshi. KCMC is a consultant and referral Medical Centre for the Northern Zone of Tanzania. The centre comprises of a well equipped training centre with sufficient class rooms and training workshops. It has an access to an extensive and well established Orthopaedic department within the hospital.

This link guarantees a truly practical oriented training and education for the students enrolled to the different programmes. The academic supervision is carried out by the Muhimbili University of Health and Allied Science (MUHAS). The University confers a Diploma in Orthopaedic Technology upon successful completion of the course. Apart from the diploma course, the centre offers other short term training programmes such as:

• One year certificate course in Lower limb Prosthetic Technology (LLPT).
• One year certificate course in Lower limb Orthotic Technology (LLOT).
• Module Course in Wheelchair Technology
• One-year E-L-certificate course in Spinal Orthotics
• One-year E-L-certificate course in Upper Limb Prosthetics and Orthotics
• Other tailored courses of up to six months duration.

TATCOT is also entrusted to coordinate, supervise and manage B. Sc Degree Course in Prosthetics and Orthotics of Kilimanjaro Christian Medical College, a constituent College of Tumaini University. The course was started in 1995 which enrol direct and equivalent entry students with Advanced Level Secondary School Education (minimal three principal passes) and holders of Diploma in Orthopaedic Technology with good results in basic, medical and prosthetic/orthotics subjects respectively. The qualifying candidates are awarded B Sc Degree in Prosthetics and Orthotics of Tumaini University.

The school in collaboration with national and international organisations/institutions has conducted different seminars, conferences in different topics, i.e. appropriate technology in prosthetics/orthotics; treatment of club feet; amputation surgery and related prosthetics fittings; spinal orthotics; poliomyelitis and its related rehabilitation measures; wheelchair technology with postural and seating supports; etc.

Contact Person:
Harold SHANGALI
Principal – TATCOT & Dean Faculty of Rehabilitation Medicine
P. O. BOX 8690 Moshi
Tel: +255 27 2753986-7  Mobile: +255 787267154
Fax: +255 27 2752038
E-Mail: ispo@kilinet.co.tz
Web-Site: www.tatcot.org

8.2 Regional Office West Africa of the African Rehabilitation Institute (ROARI)
The African Rehabilitation Institute (ARI) is an institution of the African Union (AU) in charge of rehabilitation issues of persons with disabilities. It raises awareness and support African states for a better implementation of the resolutions of the African Union in favour of people with disabilities. ARI is
responsible for implementing the action plan of the African Decade of Persons with Disabilities. It works with African governments, nongovernmental organizations, international and African institutions and with UN specialized agencies, in order to develop a concept of African independence in various areas of disability prevention, medical rehabilitation, special education and equality of employment opportunities for persons with disabilities.

Contact Person:
Mr Djibril SOW
Regional Director West Africa of the African Rehabilitation Institute
3, Bd El Hadj Djily Mbaye BP 1139 Dakar Sénégal
Tel (221) 8222528, Mail: iar@sentoo.sn, ou iar@orange.sn

8.3 International Committee of Red Cross (ICRC) – Special Fund for Disability (SFD)

ICRC has its headquarters at the ICRC in Geneva and comprises a board of eight members, an executive committee of four members and a board of two members. SFD has three regional offices in Nicaragua, Vietnam and Ethiopia. Its mandate is to:
• Ensure the continuity of ICRC program for disabled veterans
• Support physical rehabilitation centres in developing countries.

The International Committee of the Red Cross (ICRC) is an impartial, neutral and independent organization whose exclusively humanitarian mission is to protect the lives and dignity of victims of war and internal violence and to provide them with assistance. And physical rehabilitation programmes help restore dignity. They get disabled people upright again – not just physically but in the sense of helping them reintegrate into family, community, employment and education.

Although the ICRC had undertaken some physical rehabilitation activities before 1979, the establishment that year of the Physical Rehabilitation Programme (PRP) marked the beginning of a major commitment in this field. Since 1979, the PRP’s activities have diversified and expanded throughout the world, from two projects in two countries in 1979 to a total of 85 projects in 26 countries in 2008. This development results from the recognition that humanitarian assistance in the form of physical rehabilitation requires more than an emergency response, since those in need of physical rehabilitation services will need such services for the rest of their lives. Over time, the ICRC has developed a leadership role in physical rehabilitation, mainly because of the scope of its activities worldwide, the development of its in-house technology, its acknowledged expertise, and its long-term commitment to assisted projects. In most countries where the ICRC has provided physical rehabilitation support, such services were previously either minimal or non-existent. In most cases, the support provided by the ICRC has served as a basis for the establishment of a national rehabilitation service dispensing care to those in need.

The main objectives of a national physical rehabilitation program is to ensure that the services provided are accessible, that they meet existing needs and are of good quality, and that they continue to function in the long term. ICRC physical rehabilitation assistance is designed to strengthen the overall physical rehabilitation services of a given country. It aims to improve the accessibility of services and their quality, and to develop national capacities to ensure their long-term viability.

Contact Person:
M. Claude TARDIF
Head of Rehabilitation Department ICRC
e-mail: ctardif@icrc.org

M. Max DENEUX
Head of the Regional Office SFD Addis Abeba Ethiopia
E-mail: mdeneu@icrc.org mdeneu.sfd@gmail.com

8.4 Handicap International (HI)

HI is an international, non-governmental organisation of solidarity, created in 1982 and which stipulates in its statutes that "it works alongside people with disabilities, whatever the context, on the national territory or
in all the regions worldwide". Handicap International is one of the six NGO co-founder of the International Campaign to ban landmines, Nobel Peace Prize in 1997.

On the geographical level, HI is present in nearly forty countries, appreciably affected by poverty and armed conflicts.

The Approaches and methods of action retained by HI are the following: the reduction of vulnerabilities thanks to solutions adapted to socio-economical environment and the development of local capacities thanks to training and to partnership.

Contact Person:
Isabelle URSEAU
Handicap International
Address: 14, avenue Berthelot, 69361 Lyon Cedex 07
Tel: (33) (0) 4 78 69 79 79; Fax : (33) (0) 4 78 69 79 94
E-mail : iurseau@handicap-international.org

8.5 Christian Blind Mission (CBM)
CBM’s aim is to serve persons with visual impairment as well as people with other disabilities in developing countries—regardless of their nationality, sex, or religion. The history of CBM goes back to 1908, when the organisation was founded by the German Pastor Ernst Jakob Christoffel. Since then, CBM has become one of the leading professional organisations for people with disabilities worldwide. Currently, CBM supports 1019 projects in 113 countries.

Today, CBM’s fields of work cover not only the prevention and cure of blindness, but also the education and rehabilitation of people with physical, mental, or intellectual disabilities. CBM implements its programmes through local partners. The financial resources, know-how, and staff-support enable partners in developing countries to gradually become independent of foreign aid. Ten CBM member countries and major donors provide the funds CBM needs to implement the worldwide programmes.

Contact Person:
Manu Van DYCK
BP 7483 Kigali
RWANDA
Tél.: 00250 078 8753747
vandyckmanu@softhome.net
Web-site: www.cbm.org

8.6 Institut Suédois des Aides Techniques (ISAT)
The Swedish Institute of Assistive Technologies is a public national centre of reference that works in the field of assistive technologies for disabled persons in Sweden. The major activities are information and professional trainings, needs analysis, research and tests of assistive technologies and Community Based Rehabilitation. Information is disseminated through some publications, courses, conferences, exhibitions and on Internet.

In Developing countries, the institute makes some consultations in collaboration with other disabled persons organisations in the field of assistive technologies and Community Based Rehabilitation. Since 1994, the Swedish Institute of Assistive Technologies has regularly supported and financed the activities organized by FATO with the contributions of SIDA, Swedish International Development Agency.

Contact Person:
Anna LINDSTROM
Swedish Institute of Assistive Technologies,
Address : Box 510, SE-162 15, Vällingby, Suède
Tel. : +46 8 620 17 00 ; Fax : +46 8 739 21 52
E-mail : anna.lindstrom@hi.se
Web-site: www.hi.se
8.7 ISPO FRANCE
The French section of ISPO International which carries the denomination: I.S.P.O. FRANCE was created in 1994 and is today, by the number of its members, at the 6th world rank among the 28 member countries of ISPO. On the impulse of the members of our Constituent Assembly, the creation of I.S.P.O. FRANCE occurred when international exchanges went faster; and when we think useful that French professionals participate in ISPO is opened to professionals of Orthopaedics: Surgeons, Doctors, Orthopaedic Technicians, Podo-orthotists, Physiotherapists, Occupational therapists, Biomechanical Engineers. ISPO - FRANCE is composed today of a little more than 106 members, 2 member sponsors, and 3 institutional members. Our wish is to associate to our firm, the most competent persons in their field, in order to propose qualified reference information. It organizes each year a national scientific congress and ensures the writing of a newspaper “The journal de l’Orthopédie” in collaboration with T.O.I.

Contact Person:
Jean Pierre LISSAC
President
5 Rue de la Claire, 69 009 Lyon, France
E-mail: jean-pierre.lissac@bouillat-terrier.fr Site web: www.ispo-france.org

8.8 International Society for Prosthetics and Orthotics (ISPO)
ISPO is an organisation open to rehabilitation professionals: Surgeons, Doctors, Orthopaedic Technicians, Podo-orthotists, Physiotherapists, Occupational therapists, Biomechanical Engineers. It was established in 1970 and gathers today about 2 500 members spread in more than 75 countries worldwide.
ISPO publishes a journal and two newspapers
• "Prosthetics and Orthotics International"
• "Ortholetter" an information bulletin published by ISPO AND WHO for developing countries.

Contact Person:
Office Manager
International Society for Prosthetics and Orthotics (ISPO)
22-24 Rue du Luxembourg
B-1000 Brussels - Belgium
Tel: +32 (0)2 213.13.79
Fax: +32 (0)2 213.13.13
info@ispoint.org
Site: www.ispo.ws

9 Scientific programme

9.1 Scientific committee
• FATO has a strategy of broadening the field of exchanges by involving other actors who, until now, met little with rehabilitation professionals such as policy makers, sub-regional institutions in charge of approving schools of excellence (school that is regional and has an impact in member countries of the sub-region).
• The workshops will be chaired by different moderators which is an opportunity to better understand and raise awareness on the recognition of professional and their work but also to involve everyone.
• This is the best way to attract the attention of policy makers on the deficiencies in terms of human resources and rehabilitation facilities while the International Convention has been signed and ratified by several countries in Africa.
• FATO will hold its regular assembly meeting during the seminar.
• The content and the program of the event are being elaborated by the Scientific Committee and will be sent to all partners and participants as soon as possible.

9.2 Material and human resources

Material resources
- Air tickets
- Board and lodging
- Local transport
- conference rooms
- audio-visual materials
- simultaneous translation (French/English)
- printing of the seminar documents

The material resources will be provided by the organizers of the seminar. This present project will be submitted to the partners of the seminar in order to solicit their assistance. Contacts will be made with other organizations involved in the care of persons with disabilities to support country teams invited (air tickets, accommodation). In addition, countries wishing to participate in this conference will also seek funding at the national level. Human resources are constituted by experts, leaders, guests and participants as well as the members of the national organization committee.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISPO International</td>
<td>2 persons</td>
</tr>
<tr>
<td>ISPO France</td>
<td>2 persons</td>
</tr>
<tr>
<td>FATO</td>
<td>3 persons</td>
</tr>
<tr>
<td>IAR</td>
<td>2 persons</td>
</tr>
<tr>
<td>CICR</td>
<td>1 person</td>
</tr>
<tr>
<td>FSH</td>
<td>1 person</td>
</tr>
<tr>
<td>OMS</td>
<td>2 persons</td>
</tr>
<tr>
<td>SIAT</td>
<td>1 person</td>
</tr>
<tr>
<td>Handicap International</td>
<td>2 persons</td>
</tr>
<tr>
<td>CBM</td>
<td>1 person</td>
</tr>
<tr>
<td>TATCOT</td>
<td>3 persons</td>
</tr>
</tbody>
</table>

9.3 The participants to the seminar

The participants of the congress are all those who are involved in the field, i.e. Orthopaedic Technicians/Technologists, Prosthetists/Orthotists, Physiotherapists, Occupational Therapists, Rehabilitation Physicians, Orthopaedic Surgeons, Managers, Representatives of Ministries of Health, Social Affairs, Public Service and Higher Education, Disability Organizations, Representatives of Regional and Sub-regional institutions, representatives of institutional partners, donors, etc.

The estimated number of participants is about 400 and coming from about forty African, Asian and European countries. Each country invited is represented on average by a team based on constraints and interests. Given the federal character of the seminar, at least one Orthopaedic Technologist must be part of the team (with the exception to the host country who will participate with three or more teams). The National Associations of Orthopaedic Technologists, disabled persons, rehabilitation section and physiotherapists will ensure the appointment of delegates having the skills and abilities necessary to learn and transfer the knowledge and skills that will be taught.

9.4 Number of participants planned by country

<table>
<thead>
<tr>
<th>West Africa</th>
<th>Central Africa</th>
<th>East Africa</th>
</tr>
</thead>
</table>
### West Africa
- Benin ..................... 3 persons
- Burkina Faso ........... 3 persons
- Guinea Conakry ...... 3 persons
- Mali ..................... 3 persons
- Mauritania ............. 3 persons
- Niger ..................... 3 persons
- Togo ..................... 3 persons
- Senegal .................. 3 persons
- Ivory Coast .......... 3 persons
- Sierra Leone ........... 2 persons
- Gambia ................. 1 person
- Cape Verde ............. 1 person
- Guinea Bissau .......... 1 person
- Nigeria ................ 3 persons
- Liberia .................. 3 persons

### Central Africa
- Central African Republic ... 1 person
- Gabon .......................... 1 person
- Rwanda ....................... 3 persons
- Chad ......................... 3 persons
- RDC ........................... 3 persons
- Cameroon ................. 3 persons
- Burundi .................... 3 persons
- Sudan ........................ 3 persons
- Tunisia ...................... 3 persons
- Morocco .................... 3 persons
- Algeria ...................... 3 persons
- Libya ....................... 3 persons
- Egypt ....................... 3 persons

### East Africa
- Tanzania .............. 10 persons
- Ethiopia .............. 3 persons
- Zimbabwe ............ 3 persons
- Uganda ............. 3 persons
- Kenya .................. 3 persons
- Malawi ............. 3 persons

### North Africa
- Tunisia ................. 3 persons
- Morocco ................. 3 persons
- Algeria ..................... 3 persons
- Libya ....................... 3 persons
- Egypt ....................... 3 persons

### Other countries
- South Africa
- Mauritius
- Madagascar
- Comoro Islands
- Somali land
- Zambia
- Mozambique
- Angola

---

**9.5 Invited Organizations**

Various organizations and institutions that support the African continent in the field of rehabilitation will be invited:

- Swedish International Development Agency (Sida)
- Handicap International
- International Red Cross and Red Crescent Committee (CICR)
- ICRC Special Funds for the Disabled (ICRC.SFD)
- German Cooperation (GTZ)
- ISPO FRANCE
- WAEMU
- COMESA
- EST AFRICAN COMMUNITY.
- ISPO International
- CR Equipments SA
- Firm JANTON
- Group G2M
- Firm OTTO BOCK
- Firm PROTEOR
- West African Federation of Disabled Persons (WAFOD)
- HI programmes / desks concerned
- United Nations Development Programme (UNDP)
- Institut Supérieur Technologique Montplaisir (ISTM)
- MISEREOR
- Clinical Orthotic Consultants
- World Bank
- WHO Regional Office
- National Office of Assistive Technologies and its Accessories for Disabled Persons (ONAAPH) in Algeria
- ENAM
- STEPS Consulting Social
- KHL Belgium
- Arab Organisation of Disabled persons
- World Health Organization (WHO) Geneva, Harare and Tanzania
- UNESCO
- ADB
- African Rehabilitation Institute (ARI)
- CBM
- MOBILITY INDIA
- BREDIA
- MOTIVATION UK
9.6 Language
French and English will be the two languages of communication. A simultaneous translation will be available.

9.7 Congress financing
The proposal of this congress will be submitted to partners in order to solicit their assistance. Contacts will be made with other organizations involved in the care for persons with disabilities such as United Nations Agencies, asking for their financial contribution to support country teams (air tickets, accommodation and per diem) for each invited country. In addition, countries wishing to participate in the training seminar will also seek funding at the national level.

BUDGET GLOBAL
The overall budget is estimated at 150 000 USD. A detailed budget is attached in appendix of the project.