2024

ANNUAL MEMBERSHIP CENSUS

GLOBAL REPORT



BACKGROUND

In this year's annual membership census (AMC), 125 World Physiotherapy member organisations were sent an online survey, which included questions about:

- number of
 - individual members for the World Physiotherapy member organisation
 - o practicing physiotherapists in the country/territory
 - o entry level and physiotherapy programmes
- professional name used
- leadership roles by gender
- special interest groups
- publications and conferences
- how they communicate with their membership
- professional practice
- telehealth
- direct access
- sources of funding
- regulation
- governance
- health emergency preparedness and response

In 2024, for the first time, the survey also included questions about the advocacy priorities of member organisations.

World Physiotherapy 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. World Physiotherapy and its member organisations use this data to influence policy decisions around health, health service delivery, human resource planning, and education – and to show variations in the density of physiotherapists in different parts of the world and across World Physiotherapy regions.



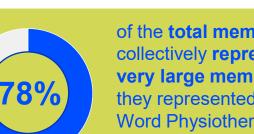
MEMBERSHIP AND TOTAL PHYSIOTHERAPY WORKFORCE

In SIZE OF MEMBER ORGANISATIONS 2024 600,882 S Μ physiotherapists were represented by World Physiotherapy through its member organisations. SMALL: **MEDIUM:** LARGE: <100 members 100-1,000 members >10,000 members 2,136,877 1,000-10,000 members 27 **53** 32 was the global number of physiotherapists, representing representing representing 28% 22% 42% 26%

of total member

organisations

of these physiotherapists were members of a World Physiotherapy member organisation.



of the total membership globally is collectively represented by the very large member organisations. In 2023 they represented 81.5%. This shows how Word Physiotherapy membership is evolving with more dispersed membership groups



of total member

organisations

The number of medium, and large member organisations has increased from last year. The number of small member organisations has decreased from 30 to 27 in the last year. This demonstrates the great work done by many of our member organisations to grow their membership.

of total member

organisations

VERY LARGE:

13

representing

10%

of total member

organisations

MEMBERSHIP GROWTH



of member organisations reported an **increase** in the number of their individual members



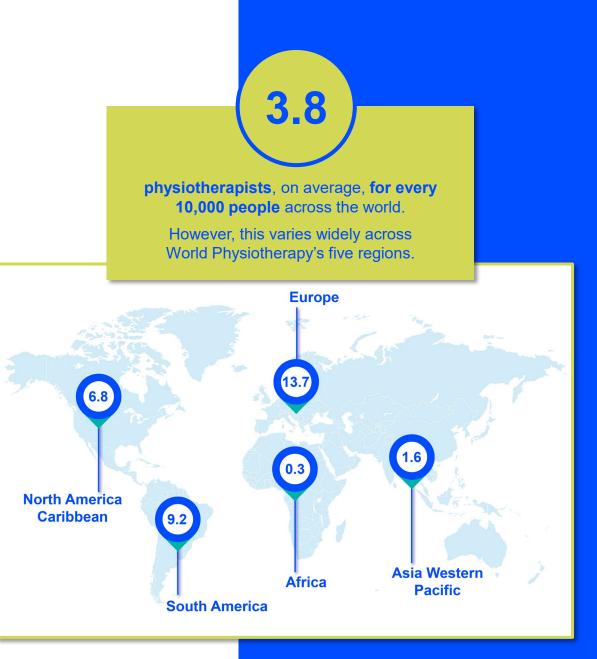


of member organisations reported a **decrease** in the number of their individual members





of member organisations reported **no change** in the number of their individual members



GENDER AND LEADERSHIP



39% 61% 61% of the global physiotherapy workforce is female

However, in relation to the physiotherapy workforce, there are variations between the five regions ranging from **68% female members** of World Physiotherapy member organisations in the **North America Caribbean** region to **50%** in the **Asia Western Pacific** region Although there are more women than men in the global physiotherapy workforce and in member organisations:



50% of member organisations' **board members** are female



43%

of member organisations in the region have **female presidents or chairs**

Data shows that this gap is closing over the last few years, as the **percentage of board members** has **increased by 2%** globally in the last year. However, the 2% increase was not found across all regions indicating that more work needs to be done to achieve gender equality.

Only **18%** of member organisations have specific **policies** or programmes to **support women in leadership roles**. However, this has grown by 4% in the last year.

EDUCATION

Entry level education programmes are the foundations of every healthcare profession and can offer insights into the development of a profession in a particular location.

>4,200

physiotherapist entry level education programmes globally. However, only 58 (1.3%) are based in low income countries/territories.

>140,000

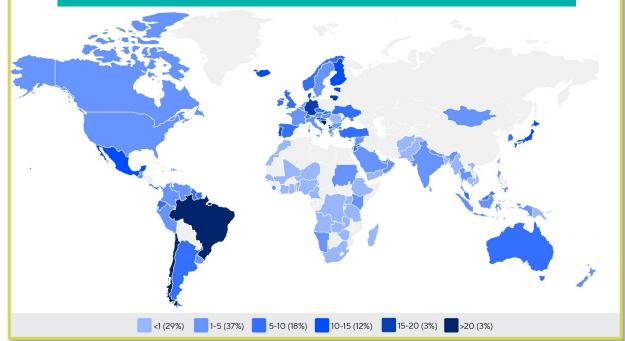
is the estimated number of **physiotherapy students** that **graduated** worldwide during the last academic year.

Access to a PhD programme is one way to assess the development of the profession at a national level, specifically in academic fields. Of the respondents, 50% said there is access to PhD programmes in their country/territory.



However, this varies across the world ranging from **76%** of countries/territories with **access to PhD programmes** in the **Europe** region to **15%** in the **North America Caribbean** region.

NUMBER OF ENTRY LEVEL EDUCATION ROGRAMMES PER 5,000,000 POPULATION





76% of respondents said the **bachelor's degree** is the **minimum qualification required to practice** as a physiotherapist in their country/territory.

This aligns with the **World Physiotherapy education policy**:

"The pre-entry level student must successfully complete a university level education programme, which is recognised to be at an academic standard of at least bachelor's level, with physiotherapy in its title". Advocacy is a major activity for member organisations globally, so gathering information on this issue helps World Physiotherapy align with its member organisations' needs. In 2024, for the first time, World Physiotherapy member organisations were asked to identify their advocacy priorities and were able to indicate multiple priorities.



Member organisations in the **Asia Western Pacific** (83%) and **North America Caribbean** (85%) regions identified **education** as their highest **advocacy priority**



Member organisations in the **Africa** (85%) and **Europe** (64%) regions identified **professional issues** as their highest **advocacy priority**



Member organisations in the **South America** region identified **education** (75%) and **professional issues** (75%) equally as their top **advocacy priorities**



Over **62**% of member organisations in Africa, Asia Western Pacific, and North America Caribbean regions identified **physiotherapy workforce** as an **advocacy priority**



Over **53%** of member organisations in Asia Western Pacific, Europe, and North America Caribbean regions identified **direct access** as an **advocacy priority**

ADVOCACY PRIORITIES

of member organisations globally stated that education was an advocacy priority in 2024

72%



DIRECT ACCESS

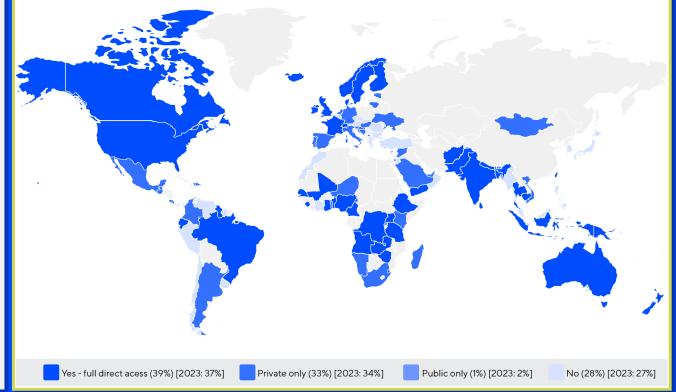
Direct access and patient self-referral are the circumstances where patients/clients are able to access physiotherapy services without having to see another health provider first.

A growing body of evidence suggests that direct access to physiotherapy services is safe and cost-effective for public health systems, especially in primary care and relating to musculoskeletal conditions. Early access to physiotherapy services through direct access can reduce the likelihood of acute conditions becoming chronic and leading to disability.

There are different categories in which the type of direct access can be analysed:

- o no direct access at all
- o direct access only in public health system
- o direct access only in private practice
- o full direct access

COUNTRIES/TERRITORIES WITH DIRECT ACCESS TO PHYSIOTHERAPY SERVICES





World Physiotherapy advocates for the right of those seeking physiotherapy services to self-refer to a physiotherapist if they so desire and believes that this right promotes the autonomy of users of physiotherapy services and enables fair and equitable access to such services.

LIMITATIONS REPORTED TO DIRECT ACCESS

While some countries/territories may have a form of direct access in public or private practice settings, limitations exist around how direct access is implemented.



47% of respondents reported that direct access is limited to the setting where the physiotherapy services are provided



31% reported limitations related to payment of the physiotherapy services



23% reported limitations related to physiotherapist training and competencies

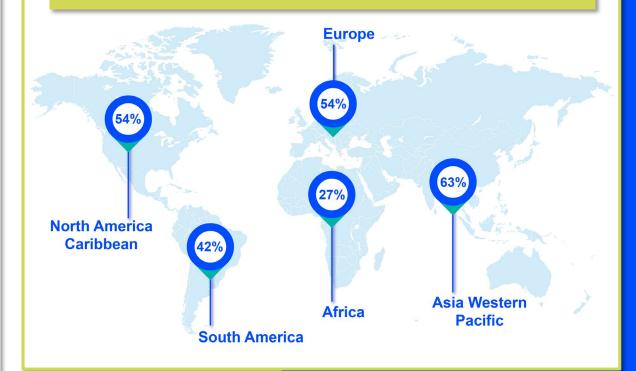


20% reported limitations on the population or health condition that may be treated in a direct access model

13% reported limitations around the length of time they are permitted to treat via direct access

DIRECT ACCESS

Direct access is a key advocacy goal for many World Physiotherapy member organisations who consider this a key pathway to achieving professional autonomy and recognition in a country/territory. It remains a priority advocacy issue for the global profession, however this varies across the regions:





In relation to the income level, **direct access** was reported as an **advocacy priority** by **58%** of **high income** countries/ territories compared with **38%** in **low income** countries/territories.

OTHER HIGHLIGHTS

78%

of respondents reported having at least one special interest group



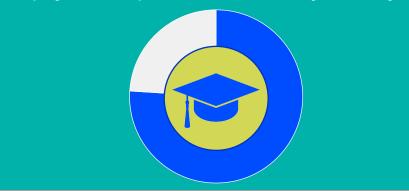


of respondents said support personnel worked with physiotherapists in their country/territory



76%

of respondents reported having postgraduate programmes as a training option for physiotherapists in their country/territory





of respondents said being a member of their national association is mandatory to practice in their country/territory



RESPONSE TO SURVEY IN 2024

Africa region		Asia Western Pacific region		Europe region		North America Caribbean region	South America region
Angola	Sudan	Afghanistan	Papua New Guinea	Austria	Lebanon	Bahamas	Argentina
Benin	Tanzania	Australia	Philippines	Belgium	Liechtenstein	Barbados	Brazil
Cameroon	Тодо	Bahrain	Saudi Arabia	Bosnia and Herzegovina	Lithuania	Bermuda	Chile
Congo (Democratic Republic)	Uganda	Bangladesh	Singapore	Bulgaria	Luxembourg	Canada	Colombia
Eswatini	Zambia	Bhutan	Sri Lanka	Croatia	Malta	Guyana	Costa Rica
Ethiopia	Zimbabwe	Cambodia	Taiwan	Cyprus	Netherlands	Haiti	Dominican Republic
Ghana		Hong Kong	Thailand	Czech Republic	Norway	Jamaica	Ecuador
Ivory Coast		India	United Arab Emirates	Denmark	Palestine	Panama	Guatemala
Kenya		Indonesia	Vietnam	Estonia	Portugal	Puerto Rico	Mexico
Madagascar		Japan	Yemen	Finland	Romania	St Lucia	Peru
Mali		Korea (Republic of)		France	Slovakia	Suriname	Uruguay
Mauritius		Kuwait		Germany	Slovenia	Trinidad and Tobago	Venezuela
Morocco		Macau		Greece	Spain	United States	
Namibia		Malaysia		Hungary	Sweden		Responses to the annual membership census were receive from World Physiotherapy memb organisations in thes countries/territories i 2024.
Niger		Mongolia		Iceland	Switzerland		
Nigeria		Myanmar		Ireland	Syria		
Rwanda		Nepal		Israel	Turkey		
Senegal		New Zealand		Italy	Ukraine		
Sierra Leone		Oman		Jordan	United Kingdom		
South Africa		Pakistan		Kosovo	Lebanon		

STAY IN TOUCH





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DISCLAIMER

- The data in this report is based on responses to the annual membership census (AMC) sent to World Physiotherapy's member organisations.
- The AMC was sent to 125 member organisations, of which 120 responded, representing a 96% response rate. This is the highest response since the census started in 2017, is consistent with previous years' response rates and demonstrates strong engagement between World Physiotherapy and its member organisations. The census date was 30 June 2024.
- Some data in this report has been collated from other sources available to World Physiotherapy.
- If you have any questions or concerns, or want to make changes to your country's data, please contact <u>membershipcensus@world.physio</u>.