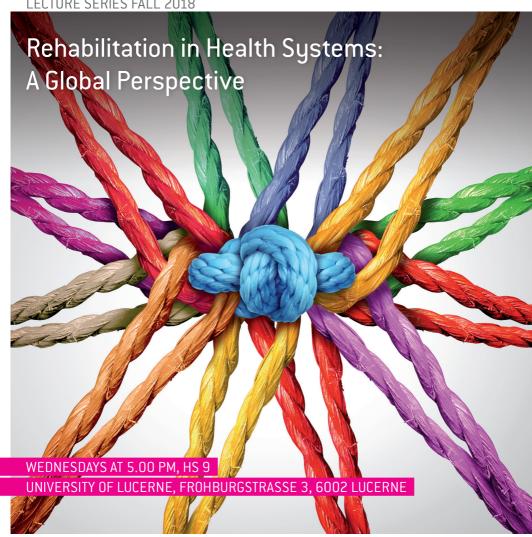


Faculty of Humanities and Social Sciences Department of Health Sciences and Health Policy

LECTURE SERIES FALL 2018



Introduction

A rapidly ageing global population and a rapidly increasing prevalence of chronic non-communicable diseases means that this century will see a dramatic increase in the number of people with moderate to severe limitations on their mobility, communication, cognition, and other domains of functioning. The WHO has recently proclaimed that in the future we will be living longer but with more disability. Although our health systems and public health institutions will always be concerned to provide curative, preventive and health promotive services, the increase in chronic health problems and multimorbidity suggests that rehabilitation services will be in the highest demand. More than the other health strategies, the aim of rehabilitation is to optimize functioning for people with permanent health problems. It might be argued, indeed, that rehabilitation is the key health strategy for the 21st century.

In this lecture series, international experts on rehabilitation will review the promise, and the challenges, of strengthening rehabilitation in global health systems through collaborations with academic, governmental and non-governmental partners as well as the private sector. The lectures will focus on policy and programming, service delivery, as well as clinical practice. As well, given the central role that information plays at every level — clinical, managerial and policy — the speakers will contribute to our understanding of the primary focus of enhancing the capacity of health systems to report on information relevant to human functioning in a standardized, and international comparable way.

We are pleased to present five renowned experts in rehabilitation policy, practice and advocacy who will share their initiatives and ideas in this inaugural lecture series of the Center for Rehabilitation in Global Health Systems, at the University of Lucerne.

Coordinators of the lecture series:



Dimitrios Skempes



Prof. Jerome Bickenbach



Prof. Gerold Stucki

October 3, 2018



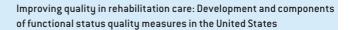
The Foundation for Active Rehabilitation in Poland: A peer led model of comprehensive rehabilitation after spinal cord injury

Robert Jagodziński

Vice President, Foundation of Active Rehabilitation (Fundacja Aktywnej Rehabilitacji «FAR»), Poland

Peer support refers broadly to the help and support that people with lived experience of a chronic health condition or disability are able to give to one another and is a crucial element of a person's physical and psychological recovery. Increasingly in the last decades reports have highlighted the role of peer support in strengthening therapeutic relationships, improving health outcomes and empowering patients to better manage and adapt to their condition. Established in 1988, the Foundation for Active Rehabilitation is a non-profit Polish organization that provides social and professional rehabilitation to persons with spinal cord injuries. The unique aspect of the program is that both the rehabilitation instructors and the caretakers are disabled. Most of them are paraplegics who have demonstrated self-reliance following successful rehabilitation. They visit hospitals and rehabilitation institutions, trying to encourage patients who have suffered a spinal cord injury to train their bodies and to follow an active rehabilitation. This peer-led program is based on a Swedish concept from the late 1970s which was introduced in Poland by Polish-Swedish diaspora with the help from Swedish instructors who attended the first rehabilitation camp in Poland. This presentation will describe the basic elements of the Active Rehabilitation service model for persons with spinal cord injury and its implementation and outcomes over the last years in Poland.

October 10, 2018





Anne Deutsch, RN, PhD, CRRN
Research Associate Professor, Feinberg School of Medicine,
Northwestern University, USA
Senior Research Public Health Analyst, RTI International, USA

For individuals who experience an illness or injury that results in functional limitations, access to high-quality healthcare services that are safe, effective, patient centered, timely, affordable, and equitable is critical. Although many patients receive high-quality healthcare services, care is not high quality for every patient during every episode of care. Quality problems include underuse of needed services, overuse of unnecessary services, and an unacceptable level of errors. Quality can be defined as the "degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge" The only way to know if health care quality is improving is to document performance using standardized measures of quality. The term 'quality measure' has been defined as the "quantification of the degree to which a desired health care process or outcome is achieved or the extent that a desirable structure to support health care delivery is in place."

Quality measures evaluate health care performance in a manner that permits comparisons across providers and across time. Quality measures may improve care through public reporting, quality improvement, and performance-based payment (i.e., pay-for-performance) activities. This presentation will describe the development and key components of the functional status quality measures currently used in the United States, and describe the inclusion of the function quality measure data elements in the Spinal Cord Injury Model System Database.

November 7, 2018 Applying systems thinking to understand resilience of health systems: Exerience and lessons from developing countries



Karl Blanchet, MScPH, PhD

Director of Health in Humanitarian Crises Centre, Department of Global Health and Development

London School of Hygiene and Tropical Medicine, UK

Recognition of the need to enhance health systems around the world, instead of only focusing on diseases has grown significantly over the past decade. Consequently, production of health policy and systems-related research also increased. However, going into an era of Sustainable Development Goals, studying and understanding how the national systems function from a systems perspective becomes even more necessary to find adequate remedies or policy solutions. A system thinking that emphasizes the context, complexity, interconnectedness, and adaptiveness of the health system resulting from feedback loops is gaining more traction within the health systems research field. Applying systems thinking will help better understand health systems resilience to shocks in times of rapid changes.

November 21, 2018 Rehabilitation in the global context



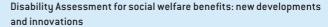
Alarcos Cieza, MSc, MPH, PhD

Coordinator, Blindness and Deafness Prevention, Disability and
Rehabilitation (BDD)

Department for Management of Noncommunicable Diseases, Disability,
Violence and Injury Prevention (NVI), World Health Organization, Switzerland

Dr Alarcos Cieza is a native of Spain. Prior to joining WHO in September 2014, she served as Chair and Professor of Medical Psychology at the Faculty of Social and Human Sciences at the University of Southampton in the United Kingdom. After obtaining her MSc in psychology in Madrid, Spain, she conducted a Master in Public Health and obtained a PhD in Medical Psychology from the Ludwig-Maximillians University in Munich, Germany. She led the research unit for over ten years at the Department of Physical Medicine and Rehabilitation and then at the Pettenkofer School of Public Health at the Ludwig-Maximilians-University, Munich, Germany. Dr Cieza oversees WHO's work on Rehabilitation, Disability, Hearing and Vision.

December 5, 2018



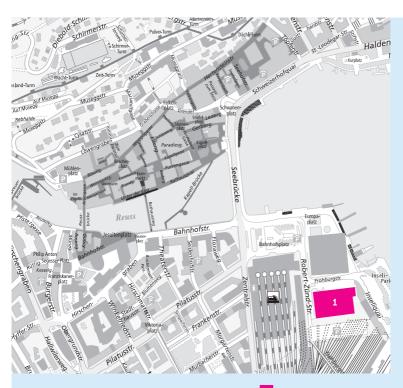


Leighton Chan, MD, MPH
Chief, Department of Rehabilitation Medicine, Clinical Center,
National Institutes of Health (NIH), USA

Rehabilitation scientific literature and clinical practice have refined various tools for the assessment of functional limitations of people with disabilities. The history of procedures of disability assessment for the determination of eligibility for social welfare benefits shows a clear transition from a purely bio-medical perspective to one that recognizes the nuances of functional limitation and the impact of the person's environment. Long a domain of purely medical professionals, disability assessment has increasingly around the globe been informed by the sciences and practice of rehabilitation. In this lecture an exciting new tool for assessing capacity to work will be described, and its future application explored.

Center for Rehabilitation in Global Health Systems

The newly created, Center for Rehabilitation in Global Health Systems at the University of Lucerne aims to coordinate the multidisciplinary expertise and current activities within the University and its research partners and to develop synergies in research and teaching across the health and social sciences. By bringing together, coordinating and enhancing the academic and research strengths that are available, and opening the door to sustainable expansion and future development through cooperation both nationally and internationally, the Center will contribute to international and national efforts, and promote educational research and implementation activities, to meet the challenge of strengthening rehabilitation in global health systems. The Center adopts the "learning health system" approach that aims at continuous improvement of health systems' responses to population and individual rehabilitation needs. The Center's activities towards strengthening rehabilitation are guided by the principles of human rights, of societal development, and the importance of scientific advance.



Information

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