Discussion

The findings of this survey have provided those involved in prosthetic and rehabilitation services in Mozambique with evidence that the services provided were effective for those who received them.

The large majority of those who received prostheses used them, and quality of life as measured by RNL scores was better for those who had received prostheses than those who had not. The survey has identified major areas of need, specifically in information dissemination and in transportation, both for those who have never received rehabilitation and for those who are in need of repairs or new prostheses.

Through the interviews we learned that many reported not knowing how to arrange to be seen at the orthopedic centre, where to go, or how to get there although they knew the service was available. Others did not know the service existed. Some women reported that they did not know what a prosthesis could do for them, so did not pursue it. Many who knew about the services stated that they simply could not afford the transportation to the centre or risk leaving their farms and dependents while undergoing the course of rehabilitation. Women did not know who would look after their children should they leave for the centre. We identified that fewer women than men accessed prosthetic services, and very few persons with upper extremity amputation had received rehabilitation.

We showed that overall in our survey group fewer people had livestock or paid employment to sustain their families compared to the general population of their districts.

While landmine injury has received global attention in recent years, and the majority of our survey population had lost limbs to landmine blasts, a large number of persons lost limbs to bullet wounds, train and motor vehicle accidents. These individuals face the same challenges as those injured by landmines, and deserve the same services. We strongly urge that when programs to serve landmine victims are initiated, that the resources are not restricted to those injured by landmines, but available equally to all with physical impairment.

The statistical results of this work should not be extrapolated to represent the situation in all of Mozambique. However, the information gathered was consistent in each of the sites surveyed. In combination with reports and discussions with POWER, HI, the Ministry for Social Action, ADEMO, ADEMIMO, local representatives of the disabled in each site, and the interviewees themselves, we feel that our observations and recommendations reflect the realities of rehabilitation in this country.