

Dear Dr Kedar Mate,

Thanks for the submission of your letter to the editor, which I have been hesitant in accepting. The fact is, most our readers are from low- and middle-income countries, and I would say that your letter is not in the interest of promoting rehabilitation services in these countries given the already usual lack of interest and political will to invest in the field of disability and rehabilitation there.

As editorial team, we have been drafting a while ago a new strategic plan and it means that we wish to make DCIDJ a journal that increasingly becomes more involved in policy debates and, as such, play a role in lobby and advocacy for certain causes. We wish to become increasingly relevant for practitioners and people with disabilities and their families especially. As such, we will at times be bold in terms of what we publish and what not.

The acceptance of your letter will, to some extent, serve a small group of practitioners and hopefully lead to some reflection in terms of the (ethics of) recruitment professionals for jobs in high-income countries. We are certainly not blaming them personally for working in high-income countries. However, we want to stress to the reader that we are not in favour of the – at times – serious brain-drain taking place in the field of rehabilitation. Aggressive recruitment is already taking place among final year students: I witnessed this myself at a university in Bangladesh where I was a few years ago.

So many countries struggle to provide even the most basic rehabilitation services for their inhabitants. The World Health Organisation (WHO) and professional therapeutic bodies are clear in their action plans (e.g. Rehab-2030) and messages that an increase of rehabilitation professional is urgently needed. While this certainly is needed, this is largely taking place at the expense of a diminishing focus on mid-level and grassroots rehabilitation workers. Yet, today's reality is that senior ministers (Health, Social Action and Civil Services) from an African State recently expressed in an exchange meeting that in the coming 100 year their country would neither be able to afford nor to train the necessary numbers of rehabilitation professionals to serve the needs of all. Let's thus be extremely careful to respond as individual professional to the temptations of working in western societies. These countries have their own problems and are confronted with double greying and at the same time serious challenges because of a too small workforce. It is however questionable if this should be done with personnel from low- and middle-income countries.

Huib Cornielje (Editor-in-Chief)