Editorial

Educating health professionals to meet Africa's needs

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This edition of the African Journal of Health Professions Education delves into the educational needs of health sciences training in Africa. Professor Janet Seggie provides an overview of the process of curriculum revitalisation in South Africa. She follows the sociopolitical and educational currents that led to change over the past three decades and describes the modern tenets of education that have guided curriculum reform across the country. Finally, she closes her paper off with a description of the challenges that we currently face in health sciences education and the priorities we need to focus on in the coming decade.

Five short reports are written by health professions educators who have recently completed a fellowship programme in health professions education, leadership and research offered by the Southern Africa FAIM-ER Regional Institute (SAFRI). This gives me an ideal opportunity to introduce our readers to the Foundation for Advancement of International Medical Education and Research (FAIMER), a USA-based non-profit organisation aimed at improving the health of communities by advancing health sciences education and research in developing countries.^{1,2} FAIMER was founded in 2000, and in 2001 I had the privilege of being selected as one of 16 international fellows who participated in the first round of the two-year part-time programme. The organisation focuses on faculty development by providing interactive on-site contact teaching sessions, electronic-based distance learning opportunities and an education research project which addresses a key need of the home institutions of participating fellows. A key element of the programme is the focus on improving education in institutions in developing countries with a strong emphasis on faculty retention in the developing world. About six years ago, FAIMER recognised the need to expand the programme by several fold and set about establishing regional institutes in India, Brazil and South Africa. To date there are more than 450 FAIMER fellows worldwide, including fellows from the five regional institutes. The regional institute established in South Africa initially planned to focus on the educational needs of southern Africa, hence the name, but it soon became clear that the demand was great throughout sub-Saharan Africa and we now have fellows all the way from Sudan to Cape Town! So, as director of the SAFRI programme, it is with a good measure of pride that I reflect upon the submissions of our new fellows.

The report by Ezeala and colleagues describes the use of portfolios in a clinical laboratory sciences training programme in Uganda. The paper expands the educational platform suited to portfolio-based learning. Ezera highlights the need in Uganda for higher degree programmes in laboratory-based disciplines such as microbiology. Mkandawire and colleagues from Malawi explore the interest and need for an intercalated laboratory sciences degree in the MB ChB programme offered in Malawi. This triad of papers speaks of the urgent need for laboratory sciences expertise in Africa. Mkandawire's paper also highlights the need for growing local research expertise in Africa, a well-recognised need if Africa is to develop the answers to research questions relevant to African priority health issues.

Museene describes the infrastructural and human resource needs required to roll out a programme of comprehensive nurse training in Ugan-



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da. She makes the point that comprehensive training spanning the major disciplines in nursing is needed. Our colonial silo-based programmes do not address the greater needs of Africa and this abstract signals attempts to address this gap in the health workforce cadre on the continent.

The final abstract addresses the need for novel assessment methods to assess competence in disciplines that require practical procedural competence. It is increasingly recognised that postgraduate specialist training programmes certify practitioners who have not necessarily objectively demonstrated competence in procedures germane to the discipline. Dempers and colleagues explore the use of video material to demonstrate competence in postmortem examination and show that trainees are more adept than senior colleagues at the use of such modalities. Technology-based assessment is increasingly becoming part of assessment processes and educators need to develop skills in the technology required to evaluate material submitted in an electronic format.

Blitz and colleagues explore a fascinating dimension of teaching: the impact of temperament on teaching. The paper makes the point that temperament and preferred approaches to teaching and actual teaching practices are not necessarily aligned and that faculty development may need to focus on improving the spectrum of teaching modalities of educators or that teams of teachers with different temperaments may need to be put in place to provide a range of teaching style preferences to address student learning needs.

Finally, McMillan's paper suggests ways in which health professions might move beyond description to generate explanations of teaching and learning that can be used to inform 'best practice'. As with the paper by Blitz *et al.*, this paper seeks to enhance teaching practices by providing evidence that seeks to improve teaching.

The papers in this edition speak to educational revitalisation, discipline-specific health workforce needs and teaching practices in Africa. I think it is fair to say that this *Journal* is providing a forum for discussing Africa's health professions educational needs.

- Burdick WP, Morahan PS, Norcini JJ. Slowing the brain drain: FAIMER education programs. Medical Teacher 2006; 28: 631-634.
- Burdick WP, Morahan PS, Norcini JJ. Capacity building in medical education and health outcomes in developing countries: the missing link. *Education for Health* 2007; 20: 3 (http://www.educationfor health.net/).