

The surmountable challenge of setting up postgraduate medical education

Eluzai Abe Hakim

Editor SSMJ,
Consultant Physician,
International Adviser
to the Royal College of
Physicians of London
on South Sudan and
Medical Adviser to the
St. Mary's Hospital-Juba
Teaching Hospital Link.

The strongest force to build capacity in the health sector in the new Republic of South Sudan (ROSS) is Education and Training. This requires immediate investment to implement postgraduate medical education, expand and strengthen Juba College of Nursing and Midwifery and improve medical assistants/clinical officers training schools. These institutions compliment each other and must never be viewed in isolation as has been the case since 1972.

As Adam Smith wrote in 1776, "*A man educated at the expense of much labour and time may be compared to one of those expensive machines... The work which he learns to perform over and above the usual wages of common labour will replace the whole expense of his education*" (1). We ignore education and training at our peril.

Implementation of the postgraduate medical education programme proposed by the St Mary's Hospital, (Isle of Wight, UK)- Juba Teaching Hospital Link is the best opportunity to equip future South Sudanese physicians, obstetricians, gynaecologist, paediatricians, public health specialists and surgeons with skills to enable them to work across the traditional hospital-community divide. These specialists need new perspectives and skills for evidence-based practice, effective use of information technology, quality measurement and improvement, cost awareness, care coordination, leadership of interdisciplinary teams and shared decision making with clinical officers, nurses and midwives, pharmacists and therapists(2).

Forty four (56.4%) of the 78 South Sudanese doctors with postgraduate training live outside the country or are retired whilst only 34 (43.6%) work in South Sudan. These are concentrated in the towns and cities and are not evenly distributed across the specialties (3). Careful planning is crucial in order to deploy trained doctors to all ten States so that they can start to reduce the high maternal and child mortality rates; tackle preventable illnesses, such as diarrhoea and measles, as well as re-emerging neglected tropical diseases, and control the spread of HIV/AIDS, tuberculosis and childhood pneumonia. There are between 200 and 300 South Sudanese doctors with basic medical degrees whose training can be delivered within the proposed ROSS postgraduate programme. Training in developed countries is expensive, may not be relevant to current needs and cannot be coupled to service delivery.

The postgraduate training should be integrated into clinical practice and made mandatory for all medical graduates employed by the Ministry of Health. Those passing local postgraduate examinations should be awarded an appropriate qualification to entitle them to apply for consultant posts. A fraction of these successful candidates can be selected for further training to become trainers on the postgraduate programme. The ball is now firmly in ROSS's court to take the training programme forward.

1. Pascharopoulos G. Education and development: A review. *The World Bank Research Observer* 1988; 3(1):99-116
2. Hackbarth JD, Boccuti CN. Transforming graduate medical education to improve health care value. *New England Journal of Medicine* 2011; 364:693-695
3. Mayen A & Lado D. Mapping the specialist medical work force for Southern Sudan: Devising ways for capacity building. *S Sudan med J* 2010; 3(2):23-25
4. Wairagala W. South Sudan faces grim health and humanitarian situation. *The Lancet* 2011; 377(9784):2167-2168