

National Forum on Public Health

*Analytical Appraisal of the Report on
“Health Professionals for a New Century:
Transforming Education to Strengthen Health
Systems in an Interdependent World”.*

30 AUGUST 2012
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Abstract

The Lancet Report was presented and discussed. We also saw the pertinence of the Reports focused on the systems thinking and a demonstration of the importance of research and the use of the hospital as a model classroom for the health practitioner. We did hear from UDM, UYI, STLI on what they are doing as contributions towards the professionalization of medical education in Cameroon.

It is important:

- 1) That we all read the report,*
- 2) That the focus of the report emphasizes shifts in paradigm. From informative, to formative and transformative approaches,*
- 3) That we rethink that reforms will be instructional and institutional,*
- 4) That educational interdependence is required,*
- 5) That we think within the context of being parts of a whole,*
- 6) That we adopt the three thematic areas of*
 - a- the Algiers declaration of a creating a favourable environment,*
 - b- Improving on knowledge management and*
 - c- carrying out operational and fundamental research,*
- 7) To develop the research sector and advocate it,*
- 8) To embrace the 10 reasons to foster research on diseases of poverty as well as non communicable diseases,*
- 9) That we consider the hospital as a model of classroom for health practitioners,*
- 10) That medical schools need to be open to the new changes and depart from the silos they currently are in,*
- 11) That both institutional reforms and curriculum changes be carried out by the practitioners advocating and effecting change as new change agents*
- 12) To encourage all to think systems and see wholes to see interrelations rather than thump and to see patterns of change rather than static snap shots*

Introduction

On the 30th of August 2012 by 9 O’Clock AM, a one day workshop on **“Health professionals for a new century: Transforming education to strengthen health systems in an interdependent world”** was organized by the Cameroon Academy of Sciences (CAS) and the National Forum on Public Health (NFPH) under the sponsorship of IAMP (The Interacademy Medical Panel) at the Aurelia Palace Hotel, Yaoundé.

The objective of the seminar was to discuss on the concerns of health professionals in the 21st century i.e. the inadequacy between education given to health professionals and the needs of the population; the perspective targeted through this seminar was to analyze the situation of health care and health education and bring out a critical assessment seeking improvements in this domain.

Were present at the workshop: some decision makers (from the Ministry of Public Health, Ministry of Scientific Research and Innovation), representatives of professional societies of health (National Forum of Health, Cameroon), Heads of the schools of medicine (Université des Montagnes, University of Bongono Touré, Saint-Louis Paramedical Institute), Deans of the Faculties of medicine (Faculty of Medicine and Biomedical Sciences of the University of Yaoundé I, Faculty of Medicine and Pharmacology of the University of Douala), several lecturers and Professors of the Universities (from Douala, Yaoundé and Bamenda). Other professionals of Public Health and Medical Sciences such as journalists (public and private media), researchers (from Polytechnique, Coordination Office for Research and Development of the University of Yaoundé I) and some Fellows of the CAS were found in the hall. Also, some students from the Catholic University of Bamenda attended the workshop as well as several mass media (audio and video i.e. CRTV television, CRTV Radio, CRTV Radio Centre, Cameroon Tribune and New Perspective) were among the participants.

This report presents the different panels, the discussions, the outcomes and some recommendations of the workshop.

General presentation of the seminar

The seminar was run by three different panels and begun by the opening speeches of the Executive Secretary of the Cameroon Academy of Sciences, Dr. David A. Mbah and the Head of the National Forum of Health Prof Muna. They successively welcomed the participants to the workshop, but the Executive Secretary thanked the organizers and those who have actively contributed to the organization of the seminar (especially Prof Muna and Prof Mbacham) as well as the sponsor of the meeting IAMP. Along the colloquium different articulations, panels and speakers were one after another succeeding in the floor.

Presentation of the Lancet Report

As mentioned in the programme, the first floor of debate was given to Prof Muna who presented the Lancet Report (2010) in its entirety. He shows out the key points of the report pointing therefore some comparison of health care and health infrastructure of the different regions of the world such as the North America, the Western of Europe, Asia, the South of America and Africa in order to usher the participants in the heart of the problematic. In his analysis of the Lancet Report, Prof Muna spoke of some subject such as the gender stratification, tribalism of researchers, neglected primary cares, the lack of the number and quality of personnel, health facilities, schools of medicines, the lecturers and several other important points useful in health care and health education. Among other, he reminded the concern of funds which is in the core of these weaknesses seen in the milieu of health and the challenges it is raising nowadays and since the evolution of medicine. To show how important is the Lancet Report, he went back in the history and refreshed the knowledge of the participants by stipulating that, the Lancet Report was neither alone nor the first and even the only one existing in the world. The revolution and the remarks for improvement began in the 20th Century precisely and since then; three reports have been written: the Flexner Report (1910), the Welch-Rose Report (1915) and the Goldmark report (1923) which are instances that have illustrated such a case before. He took analysis further and talked about the three generations of reforms in the world differentiating those that have already taken place to the current one. These are Science Base, Problem Base and actually System Base. He has also shown the levels of learning which are informative, formative and transformative. In the comparison between the first and the second world (West and South) he showed that education in Africa is stagnant. In trying to take out the continent from this weakness, he demonstrated that to introduce the great changes leading to transformation and in trying to create the accessibility that opens the doors to the quality, there were a concern of cost. In its other analysis, Prof Muna brought out the hurdle generating not only the gap between the West and the South but also reminded that the progress of science actually come with the interest cost.

In Prof Muna's presentation, the participants had the opportunity to see clearly where the concern was. This was then the point and the moment where the participants may begin thinking of the subject and try to find out the pertinence of the Lancet Report and build the suggestions which may contribute to fill the gap or reshape the health sector. On this basis, the participants to the seminar had the occasion to listen the stand points of the Independent Global Commission such as the need for major reforms, the synchronization of education system, the role of the different people today, the potential challenges in health care and the recommendations. The speaker also showed the relation between the transformative system and the interdependency of the world. In the same tracks, he revealed how knowledge has evolved since the 19th Century to the 21st throughout the shift of paradigm. He said that progress has passed through chemistry (19th century) to physics (20th century) and onto ICT (21st century). In this lecture he wanted the participants to be aware of the evolution of the world when it comes to development and said that advancement comes when there is a mixture of education, involvement and commitment. This first floor has taken the participants deeper in the matter criticized by the Lancet Report. The clarification of the subject by the panelist has eased the understanding of the concern to the participants; this was easily noticeable when the floor was opened for questions and discussions.

The scope and span of the lecture

However, information given by the participants after the presentation of the panelist helped to learn much on the past of health in Cameroon and on some initiatives of health care currently used or and better in some other countries. This was the occasion to learn that several ideas of health (such as the community health system) currently developed and applied in some African countries (Nigeria) began in Cameroon. As such, one could have easily understood that health sector in Cameroon was productive and could have been considered as a best practice or a leading pole only if things were regulated under certain rules and principles. Cameroon was then presented as a country with many innovative ideas opening the routes to many strategies later on taught, adopted, developed, applied by other countries (for instance the starting point of the community health system and its spreading around Africa and precisely Nigeria where the system has been more developed and is still applied with more successes) and unfortunately abandoned and forgotten locally. To better understand this point, the participants raised several examples where Cameroon had innovated (as with continuous capacity building of its medical personnel and the national medical conferences) but had also rapidly dropped the initiative even though this was relevant to the government and the population. During this knowledge sharing, the participants come to the idea that the Cameroonian society is used to killing the leaders and destroying the teams working for a positive social progress. Some of them have emitted some wishes calling the CAS to promote and protect the young leaders i.e. some ideas and those trying to contribute to the welfare of the population as well as the social development of the country (throughout the conception of some strategies bringing more strengths and helping the installation of good practices within the institutions and influencing the system). As such, the CAS can try to see how it can become the voice of the innovators.

Transforming Health Education to Strengthen Health System in an Interdependent World

The second speaker to the workshop, Prof Mbacham, who presented the transformation of the health education to strengthen health system in an interdependent World began his presentation by lecturing on system thinking. In his statement, he mentioned that there was a need to rethink how our things look like and then find the way to integrate and transform them into system. To better achieve this new vision, the panelist reminded that the way to the success was to begin with system thinking throughout the institutions which will then introduce the idea into the curriculum of education. The speaker has also shown that system thinking was a step by step pattern that begins with the personal mastery leading to mutual model establishing the way to team learning which finally extends onto the shared vision. Several ideas were displayed during his teaching such as knowledge management; zoonosis (that may be taught in medical schools); the relation between the gross domestic product and poverty and the Pastor Quadrant (where the panelist said that Africa should lead its research to the side of the Pastor Quadrant i.e. from basics to applied sciences). The speaker also allowed the participants to understand that system thinking is a way to examine how we create our own problems, how the different components interact and finally thinking system helps the workers to understand their environment in the World in order to make a constructive decision. In his analysis, he let the participants know that people should be able to know each other for example for the challenge between modernism and tradition; he said it was better to understand traditional African system as well as modern one. One could have realized that,

understanding system thinking is addressing issues and building strategies in a long term vision. The lecture helped to understand that things are not isolated in the World; an action (positive or negative) done in any part of World has a repercussion in the rest of the World. For instance, curbing the way of a young leader contributing to social development in Cameroon has, automatically, a direct and indirect impact in the rest of the World. This appreciation needs to be understood by the leaders and those holding positions all over the World (Africa, Europe, America and Asia) so as to be able to work in a constructive way. As such, this awareness appears to be useful in addressing some solutions such as the hurdles standing on the way of the young leaders and innovators working for social welfare and the blooming of institutions.

The participants to the workshop learned that biological sciences are leading research and there was a need to raise up other domains in order to contribute to the whole development of man. Some of the arguments emitted by the moderator were illustrated by some proofs such as the Algiers Declaration (June 2008) that transforms the knowledge into something useful to the population. Some advice given during this lecture called for the refinement of the traditional doctors, the need for the development of research sector and the sharing of the knowledge received. The pertinence and the richness of the lecture opened the routes to participants who were well informed on the relevance of the matter; they were therefore able to ask many questions, argue efficiently and contribute to the reinforcement of the subject taught. In such a way, one could have seen how far the speaker links the current professional health education shaped on the basis of formative pattern and the need to shift the paradigm that leads into transformation responding the most to the need of the population in a globalised world. Because the World is now recognized as a planetary village, Cameroon should be defining itself in that system where there is no isolation.

Following this lecture and the contributions of the participants, some important ideas were mentioned such as the focus on essential research; the perspectives beyond knowledge creation which are dissemination and appropriation; the improvement of knowledge that help to get into the league of knowledge creation – disseminated and appropriated. The participants made a call to work for the dissemination and appropriation of available knowledge that will help to face the political and technical sectors which are relevant for concrete achievements. Because knowledge is the power, it was then said that the scientists should be thinking wise about system that is to think in a way of how much is science and how much is humanity. While arguing, they reminded a former initiative of data base construction of all health knowledge (initiative formerly was supported by the Rockefeller foundation).

Presentation of health education in Cameroon by the Deans of Faculties (Public and Private)

This third part was an opportunity to assess indirectly the faculties of some universities present at the meeting. On seven Faculties and seven Deans of the Faculties (from public and private sector) expected at the workshop, five Faculties and four Deans respected the rendez-vous:

1. The Faculty of Medicine and Biomedical sciences of the University of Yaoundé I (with Prof Njamshi acting as the Dean).
2. The Faculty of Medicine and Pharmacology of Banganté known as the Université des Montagnes (represented by Prof Lazare Kaptue).

3. The Faculty of Medicine of the University of Douala (with a delegation of lecturers)
4. The Saint-Louis Institute of Paramedical training of Bamenda
5. The Bengono Touré University in Yaoundé

Some of the representatives of the faculties who took part at this workshop took the floor to present their institutions. The participants to the workshop had an opportunity to listen and witness what health education is from three Universities: the University of Yaoundé I, The Université des Montagnes and Saint-Louis Institute. In their presentations, the representatives of these institutions first displayed their school from their history including the vision, mission and objectives of the schools, some statistics (highlighting the former and current number of students registered, the number of graduates: For instance, Prof Kaptue from the Université des Montagnes said 216 Physicians have been graduated, 116 were recruited by the government and the others are in specialization), the different institutions in which the alumni have been engaged, the successes and innovations of the schools, the insertion of the schools within the process of globalization (through cooperation), some problems they are facing, some threats and needs of the schools.

In their presentations, some have the opportunity to present some difficulties met in the field such as the application of the BMD (Bachelor, Master's and Doctorate) system and the weaknesses and the failure of some national cooperation (such as between the faculty of medicine of the University of Yaoundé I and the Université des Montagnes of Banganté). They also show some positive points such as a dynamic and innovative system where the lecturers are being assessed by the student, the system of honour and meritocracy through awards (such as the price of excellence).

Nonetheless, remarks were made to these schools mentioning that their efforts were not embracing the trends or the revolution prescribed by the Lancet report.

The hospital: A Model of Classroom for health practitioners

In this presentation, Prof Biowole (Inspector General of the Ministry of Health) spoke about the development of the public health in the world since the 18th century. He raised the concerns of quality, institutional matters, cost, team of practitioners, accessibility and specialization of health professionals.

- In institutional frame, he said that there was the need of an administrative monitoring and follow-up. He also argued that the administrative vision of the system should be global. As part of the reformation needed in the system of Cameroon health, he suggested the introduction of a culture of assessment and accreditation that stimulate productivity and opens the doors to the construction and the qualification of centres of excellence useful in an interdependent World.

- He also spoke of the issues that may affect the hospitals: On this point, he brought out the idea of scheduling, evaluating, methods, quality, auditing, performing and the good health practicing also relevant for the establishment of the centres of excellence. He insisted on the evolution integrating the notion of quality, the normalization of the centres of excellence characterized by the scientific research productions and research leading to industrial development. According to his analysis, such improvements lead towards the enhancement of the quality of life.

Discussions

The lectures by the panelists opened the floor and give way to a number of important issues and discussions on health education and health care practices in Cameroon. For instance, it was revealed that Cameroonian researchers do not have the culture of writing for publications; the practice of health care is not evaluated, there is a fracture between the current and former generation of health practitioners presented as the masters. They said the former and best generation is now retired, the remaining is getting tired, there is no culture of excellence, the current generation is mostly focused on personal interest i.e. making money, the technical and medical system is disorganized, the regulation of the health system through the “numerous closus” idea (on this point emitted, the participants had different points of view). While the representatives of the government watch it as a tool to regulate somewhat better estimate health system in Cameroon, other researchers and representatives of private Faculties watch it as a limitation of innovation and a fence harming competition and other useful initiatives that may contribute to the improvement of health system in Cameroon. Alongside this discussion, it was said that the Lancet Report has given an occasion to speak of some real matters and the controversy of health care and health education system in Cameroon. In that view, the participants came to the point stipulating that the system has greatly changed negatively due to the fact that some initiatives good for the progress of the system were abandoned, others have raised and are being changed under the influence of the incoming such as the development of the new technologies.

Presentation of the CAS Outstanding Achievements (CASOA) and Award of Recognition

By the end of the day, the last panel of the workshop sat to present the citation of Prof Monekosso. The often called “Father of Health Science Education of Cameroon” received recognitions for his contributions and work done In Cameroon, Africa and around the World. For the first time since its creation in 1990, the Academy Board Members and the Leadership Team have decided to introduce in its programme, the recognition of meritocracy (through awards) to the senior scientists and Fellows who have attained the hallmark by the Professional Association and also to those who have done some milestones and outstanding achievements and those who will go beyond.

Prof Monekosso Award

This was a diploma and a medal given by the President of the Academy Prof Domgang. Before he received his awards, Prof Monekosso in his presentation, spoke about the vision, mission and the milestones. He reminded that the World has become a global village with a lot of mobility and for that; the mission of a medical school should include the transfer of a professional attitude, the reasoning skills and knowledge to the students. In the meantime, the school should contribute to a better access of real matter and appropriate knowledge to individuals, households and communities. In the same time, quality care service amelioration and also the increase of the heritage of skills, knowledge, discoveries and tools useful for good health care practices should be established. He also oriented and present a sample of the future (as a vision) of health on the basis of the process of decentralization. At the end of

his speech, he express his gratitude and happiness for what the CAS did to him; he said: "What I did today with the CAS will be unforgettable".

Closing Ceremony

In the closing ceremony, the President of the CAS thanked all the participants, made a brief abstract of the Lancet Report with its span (embracing several domains) and reminded that the report should not be seen as a controversial concern; rather it should be seen as a future matter for the Public health for example in Cameroon. The thanks were also addressed to Prof Muna, Prof Mbacham, the Executive Secretary of the Academy Dr. Mbah, the Programme Officer Dr. Tanya, the Administrative Assistant Mr. Ego and all those who have contributed to the organization of the workshop.

Gift per surprise: During the workshop, the participants received a batch of book and brochure from Prof Lantum in addition to the Lancet Report and Science in Action: Saving the lives of Africa mothers, newborns, and children.

Hope of the workshop

The organization of such a workshop was targeting a specific goal: the dissemination of the core of the Lancet Report, the discussions and lectures done during this seminar. The presence of the Representative of the Ministry of Public Health Prof Biwole, Deans of the Faculties of public Universities, representative of the Ministry of Research and Innovation and several lecturers was appreciated by all the participants. But through Prof Biwole, all the participants hope that this appeal will be reported to the Minister of Health and to the government as a concern to address in the next agenda.

Some contributions of the Workshop

According to some interventions of the high class of the participants, it was said that the language was one of the points in which professional and decision makers should insist if they really want to have success in their initiatives of health in the community. One the participants demonstrated that our official languages i.e. French and English were mastered by 40% of the literate population meanwhile 60% of the population was not able to communicate thoroughly and fairly in those languages. This seems to be a limit in the field and for the success of the policies of health in Cameroon. In this sense he had the opportunity to make a call for a positive development of national language that contributes to build development relevant to health system.

In other development of the subject, it was said that the scientists or the institutions do not implement what is known; this was a manner to introduce the application of the knowledge disseminated through writing by the community of the scientists. As shown in the example of community health system, the participants to the workshop agreed that we do not also develop what we have and what we know as well as we quickly drop what we know to embrace the changes coming from abroad.

Some former policies such continuous capacity building or updating the knowledge of the health workers, the national medical conferences and the adaptation of health equipment in some hospitals, centre of health and health facilities were brought back and discussed on the basics of their former successes and pertinence.

Recommendations

1. Leave the former system (formation) to get into transformation
2. Improve the knowledge on ICT adapted to each realm of specialization
3. Raise a critical mass of public advocacy. Make advocacy of the concern pointed out by the Lancet Report 2010 so as to convince and gain the confidence of the decision makers
4. Arm the CAS with some tools that will allow the organization to promote and protect young leaders and innovators
5. Raise the interest of the promotion of a local language that is relevant for the success of some programmes of health and that help in the process of global development
6. Implement and develop what we know and integrate wisely the changes
7. Bring back some former strategies of capacity building such as continuous training of professionals throughout national medical conferences for instance
8. Promote system thinking
9. Teach knowledge management
10. Teach zoonoses in medical schools
11. The CAS should organize more seminars where the researchers will be discussing on relevant issues
12. Distinguish what is essential research and drive the researches to the side of the Pastor Quadrant i.e. to move from the basics to the applied researches
13. Go beyond knowledge creation and introduce the dissemination and appropriation
14. Get into the League of knowledge creation – dissemination and appropriation
15. Find strategies for the dissemination of available knowledge and work for its appropriation
16. Promote the culture of quality, evaluation, accreditation, audit, performance, recognition, the construction of centres of excellence
17. Transfer professional attitudes, reasoning skills and knowledge to the students
18. Increase the heritage of skills, knowledge and discoveries

Conclusion

This workshop turned to be itself as a party of advocacy on health education and the needs to adjust and adapt the system to the changing world in the 21st century. With the participation of some representative of the Ministry of health such as the Inspector General of the Ministry of Health, it was the right time and moment chosen to evocate many dark or stagnant points of our health system that need to be rethought. The hope of this workshop is that the Ministry of Health and the Ministry of Higher Education will be aware of the preoccupations and suggestions made by the professionals of health and that this will be seen as a trigger that will facilitate or introduce changes needed in the system of health and education in Cameroon in a globalised World.

Copies of the presentations are available at the www.casciences.com