



Bachelor degree in Medicine and Surgery Community Medical training curriculum contribution on equity and quality of health care, in Namibia

Linda Ndesipandula Lukolo ^{(1)*} J Sheehama ⁽²⁾ A Munyika ⁽³⁾

⁽¹⁾ Department of Community and Family Medicine, School of medicine, University of Namibia, Windhoek, Namibia.

⁽²⁾ School of Medicine, Faculty of Health Science, University of Namibia, Windhoek, Namibia.

⁽³⁾ Oshakati Intermediate Hospital, Oshana region, Namibia.

Abstract

Community involving a population-focused, organized effort to help individuals, groups and communities reduce health risks, and maintain or improve health status`. The Community Medicine departments of medical colleges should be more involved in integrated teaching with clinical disciplines and should also be involved in the delivery of services in the teaching hospital and in primary health care settings, such as in immunization, guidance/counselling, biomedical waste management and infection control. All stakeholders in University education recognize its invaluable contribution to the quality of university training. `Field Attachment` to mean any approved field-based practical work carried out by staff and students for the purpose of teaching and / or research in places outside the University control. The objective of community medicine based training at the University is to produce practically oriented graduates that meet the required medical profession related competences of the community of their future service. Through community medicine attachment, medical students are enabled to associate themselves with the health and medical needs of the communities, this association will enable the students feel their own gap on these health issues to address them, or to be able to manage them.

Community medicine training placement also help the ministry of health and national at facility level to recognise the needs of the health system, and prepare to accommodate new graduate and new training program at this facilities of placement.

This study was to assess the contribution of community medicine based training for undergraduate medical students at the University of Namibia. It has taken time to look at the availability of facilities of placement, number of students available for placement, and preparedness of different health facilities to accommodate medical students on community based education student's acceptance and satisfaction of students doing community medicine based training.

The results of the study indicate that 10 (29.4%) district out of the 34 national health districts were available for community medicine based training. It was only 20 (33.3 %) health facilities out of 60 facilities which were available to accommodate community based training of medical students. The number of students available for community medicine placement increased from 43 students in 2012 to 290 for the year 2017 (77 are 3rd, 72 4th, 75 5th and 66 6th years) per year. It was only 9 (45%) facilities that were ready to accommodate students arriving to them for community based training in 2012. The acceptance of community medicine based training was 39 (90.7%) in 2012 and 246 (84.8%) in 2017, while the satisfaction was 41 (95.3%) in 2012 and 284 (97.9%) in 2017.

The team could conclude that community based is very important for medical students, training as most of them in both 2012 and 2017 (90.7% and 84.8%) are welcoming the community medicine based training. The satisfaction rate is very high and have even increased since inception of community based training in 2012 from 95.3% to 97.9% in 2017.

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Community medicine, Training, Placement, Undergraduate, Medical student

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