Reviewer’s report

Title: Specialization training in Malawi: a qualitative study on the perspectives of medical students graduating from the University of Malawi College of Medicine

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Reviewer: Johanne Sundby

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Review report
For the paper on Specialist Medical Education in Malawi (written while on visit to Malawi)

This paper concerns an important issue as it deals with medical graduates in a country with large demands for medical doctors, and issues of retaining the cadre in the country. Medical education in Malawi is a young discipline, and the risk of “brain drain” because of limited career options in the future is at stake.

I have a few comments to the paper.

I feel that there is a shortcoming in the introduction to the paper, namely some account of where the graduated doctors work after their degree, and what type of jobs they undertake. One dilemma is that though African medical schools train clinicians, a large proportion of the graduates either end up in cities, or end up as district health managers. There is a mismatch between needs, skills and type of jobs available. I just think the situation analysis on the prospects of work areas for medical doctors in Africa is too limited. And also what it would take to go forward to a full fledged menu of speciality: which areas are most relevant? Malawi has had an approach to establish a specialty in family medicine, and that would maybe be a way forward. This, and other concrete examples of postgrad. Programs already in the pipeline should be mentioned. Specialization is not only clinical specialization, but also family medicine and public health.

The sample size is small, and I want to know how representative the sample is – in the sense that I would like to know how large a class of student annually would be. I would also like to know who the interviewers were, just briefly.

I miss one issue that should have been part of the interview, and that is “what do the student intend to work with” immediately after graduation. This is more concrete than future ideas. Maybe you did not ask it, but then the lack of info can be substituted with information on what a typical selection of jobs newly graduated medical students go to – like where to the get jobs and how are internships organized.

I also would have liked a better understanding of future job economy of medical doctors in the public versus private systems in the country.
Under the “positive impressions” I am curious to understand how they envisage that the issue of peer supervision would work in a country like Malawi. Are there enough specialists around?

Although the paper is somewhat thin, and has missed some important areas that could have been explored better and contextualized their wishes more, the paper has some qualities that makes it interesting for those who are concerned with improving quality care in African health systems.