

## Scholarship for Africa: Are we taking it seriously enough?

In her 2009 inaugural editorial for *AJHPE*, Vanessa Burch<sup>[1]</sup> described the status of healthcare in Africa as being in a 'desperate situation' and argued that a response would be the strengthening and extending of existing training platforms, which, among others, would facilitate the emergence of a cadre of high-quality educators for the continent. It was into this space that she and her editorial team at the time envisaged a journal that would provide exposure for scholarship being produced in Africa. Such scholarship would speak to our unique context and challenges, and offer opportunities for both experienced and emerging educators to contribute to building a body of literature in health professions education (HPE).

As I engaged with the different articles that comprise the final 2017 edition of *AJHPE*, 8 years after the first edition, I was struck by the depth and breadth of the work that is being showcased. It bears testimony to the way in which the journal has indeed become an important platform for scholarly endeavour in the field, and there is much to celebrate. It is clear that our research is not only keeping abreast of global trends, including innovative approaches to teaching with technology, strengthening assessment practices, and encouraging interprofessional approaches to education and collaborative care, but it is also responding to local imperatives in resource-constrained contexts, often in creative ways. The student voice emerges strongly in these articles, and there is an interesting mix of methodologies being employed. The publications emanate from scholars located in both rural and urban contexts in Botswana, Ghana, South Africa, Uganda and Zimbabwe, and speak to undergraduate and postgraduate work, in the fields of human nutrition, medicine, nursing, occupational therapy, physiotherapy and radiography.

Notwithstanding this positive picture, critical reflection as to the extent to which our work is influencing both our practice and thinking, and possibly also practice and thinking elsewhere in the developing world, is important. How has the scholarship that has been published in *AJHPE* over the past years contributed to transforming HPE, and to what extent has it been responsive to the challenges that Burch<sup>[1]</sup> posed for us at the genesis of the journal's existence? Are we building on what others have done before us, and is this work finding traction in our classrooms and in our teaching? Of course, these questions are pertinent far beyond *AJHPE*. Van der Vleuten and Driessen<sup>[2]</sup> have previously challenged the sector to consider what HPE would look like if the evidence that is currently being generated was 'taken seriously'. Would this be reflected in how we teach and how learning happens?

In this edition of *AJHPE*, the evidence on offer takes various forms. Increasingly, for example, there have been calls to extend clinical training platforms beyond the traditional academic hospital. Joubert and Louw<sup>[3]</sup> describe how clinicians at these sites are experiencing and responding to this shift in practice. The distributed approach is also mirrored in many community-based education (CBE) initiatives. Ndlovu *et al.*<sup>[4]</sup> place the spotlight on opportunities for learning during a CBE attachment for occupational therapy and physiotherapy students in Zimbabwe.

Another key theme from Maree *et al.*<sup>[5]</sup> relates to enhancing collaborative approaches to care, as curriculum developers grapple with designing responsive interventions. Continuity of care is the educational principle underpinning a course requirement for nursing science students, investigated by Modiba.<sup>[6]</sup> Jooste and Frantz<sup>[7]</sup> explore the importance of academic leadership, particularly self-leadership, from the perspective of a group of senior academics from within and outside HPE. Their article offers insights into a complex set of preferred competencies for such leadership.

The medical elective features twice in this edition. While Caldwell *et al.*<sup>[8]</sup> discuss the elective as an opportunity for a unique educational experience, Danso-Bamfo and a group of international colleagues<sup>[9]</sup> qualitatively explore the experiences of Ghanaian students on an elective abroad.

Several articles offer practical guidance for enhancing educational practices. The importance of reliability and validity in the assessment of student learning is addressed by Mubuuke *et al.*<sup>[10]</sup> Mwandri *et al.*<sup>[11]</sup> and Siwela and Mawera<sup>[12]</sup> employ statistical analyses to motivate for the use of a 'low-cost' approach to simulation-based training and innovative approaches to teaching anatomy, respectively. Pillay<sup>[13]</sup> picks up the potential of current technology and the use of 'selfies' to foster student engagement. Finally, current debates with regard to the need for radical curriculum transformation are problematised by Witthuhn and Le Roux,<sup>[14]</sup> specifically in the context of postgraduate studies in the arena of public health. Indeed, a rich matrix of perspectives and insights.

Earlier this year, *AJHPE* changed its look and added the tagline: 'Scholarship of Africa for Africa.' It is exciting to see how the research included in this edition embodies this ideal. Our ongoing endeavour should be to generate ever-more robust evidence to strengthen what we do. Either way, let's be sure to take our work seriously.



### S van Schalkwyk

Centre for Health Professions Education, Faculty of Medicine and Health Sciences, Stellenbosch University, Cape Town, South Africa

scvs@sun.ac.za

- Burch VC. Does Africa need another journal? *Afr J Health Professions Educ* 2009;1(1):2.
- Van der Vleuten CPM, Driessen EW. What would happen to education if we take education evidence seriously? *Perspect Med Educ* 2014;3(3):222-232. <https://doi.org/10.1007/s40037-014-0129-9>
- Joubert S, Louw VJ. Clinical undergraduate medical student training at Kimberley Hospital, Northern Cape, South Africa: A test of fire. *Afr J Health Professions Educ* 2017;9(4):180-184. <https://doi.org/10.7196/AJHPE.2017.v9i4.836>
- Ndlovu T, Chikwanha TM, Munambah N. Learning outcomes of occupational therapy and physiotherapy students during their community-based education attachment. *Afr J Health Professions Educ* 2017;9(4):189-193. <https://doi.org/10.7196/AJHPE.2017.v9i4.958>
- Maree C, Bresser P, Yazbek M, et al. Designing interprofessional modules for undergraduate healthcare learners. *Afr J Health Professions Educ* 2017;9(4):185-188. <https://doi.org/10.7196/AJHPE.2017.v9i4.853>
- Modiba LM. Experiences of South African student midwives in following up on the care of a pregnant woman from pregnancy until 6 weeks after delivery. *Afr J Health Professions Educ* 2017;9(4):194-198. <https://doi.org/10.7196/AJHPE.2017.v9i4.730>
- Jooste K, Frantz J. Self-leadership traits of academics to conform to a changing higher-education environment. *Afr J Health Professions Educ* 2017;9(4):199-202. <https://doi.org/10.7196/AJHPE.2017.v9i4.823>
- Caldwell RI, Inglis AC, Morgan M, Rasmussen K, Aldous C. The medical elective: A unique educational opportunity. *Afr J Health Professions Educ* 2017;9(4):162-163. <https://doi.org/10.7196/AJHPE.2017.v9i4.883>
- Danso-Bamfo S, Abedini NA, Mäkiharju H, et al. Clinical electives at the University of Michigan from the perspective of Ghanaian medical students: A qualitative study. *Afr J Health Professions Educ* 2017;9(4):203-207. <https://doi.org/10.7196/AJHPE.2017.v9i4.827>
- Mubuuke AG, Mwesigwa C, Kiguli S. Implementing the Angoff method of standard setting using postgraduate students: Practical and affordable in resource-limited settings. *Afr J Health Professions Educ* 2017;9(4):171-175. <https://doi.org/10.7196/AJHPE.2017.v9i4.631>
- Mwandri M, Walsh M, Frantz J, Delpont R. The use of low-cost simulation in a resource-constrained teaching environment. *Afr J Health Professions Educ* 2017;9(4):168-170. <https://doi.org/10.7196/AJHPE.2017.v9i4.829>
- Siwela R, Mawera G. Medical students' perspectives on the anatomy course at the University of Zimbabwe. *Afr J Health Professions Educ* 2017;9(4):176-179. <https://doi.org/10.7196/AJHPE.2017.v9i4.822>
- Pillay JD. Selfies 2015: Peer teaching in medical sciences through video clips – a case study. *Afr J Health Professions Educ* 2017;9(4):164-167. <https://doi.org/10.7196/AJHPE.2017.v9i4.803>
- Witthuhn J, le Roux CS. Factors that enable and constrain the internationalisation and Africanisation of Master of Public Health programmes in South African higher education institutions. *Afr J Health Professions Educ* 2017;9(4):208-211. <https://doi.org/10.7196/AJHPE.2017.v9i4.839>

*Afr J Health Professions Educ* 2017;9(4):161. DOI:10.7196/AJHPE.2017.v9i4.1033