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Our MEPI project is concerned with training our health staff on how to deal with HIV associated malignancies. We have three main aims and the first aim is to train a few scientists in how to carry out HIV associated malignancy surveillance. For this task we are training two people at a Masters' of Public Health level at Johns Hopkins University in Maryland. We chose two nurses to do an MPH at Johns Hopkins School of Public Health. When they finish we hope they will help us to map out the HIV associated malignancies in Malawi.

The second aim is to train pathologists to help in the management and diagnosis of HIV associated malignancies. We are training two pathologists at the University of KwaZulu-Natal. Up to this time Malawi has had three pathologists in active service. The fourth pathologist retired from active service. Among the three in active service one is not so good at histological diagnosis. There was thus only one competent histopathologist. So we thought that we should train two more pathologists, and we are fortunate to receive one who has just completed training from South Africa in the last few months. So by the end of MEPI we hope that we will have at least five pathologists in the country which will be a huge increase from what we have right now.

We are also training histology and cytology technologists. By the end of MEPI we will have trained five histology and cytology technologists to help the pathologists in the diagnostic process.

We have also embarked on training nurses, pharmacists, pharmacy technicians on how to handle cytotoxic drugs safely and appropriately. Up to this time we never had the training in this kind of stuff. They would handle drugs without protection for themselves and for their patients. So through the MEPI we will have trained close to 20 nurses, pharmacy technicians and other staff in how to handle cytotoxic drugs.

We have also trained physicians, clinical officers on how to do biopsies of what we think are Kaposi's sarcoma lesions safely.

We established a palliative care clinic at my hospital, Queen Elizabeth Hospital in Blantyre, Malawi. We have been looking after patients without trained staff. We have one doctor that has been trained at Makerere University in palliative care but the nurses helping her were untrained. So through the MEPI we have trained two nurses at certificate level on how to manage end of life and chronic diseases appropriately. We have also enrolled one nurse at a diploma level in palliative care, and one nursing officer at the diploma level in palliative care. We hope these two individuals when they have finished their diploma they can go on to do a BSc. in palliative care. So by the end of MEPI we will have at least five people trained in how to look after our patients on issues related to end of life and chronic diseases in Malawi.

We did not have a laboratory at Queen Elizabeth Hospital to do histology. The laboratory that was doing histology is at the College of Medicine. It is mainly used for training of students at undergraduate level. It is away from the hospital and the doctors providing the histology service have in most cases been reluctant to provide the services in time and appropriately. So through the MEPI we have created a laboratory at Queen Elizabeth Hospital. We have procured equipment and we have engaged a retired pathologist to provide service to the patients so that we can get timely results to manage patients.

The biggest challenge has been the issue of placing people in training institutions. As you must have heard from my introductory remarks, most of the training has

to be done outside Malawi, so South Africa, Makerere, the US and other places. The registration of people with the Health Professional Council of South Africa for them to engage in training has been the biggest hurdle that we have faced. For example the pathology students that are at the University of KwaZulu-Natal sent in their applications in August last year. By March this year they were not yet registered. We had to send them unregistered to KwaZulu-Natal to pursue registration while there. The cytologist and the histology technologists that we would want to train, only one has managed to register and is gone. The other two that are supposed to have gone have not yet gone. We are still chasing the registration process. So this has been our biggest challenge.

I am a physician and as a physician I rely a lot on pathological services for me to manage my patients well. The greatest excitement has been to bring back the retired pathologist into service to help improve diagnostic services at my hospital as well as at our sister hospital at Kamuzu Central Hospital in Lilongwe, because he is going to provide service to both hospitals. So that has been my greatest excitement in this whole process.

Pathological services were neglected, especially anatomical pathology services were neglected. Now the fact that we advertized for students to undertake pathology training through the MEPI, we saw the ministry also getting interested. And through the global fund they also provided scholarships for two more pathology students to be trained in South Africa. And only this morning before I came here I was reading through my emails and one more student is interested in doing pathology services and I have to find where to get resources to train her. And she is not the only one. I have had contact from other students wanting to do pathology. Now it seems to have a snowballing effect. The fact that we introduced some students to the training in pathology, many more seem to be interested to do so. So this is very exciting for me. So in ten years we will move from three pathologists probably to ten or eleven pathologists for the country.

The library is critical in any training as a source of information for the trainees and for the trainers and the like. And these days the library, virtual library is what we

will be looking for so that we can access the information from our desks instead of going to the physical building to get resources from there. So what I didn't say actually in my introductory remarks is that within the MEPI we have put in some money for curriculum development for the training of pathologists at the post graduate level. My hope is that once the curriculum is set then the people we are training will become a nucleus for training of pathologists locally in Malawi. And we hope we will have resources for pathologists from South Africa to come and accredit our laboratory for the training of pathologists.

Now the library will be critical when we start training our own pathologists to make sure that the trainees and the teachers can get up-to-date resources for the training and for the learning.

We have got some resources from the Scottish government, which brought us a big server to keep such kind of resources so that they can be available on intranet.

My passion for educating health workers basically stems from the fact that I saw it as a 19 year old when my brother was suffering from kidney disease and there was no help locally in Malawi to manage him. He had to be airlifted to South Africa for care. That's when I developed the passion for looking after people.

When I trained in Nairobi and returned to Malawi there were only two of us junior doctors and I thought it was not appropriate that we could train two people a year for a country that at that time had a population of 8 million. That's why I joined the medical school to be part of a team of people that we would have in the field so that we could clone ourselves into more of ourselves. So yes I am passionate about training people. Not only doctors, training of nurses, training of laboratory technologists and any other health workers and when I was dean I introduced in the College of Medicine a physiotherapy program. I also introduced a health management program. I improved the laboratory technology program and also undertook a review of our MD program. So I have been passionate about training not only physicians but all cadres of staff because we work as a team. Without a team a physician is useless. Without a team a nurse is useless. So we

have to recognize that we can only be effective if we work in teams. So I am not trained as an educationalist myself. I don't have any educational qualification. But I have learned on the job how to be an educator.

MEPI has taught me how to network better. I'm sending people many, many places and that has helped me to network better. But it has also taught me how to persevere. If you don't get a response, keep on banging on the door. So that has taught me perseverance. I was not a very patient person. I am a goal oriented person and if things don't work out within a certain time frame I get very frustrated. But MEPI has taught me to be a little bit more patient to get the results that I want. But it has also taught me that if you provide opportunities people are there to grab the opportunities. Because previously we never thought people were interested in pathology training but as I said earlier there is a multiplier effect. We can see people are hungry to get into pathology training.

Yes when you because of the difficulties I am having to register people in South Africa I have had to contact other PIs from Zambia and from Nairobi to see whether their institutions train these cadres. I am still waiting to get a response from, not from the PIs but from the people that do the training.

For us in Malawi, ours is a pilot project. But we are very thankful to NIH that we although we did not get the programmatic award they still thought it was useful for our pilot project to go forward.

Yesterday I was talking to one of the CDC people and he was saying how and when we would get a programmatic award because they think what we are doing is very exciting and they thought it could be a trigger for better things to come. So we will wait and see.

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# Prof. Johnstone Kumwenda: University of Malawi, UNIMA, Internal medicine

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<https://youtu.be/A-pCUtY-2yY>

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