

Increasing the number of doctors in Africa: an update from the ECSACOP programme

As part of RCP Global's latest East, Central and Southern Africa College of Physicians (ECSACOP) update, we asked one of the programme's 24 current trainees – **Dr Yannick Lombe** – to discuss his journey so far.

Tell us about your background: where you grew up; memories of family and school ...

I come from a family of seven children: four boys and three girls. I spent most of my adolescent life on the Copperbelt (a region in the south of Zambia), where I attended pre-school, primary and secondary school. I come from a humble family where my dad worked for Mission Press, a Catholic printing company. He did not make much money, but it was enough to put food on the table and send us to school. My mum, on the other hand, was a full-time housewife whose primary responsibility was to take care of us. We might not have had every every luxury when we were growing up, but my dad always valued education. He gave us the opportunity to go to school, and I will forever be indebted to him.

What made you want to be a doctor?

I did not want to be a doctor when I was growing up; I always wanted to be in the entertainment business. Unfortunately – or fortunately depending on how you look at it – African parents don't accept such a career.

ECSACOP operates training centres in Kenya, Malawi, Tanzania, Uganda, Zambia and Zimbabwe.



It was probably a blessing in disguise. I vividly remember my maternal grandmother always calling me 'doctor' at a time when I didn't particularly want to be one. However, while I performed quite well in biology and chemistry, I got average results in mathematics. This meant I was unable to study engineering, and medicine became my next option.

Who have been the inspirational characters in your life?

Growing up, my dad was the person I looked up to most, as he always tried to give us an education – even under difficult circumstances. In my clinical practice, there has been Dr Silumbe, who introduced me to clinical medicine. I would also like to acknowledge Dr Yawwa (head of Department for Medicine) and Dr Nsokolo (consultant physician) for their clinical and administrative mentorship.

At ECSACOP, the trained consultants have been instrumental in my academic progression, and they were heavily involved in my admission into the programme itself. Their approach as mentors and supervisors is so refreshing compared with the older university approach, where medical school was like the military, with a few clinical mentors who were hostile on the ward.

How do you see your career unfolding?

I love being a doctor and I would still choose a career in medicine if offered the choice again. It brings me great joy when I see patients recover, because every patient has a father, mother, sister and brother related to them, and medicine affects all of these people as well. ECSACOP has provided an opportunity for people like me to specialise and train to become physicians and use our much-needed expertise to save people in our communities. I know ECSACOP is still in its infancy and there are some challenges, but the level of commitment, planning, ambition and



professionalism exhibited by the college shows me that it's headed in the right direction.

What difference do you want to make?

After completion of my training with ECSACOP, I would like continue to offer my services and mentorship to both the people in my community and clinicians aspiring to be physicians in the future. Zambia has seen a rise in non-communicable diseases in the past few years, and so I would love to specialise in endocrinology or nephrology if an opportunity arises, and take up research to strengthen health systems in my country. My other option is to pursue a career in infectious disease, as Zambia continues to be hit by HIV and HIV-associated conditions. Finally, as an ECSACOP fellow I wish to graduate with good clinical skills, knowledge, leadership skills and also foster research to improve healthcare – not only in my country – but across the rest of the east, central and southern African region. ■

Established in December 2015, ECSACOP is rewriting the way postgraduate medical education is delivered and assessed in east, central and southern Africa. With a common curriculum and standardised training methodologies, the college's postgraduate medical qualification will be accepted as gold standard throughout the region. The RCP is supporting ECSACOP's Council by providing mentorship, technical support and access to external experts to advise on specific challenges faced.