

My year in Malawi

I am currently a West of Scotland General Surgery Trainee and I chose to take a year out of training to volunteer in Malawi. This was due to a long-time wish to be involved with global healthcare and use the skillset I have developed as a doctor.

Malawi's healthcare system faces significant challenges with a high burden of disease and limited resources which impacts healthcare delivery and patient outcomes. One of the most pressing issues is the shortage of healthcare professionals, including doctors, nurses, and hospital specialists. Malawi has one of the lowest doctor-to-patient ratios in the world, with only a handful of physicians serving thousands of individuals. Compounding this shortage is the unequal distribution of healthcare workers, with the majority concentrated in urban areas, leaving rural regions underserved. As a result, many Malawians, particularly those in remote communities, face significant barriers in accessing healthcare services. The lack of transportation infrastructure further exacerbates this issue, as patients often have to travel long distances to reach healthcare facilities, leading to delays in seeking care and worsening health outcomes. Surgical care is often hampered by inadequate infrastructure, a scarcity of medical supplies, and intermittent access to essential utilities like water and electricity. By collaborating with local healthcare providers and organisations medical professionals from around the world can play a role in supporting Malawi's healthcare system.

I spent my time working at Mzuzu Central Hospital as well as doing surgical outreach at smaller hospitals including Ekwendeni and Embangweni. In Mzuzu Central, I was actively involved in theatre lists and ward rounds as well as taking 24-hour on-calls. I was exposed to a spectrum of pathologies not normally encountered in the UK such as typhoid related bowel perforations. Unfortunately, patients tended to present late and severely unwell with advanced disease. Managing these presentations in a resource-limited environment was challenging and greatly improved my clinical skill. Spending time in theatre exposed me to a wide variety of cases not normally managed by general surgeons in the UK. This required me to develop operative skills in other areas such as paediatrics, urology, neurosurgery, and plastics. I was fortunate to work alongside experienced and skilful consultants who were willing to train and guide me through the challenges encountered. This experience significantly broadened my surgical expertise and enhanced my adaptability as a surgeon.

At the smaller hospitals, we provided elective surgical services in hospitals which normally did not have general surgeons. This often allowed patients to access treatment closer to home and reduced transportation costs. Additionally, this helped alleviate some strain on Mzuzu Central Hospital, where waiting lists were long, and elective surgeries were often cancelled due to the high volume of emergencies.

I had the opportunity to work alongside various other medical doctors, clinical officers, nurses and students. As well as learning and developing my own skills, I also spent time teaching others. This experience reinforced the importance of knowledge sharing and capacity building in addressing healthcare challenges in resource-limited settings. I observed various visiting medical professionals

successfully integrating into local teams and providing support while not taking away training opportunities from local clinicians.

My experience in Mzuzu highlighted the importance of adaptability, resourcefulness, and collaboration when working in a low-income country. Working in various hospitals exposed me to a diverse range of cases and pathologies, further enhancing my clinical acumen and operative skills.

Volunteering as a doctor in Malawi provided me with invaluable insights into the complexities and challenges of healthcare delivery in resource-limited settings. I am grateful for the opportunity to contribute to Malawian healthcare and to learn from the healthcare workers I worked alongside. It is a journey that has left an indelible mark on my professional and personal life, inspiring me to continue being involved in global health in the future. I am grateful for the support I received from the Keith Thompson Travel Grant which helped make my experience possible.

Rachel John-Charles

West of Scotland Higher General Surgery Trainee

Currently Out of Programme Clinical Research Fellow