SHORT COMMUNICATION

RECOMMENDATIONS FOR DENTAL EDUCATION AND TECHNOLOGY ENHANCED LEARNING (TEL) IN MALAWI: REPORT OF A ROUND TABLE DISCUSSION

D Schönwetter¹

¹Faculty Development and Dentistry Computing Services, University of Manitoba, Winnipeg, Manitoba, Canada

Key words
Malawi, Technology Enhanced Learning, Dental Public Health, Leadership, Open Educational Resources

Introduction
This report summarises the Malawian roundtable discussions on 12th May 2012 held at the 10th Colloquium on Innovations in Education, Brescia University, Italy. The specific goal was to review the special circumstances for TEL implementation in Dentistry in Malawi and provide recommendations.

Present
Prof Nairn Wilson (Chair) (King’s College London)
Dieter Schönwetter (Rapporteur)(University of Manitoba)
Simran Chana (King’s College London)
Rosemary Coates (Curtin University, Western Australia)
Charlie Ding (King’s College London)
Jenny Gallagher (King’s College London)
Lynn Johnson (University of Michigan)
Marta Kobus (King’s College London)
Brian Millar (King’s College London)
Corrado Paganelli (University of Brescia)
Caroline Pankhurst (King’s College London)
Barry Quinn (King’s College London)
Maja Sabalic (University of Zagreb)
Lakshman Samaranayake (University of Hong Kong)
Suwedi Sumani (Queen Elizabeth Hospital, Malawi)
By Skype: Jessica and Oliver Jefferis, Philip Poulsom
Support staff: Marilyn Clark (Figure 1)

1. Recommendations for Malawians: Principles
A collaborative approach between Malawi and stakeholders with expertise such as Universities, Leadership groups and Open Educational Resources for Africa will allow successful implementation of TEL (Figure 2).
The following points summarise the recommendations:

- Identify dental champions
  - Dr. Lepanda requires a clear vision and leadership.
  - Clarity in communicating this.
- Ensure a strong supporting team
  - Suwedi Sumani and others.
  - Clarity in communicating this.
- Identify the philosophy of care first before proceeding and including a long-term vision of your dental workforce.
  - not Western, but rather for Malawian’s needs
- Then develop the dental system (technical) to support this philosophy.

2. Recommendations for Malawians: Resources and Infrastructure

- Specialized content areas needs
  - to be conducted by dental therapists and current surgeons in hospital
  - identified priority areas of specialty required by the population
- Identify the current consumable resources/items
  - i.e., for restorative procedures
- Identify the current infra-structure
- Identify the support that is available.
- Basic sciences teaching to be conducted by the medical school
- Basic face-to-face teaching can be completed by the Dental Therapy teachers

3. Recommendations for TEL Project Leaders

- Work in partnership with the Malawian champion and team under the direction of their philosophy and conduct a needs assessment.
- Conduct a needs assessment in partnership with the Malawian champion, Dental Therapy team and surgeons
  - Need to identify which specialized content areas are required
  - Enhance the learning of Dental Therapy (especially the good candidates) for top-up training
  - Retrain medical surgeons to move into Maxillofacial Surgery.
  - Prioritise areas of need in teaching specialized content:
    - Dental materials
    - Visit current models conducted in neighbouring countries and assess for potential fit and guidance for future.
      - Ghana, Zimbabwe, also Brian Millar in Distance Learning.

4. Other Ideas

- Link to Open Educational Resources for Africa – created by African dentists (Lynn Johnson has specific expertise here).