

Advancing Medical Education in Nigeria... The Ajobor Legacy

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ABSTRACT

Prof. Linus Ajobor, one of the renowned pathfinders of the Medical Profession in Nigeria, left indelible footprints in the medical profession especially in the field of Obstetrics and Gynaecology. He was an astute clinician, an excellent teacher and a disciplined administrator, qualities which earned him many positions and awards. Of all his many good qualities and skills, he was most outstanding as a teacher and a mentor. These qualities caused him to influence the careers of many doctors and earned him many mentees who in turn decided to honour him while alive with a lecture series called “FRONTIERS IN MEDICAL EDUCATION”. This article reviewed all the published and presented lectures in this series given at the Annual General Meetings and Scientific Conferences of the Society of Gynaecology and Obstetrics of Nigeria (SOGON) from 2015-2023 in the order of medical training. It begins with the undergraduate to internship and ultimately to various aspects of the postgraduate training, to portray the diversity yet inclusivity of medicine, all of which Prof Ajobor actively contributed and partook in. It highlights the state of medical education and proposes models to improve medical education in Nigeria based on the research and recommendations of the presenters.

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Prof Linus Nwachukwu Ajobor, widely acclaimed as one of the “Doyens” of Obstetrics and Gynaecology in Nigeria left indelible footprints in the profession. Born on the 23rd of September, 1932, in Umunede, Delta state, the United Kingdom-trained medical doctor is without doubt one of the founding fathers of excellent delivery of obstetric and gynaecological services in Nigeria.

He began his medical training at the University of Bristol where he graduated in the year 1960. He interned in the United Bristol Southmead and Frenchay

Hospitals, Bristol and Weston-Super-Mare Hospital Groups in the United Kingdom.¹

He then proceeded to become a member of the Royal College of Obstetricians and Gynaecologists in 1966, He was a fellow of the West Africa College of Surgeons, a Fellow, of the National Postgraduate Medical College of Nigeria and a Fellow of the International College of Surgeons.¹ He also obtained a diploma in advanced techniques in the management of fertility in the USA in 1975. He started his career as a senior lecturer at the University of Ibadan before transferring his service to

the new medical school at the University of Benin in 1972 where he became a professor in 1976.²

Prof Linus Ajobor was a major contributor to the training and establishment of the practice of Obstetrics & Gynaecology in Nigeria and in Benin City in particular. He was known as an exceptional teacher of teachers. Prof Linus N. Ajobor was a visionary teacher who laid the foundation of medicine and emphasized its correct applications to the sick based on the principles of respect and the sanctity of human life.³ He taught and examined many medical students at undergraduate and postgraduate levels.

A man of strong character, steadfastness and integrity, Prof Linus Ajobor laid an exemplary standard in administration, community service, philanthropy, and professional practice. He developed and left an enduring legacy in Medical Education. This was very evident in his simple teaching methods and engaging ability to simplify with his ground-breaking research works which informed many interventions and provided a better understanding of the peculiar nature of Obstetrics and Gynaecology within the context of sub-Saharan Africa.¹ Education was Prof. Ajobor's passion and he amply demonstrated this passion when he proposed and led the creation of a library and educational resource centre at the SOGON secretariat to assist doctors in training in Obstetrics & Gynaecology.⁴ This was made possible through a donation by one of his mentees, Dr. Peter Odili. (Former Governor, Rivers State). Prof. Ajobor was an education enthusiast who committed all resources at his disposal towards advancing education in the medical profession.⁴

His administrative prowess distinguished him and was reflected in the various positions he held in his over 54 years of active service. The institutions that benefitted from him include the University of Ibadan; the University of California in San Diego, USA; Washington University, St. Louis, Missouri, USA; the University of Birmingham, England; and the University of Benin, Benin City, Nigeria. The positions included educator, researcher and consultant obstetrician and gynaecologist, Head of Department, the Obstetrics & Gynaecology department, University of Benin Teaching Hospital, which he developed to become one of the leading Obstetrics and Gynaecology departments in Nigeria.

He was the first substantive Chief of Obstetrics and Gynaecology at the Prince Abdullah Bin Abdul-Aziz Hospital, Bisha, Kingdom of Saudi Arabia where he structured and administered an active department and established a sustainable medical education postgraduate training programme.¹ It's no wonder that, in appreciation of his tremendous contributions in various spheres of life, he was awarded the United Kingdom and Saudi Arabian speciality board diplomates to international trainees. He also received the Rotary International Award for

excellent service delivery and naming a maternity ward after him at the University of Benin Teaching Hospital – the Linus Ajobor maternity ward.

His reputation for excellence earned him many joint collaborations with the Pathfinder Foundation USA and many other international funding agencies which culminated in his becoming the Director of fertility-related projects at the University of Benin and the University of Benin Teaching Hospital.¹

These attributes must have contributed to his election as the 11th president of the Society of Gynecology and Obstetrics of Nigeria (SOGON) from 1999-2002. This tenure has been credited as a major turning point in the history of the society. It is said that his tenure brought major visibility to SOGON.

Following his retirement at the University of Benin, he maintained practice and training of medical students at the Igbinedion University even till the age of 85 as his knowledge and vibrancy greatly belied his age. Till his death, he was the Chief Medical Director and Consultant Obstetrician and Gynaecologist at the Anita Summit Hospital and Centre for Reproductive Medicine and Infertility, in Benin City, Edo State, Nigeria.

Because of his strong desire to ensure a widespread of effective Obstetrics and Gynecology delivery, he would forever be remembered for his impact on the growth of SOGON which earned him the SOGON Special Golden Jubilee award in 2015 and many other awards such as the Rotary Foundation Meritorious Award, Honorary Doctorate degree of Science of the International Biographic Center and the officer of the order of Niger (OON), etc.

Prof. Ajobor had a balanced work-family life and was happily married to Mrs. Christy Ajobor. The union has been blessed with children and grandchildren. Prof. Ajobor was an amateur floriculturist as his love and careful tenderness for flowers showed in the beautiful display of flowers arrayed in his personal residence. He was also a lover of sports who watched and played football as a means of relaxation.

In addition to teaching, Prof Ajobor was resolute in mentorship as he mentored a wide range of very prominent medical personnel and professors. He was known to have a distinct and unique touch with each mentee as he impacted their professional and personal lives. Due to his unwavering support for academic and professional excellence, and his immense contribution towards building and expanding excellent education delivery in the medical sector in Nigeria, his mentees and beneficiaries pulled resources together and decided to honour him while alive with a series of lectures titled "FRONTIERS IN MEDICAL EDUCATION" This was held in appreciation of his transcendent tutelage and to bring to limelight his contributions to Medical Education in Nigeria. All lectures under this series were intended to

portray various areas which showcased the diversity yet inclusivity of the medical profession, all of which Prof. Linus Ajobor actively participated in. There have been till 2022, a total of 7 lectures by very distinguished academics. These are summarized below.

Advancing Medical Education in Nigeria: A Summary of “Series on Frontiers in Medical Education”

In the words of William Osler, medical education is neither a college course nor a medical course but a life course.^{1,5} Over the years, the concept of medical education in Nigeria has evolved and increased in importance as more medical schools have been established and more medical doctors are produced.

Medical training, which is related to the practice of being a medical practitioner began full operation in Nigeria in 1948 and graduated its first set of doctors in 1960, albeit with London degrees.⁴ Coincidentally, this was also the end of Prof. Ajobor’s undergraduate medical school at Bristol. He returned to Nigeria six years later and began active teaching when medical education was still trying to gain structure in the country. Prof Ajobor played a major role in establishing medical schools at Ambrose Alli University and Delta State University where he served as Chairman of the planning committees.^{4,6} Prof Ajobor was also one of the doctors who invested and established postgraduate medical education in Nigeria.

Medical education includes the initial training to become a physician (medical school) and the additional training thereafter (residency, fellowship and continuing medical education). Across the various levels of medical education, Nigeria has experienced a growth in structure and standard as Nigerian doctors need not go out of the country for internships or postgraduate education. It has thus produced a great amount of well-qualified human resources.^{3,7}

The Frontiers of Medical Education series, which was held in his honour, had the aim of improving medical education by providing a platform for ventilating contemporary issues in medicine and related disciplines through lectures, publications and debates.³ These lectures revealed the history of the various aspects of medical education, the state of medical education and proposed new methods to improve medical education in Nigeria. Though not in the order of presentation but in order of how the curricula work, this summary intends to expound recommendations of each lecture as they are all veritable tools in the advancement of medical education in Nigeria. It is worthy of note that this initiative is the very first for a living member of SOGON.

Improving Undergraduate Medical Education in Nigeria: Insight into the Past.

This lecture, given by Professor Akinyinka Omigbodun as the fourth lecture in the series, expounded the state of medical education in Nigeria with snippets of its history and recommendations for a better education system. It dealt with the foundation of medical education – undergraduate training.

Nigeria has made awe-inspiring progress over the years. However, there appear to be a few issues which need to be addressed as growth in undergraduate medical education takes place. The first of these as expounded in the lecture is the increase of student intake which is not commensurate with the available human resources and facilities. Another is the missing link of the improvement of the educational and training skills of tutors in order to sharpen their teaching and research skills. At present, there is no program on medical education in the country. The irregular and unplanned curriculum review is another challenge. The age-long sole reliance on access to living patients to learn basic skills of physical examination and the dearth of local guidelines on the management of locally relevant conditions which should be usable teaching tools for undergraduate education were also identified as shortcomings.

Possible solutions included the gearing of medical education towards meeting perceived national needs and the regular needs assessment, planning and implementation for curriculum and establishment of medical schools. This could be made prerequisite for accreditation. Others include the harmonization of minimum standards required for medical schools in Nigeria by the Medical and Dental Council of Nigeria (MDCN) and the National Universities Commission (NUC), increased investment in simulation laboratories and equipment and the introduction of intercalated degrees to produce medical scientists who will be core researchers that address the nation’s specific health needs. Specialist societies such as SOGON should scale up templates for the preparation of practice guidelines useful to clinical teachers and students.

Internship is an Important Component of Medical Education

This was the 2nd in the series and was presented by Emeritus Professor Nimi Briggs (of blessed memory). Internship is the first and approved gateway to actual medical practice and further training. With well-analyzed data, Prof Briggs expounded on the state of medical internship in Nigeria.

The lack of sufficient placement spaces to accommodate the increased turnout of graduate doctors

and the inadequacy of accommodation for this group of medical graduates who should be housed close to the clinical areas were considered major setbacks to effective internship training programmes. The decreasing supervision by mentors, incessant strike actions in the health sector and declining quality of service indicated by shortage and epileptic supply of materials were also mentioned. The absence of a clear curriculum and standards for the internship period left the supervision at the whims and caprices of the supervising consultants.

The commonest factors that seemed to account for these concerns included the lack of adequate planning and management of internship program by MDCN and the reluctance of interns to work in some parts of the country with a preference for the big teaching and general hospitals often located in metropolises. Recommendations included prevailing on the government to address poor infrastructure, rudimentary health care services and grinding poverty and insecurity. Attempts could be made to correlate the production of medical doctors to the demand for these professionals and possibly, the available spaces. Another suggestion was the incorporation of the 1-year internship into the curriculum of medical students such that successful students could be absorbed into the hospital of training for internship on completion of undergraduate study. Final certificates could be issued after this period. Other suggestions include improved monitoring of the supervision of the housemen and the exemption of these from strike actions.

Medical Education in the 21st Century- What Has Happened to Medical Apprenticeship

This lecture which fell as the 6th in the series was presented by Prof Dilly Anumba. The lecture highlighted the current state of medical education in Nigeria in the 21st century with an emphasis on medical apprenticeship. Medicine has been historically built on the apprenticeship model.⁸ However, this has undergone significant modification with improvement in knowledge. It brought to the limelight its drawbacks and provided recommendations for the scaling up of medical apprenticeships in Nigeria. There is the need to scale up mentorship as this is key to producing well-bred medical professionals.

Post Graduate Medical Education (PME) in Nigeria: Past, Present and Future

This lecture, which was the first in the series, was presented by Professor Friday Okonofua. PME is an arrangement of learning activities to equip doctors with relevant knowledge and competencies in specific

specialty areas after completion of undergraduate training. With the local development of PME in Nigeria, a larger number of doctors have been able to further their training at an affordable rate with minimal disruption to family growth and life, thereby increasing the number of competent human resources and correcting the deficiency by doctors who trained abroad and never returned.

There however has been a recorded drop in the standard of PME in Nigeria. This is believed to be due to poor funding and the lack of formalization of PME in teaching hospitals that lack the basic ingredients for postgraduate medical training and research. He also decried the non-involvement of Universities in PME, the lack of internationalization of the local PME programs and the lingering controversy of fellowship degrees not being equivalent to Ph.D. - a problem that seemed almost peculiar to Nigeria.

He recommended a review of PME in Nigeria to include deeper research components and training in the medical sciences. This could be achieved by integrating fellowship training with PhD degrees by creating linkages with universities. There is also the need for increased funding of PME, the development of Monitoring and Evaluation frameworks with process and outcome indicators of PME in Nigeria and the re-training of trainers and examiners in PME to use standard teaching methods, including ICT.¹

Training the Future Trainer- The Double- Barrel Post Graduate Medical Training Model: A Pathway to The Development of Sustainable Obstetrics and Gynaecological Specialists in The West African Sub-Region

In this 3rd lecture in the series, Professor Joseph Adinma opined that the training of obstetrics and gynaecology specialists had evolved over the world with new modifications to suit societal changes. However, Nigeria had made little or no change in the pattern of teaching and curriculum with the only notable change being a little modification to the assessment of the examination.

In advancing residency training in obstetrics and gynaecology to meet the health needs of the people, Prof Adinma suggests a double barrel training model. This model requires that a resident who is successful at the primary of the qualifying examinations in obstetrics and gynaecology, should undergo residency training in an accredited health facility and simultaneously undergo training towards M.Sc +/- PhD in his/her sub-specialty of choice in a university duly accredited to run the specialty degree. In his opinion, the benefits of this model include the development of a versatile medical academic/ researcher and a well-skilled clinician. This will create

the establishment of fully equipped sub-specialty health care services, research and production of trainers.

Postgraduate Medical Education in Nigeria- The Next Level

This lecture, which was the 5th in the series, was given by Prof Mutairu Ezimokhai. He also went down memory lane given his experience as a former faculty secretary for Obstetrics and Gynaecology and his international experience in postgraduate residency training. He harped on the need for institutionalization of subspecialty training as part of the residency training to keep pace with global trends. There was the need to collaborate with centres abroad to assist in training of subspecialists who will in turn be the cornerstone of indigenization of training in subspecialties in Nigeria.⁹ While Nigeria still seems to grapple with basic maternal mortality, that in itself should not relegate much-needed training and practice in sub-specialization as this was the basis for a lot of medical tourism in Nigeria. He opined that those in the diaspora should be courted as they will have a strong role to play in this regard.

Clinical Facilitation Skills for the Obstetrician-Gynaecologists: Matters Arising/The Role of Alumni in Medical Education

As the 7th in the series, this lecture Presented by Prof Oladipo Otolorin covered two main areas, which include Clinical facilitation and the Role of alumni. He expounded on the importance of effective clinical facilitation and its effects on the career choice of medical students. He explained that teaching methods need improvement as many academic staff do not have formal training in teaching skills. Clinical facilitation should be carefully organized and involve an introduction, facilitation and summary. It becomes effective when it involves the use of questioning, audiovisuals and feedback. It should be a mixture of learning activities such as presentations, simulation practice, small group work etc.¹⁰ This creates a learning environment that can impact the career choice of medical students and determine their attitude and involvement in the alumni association.

In addition to creating a conducive learning environment, it is also important that we adopt the method and approach of Prof Ajabor and actively participate as alumni by sustaining the reputation of the institution certificate, bridging the inadequate government subvention for tertiary education, show gratitude for a good education and leave a legacy.

In Memoriam

Prof Ajabor died on the 8th of August, 2022. However, the 7th lecture by Prof Otolorin which was delivered in 2022, a few months after the death of Prof Linus Ajabor, had been planned for 2021, but had to be postponed due to the Covid pandemic and its attendant effects. It was opined that subsequent lectures will have to be memorial lectures.

Remembering Prof LN Ajabor. Celebrating Intergenerational Legacy of Mentorship

This was given by Dr Ehigha Enabudoso as the 8th lecture in series in November 2023. It was aimed at bridging the divide between the initial series and the memorial lecture series by speaking on the life and times of Prof LN Ajabor, providing a hint into the previous lectures, giving a peep into mentorship as exemplified by Prof Ajabor and providing an insight on the way forward including a possible generational shift in the outlook of the lectures.¹¹ It dwelt extensively on the value of mentorship in medical education. In the light of the increased societal stress and the attendant effect on the medical trainee, the need for the institution of guidance counseling and psychotherapeutic services to assist the challenged trainee cope with examination stress, failure and emotional challenges was highlighted. The distinguished lecturer also traced the lineage of the mentees of Prof Linus Ajabor to a third/fourth generation to which he belonged and then he was now having mentees that could be likened to a fourth/fifth generation of the Ajabor mentees.

CONCLUSION

Professor Ajabor was one of the pathfinders of medical education in Nigeria and these lecture series held in his honour evidently prove that Prof Ajabor contributed immensely to the development and success of medical education in Nigeria. Though, now physically absent, Prof Linus Ajabor lives on as his legacy is evident, and his impact is trans-generational.

This lecture series successfully reminded the medical community of his zeal towards medical education in Nigeria. Therefore, to ensure a continued impact and an excellent standard, it is important that we consciously and deliberately continue to develop medical education with every organ playing its roles effectively. It is thus without doubt that these recommendations proposed by seasoned teachers and clinicians will advance medical education in Nigeria and make it a point of reference for education systems all over the world.

Professor Linus Nwachukwu Ajobor lives on as his good works continue to tell his story and remind us of his impact!

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