

## BOOKS AND REVIEWS

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**Tanzania: its own doctors at last**, *World Health, World Health Organization, Geneva, July 1968.*

1968 will be marked by two important events in Tanzania. The country will welcome its first group of "home-grown" doctors—the first six graduates of the Dar es Salaam School of Medicine. Furthermore, the school will become a full-fledged Faculty of Medicine of the University of East Africa, through its affiliation with the University College, Dar es Salaam. The new graduates will receive their diplomas in medicine therefore from the University of East Africa when they graduate in July of this year.

These young Tanzanian doctors will pass their internship serving in a country hospital. Upon completion of their internship, the Ministry of Health will post them to health centres and thus increase the number of physicians in rural areas. Today, in the entire country, there are only one hundred Tanzanian doctors in private practice and eighty more employed by the Ministry of Health who work in health centres or outpatient clinics. Tanzania has an estimated population of 10 million. Even if one includes expatriate doctors in government service, there would only be about 1 physician for every 23,000 people in Tanzania. The overall estimate for East Africa is 1 per 12,000.

The Dar es Salaam School of Medicine was established by the Ministry of Health in April 1963 to alleviate the critical shortage of doctors in Tanzania. Its nucleus, the Medical Training Centre, was built in 1958, together with the Muhimbili Hospital which now provides students with clinical and outpatient experience.

The curriculum emphasizes preventive medicine and rural health practice and is specially oriented to meet the health problems of the country.

Students spend six months at the Rural Health Centre in Ifakara, nearly 300 miles from Dar es Salaam, for their practical training. Much of the teaching is closely integrated with paediatrics, obstetrics, health education and nutrition.

From only 16 students in 1963, school enrolment increased to 61 during 1967-1968, including three girls.

Several governments, national and international organizations have contributed material and technical assistance towards the construction and growth of the Dar es Salaam School of Medicine. They include the Rockefeller Foundation, the Basle Foundation for Aid to Developing Countries, the Swiss Tropical Institute, the London School of Hygiene and Tropical Medicine, Glasgow University, the Swedish Government,

the British Government and UNICEF. Since 1965, the World Health Organization has been providing the services of tutors in internal medicine, biochemistry and physiology as well as some supplies, equipment and medical literature.

Tanzania became the second East African country to have a Faculty of Medicine; Uganda has its own at the Makerere College. However, in mid-1967, Kenya inaugurated the Nairobi Medical School and Zambia has plans to set up one at the University of Zambia in Lusaka.

**The Public Health Nurse, *Revue suisse des infirmières, Soleure, 1968, No.7***

In Denmark and the United Kingdom, she does not give treatment. Her work is related to preventive and social rather than curative medicine. The greater part of her work is in people's homes, where she meets the people in their own surroundings, where she is concerned with maternal and child welfare hygiene, the aged, recently discharged hospital patients, the physically and mentally disabled; she carries out health controls and acts as schools nurse.

In Denmark her training consists of two years of work after obtaining her nursing diploma. If her three year study did not include obstetrics and psychiatry she must take a two-month course in the former and one of six months in the latter. If it did not include paediatrics she must train for three months in a home for healthy children of up to three years of age, and for three months in home nursing. She must also have worked in a dermatology, geriatric or emergency ward. She must then do a nine-month course in public health at the High School of Nursing at Aarhus.

In Great Britain the future public health nurse must have her nursing diploma or SRN (State Registered Nurse), taken midwifery courses and a one-year course in public health.

In rural districts the public health nurse is generally also a midwife and school nurse, and she also gives home nursing care.

The tendency is now to merge the two types of home nurse training. There would thus only be public health nurses capable of the most complicated nursing functions, acting as the family doctor's main assistant, co-operating with welfare officers and assisted by nurses having completed two years of training and by auxiliary nurses.