

CURRENT PERSPECTIVES

Primary Health Care Internship in a Portuguese-speaking African Country: insights from the experience of three Pediatric Residents

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ABSTRACT

Undertaking an internship in a Portuguese-speaking African country (PALOP) is often sought after by residents during their training, particularly in the field of Primary Health Care. This type of experience is oftentimes regarded as an important contributor to both the professional and personal development of residents. We report the experience of three pediatric residents in Cape Verde, reflecting on the learning opportunities provided and their possible impact on residency.

Keywords: human resources in health; medical residency; primary health care; portuguese-speaking african countries

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Primary Health Care training is an integral component of the Pediatric Residency Program, with many residents opting to complete this rotation in a Portuguese-speaking African country (PALOP). Such placements may contribute to the development of skills needed to address the ongoing demographic changes across Europe, where migrants represent an increasing proportion of the population. Cultural diversity and the increasing encounter with tropical and other region-specific diseases in clinical practice pose important social and healthcare challenges, prompting residents to seek training opportunities that address these issues. Furthermore, working in resource-limited settings, as is often the case in PALOP countries, may foster adaptability, resourcefulness and sound clinical judgment while encouraging greater reliance on clinical skills rather than diagnostic investigations. For Portuguese residents, international training internships in CPLP (Community of Portuguese Language Countries) member states are recognized within residency training programs, with several scholarships available to support these experiences.

To illustrate the potential value of these internships, we present the experience of three pediatric residents who completed a three-week placement in Mosteiros, on Fogo Island, Cape Verde, in October of 2022. Like many low resource settings, Cape Verde faces a significant shortage of healthcare professionals and has historically relied on medical training abroad. According to data from 2006, physician density ranged from 4.5 to 8 per 10,000 inhabitants, with even greater disparities in remote areas such as Mosteiros.⁽¹⁾ In 2021, this municipality on Fogo Island had a population of 8,084 inhabitants (1.6% of the national population) and was served by only two non-specialist physicians. The shortage of specialist doctors remains a nationwide challenge, with only approximately one quarter of physicians being specialists. Mosteiros also has a considerable younger population than Portugal, with 31.1% of residents under 14 years of age, highlighting the need for professionals trained in child healthcare.

During the three-week internship, 474 children were assessed. All consultations included anthropometric assessment, immunization status review, nutrition and oral health evaluation, and parental counselling on healthy lifestyle habits. Health-related issues were identified in 73.6% of children. The most frequently encountered conditions included dermatologic disorders, both infectious and non-infectious, gastrointestinal conditions, iron-deficiency anemia (often associated with inadequate dietary practices), upper respiratory tract infections and dental caries. The residents also assisted in a vaginal delivery, providing immediate neonatal care. Weekly online case discussions were held with Portuguese and Cape Verdean Family Medicine specialists, and Cape Verdean medical trainees. Challenges included limited access to diagnostic tests, shortage of pediatric medical equipment and restricted availability and affordability of pediatric drug formulations.

Despite the widespread use of traditional medicine and

healing practices and low health literacy, particularly in relation to nutrition and oral health, community engagement was remarkable. The residents were warmly welcomed by both the local population and healthcare professionals, fostering meaningful cultural exchange. Although no formal pre- and post-internship evaluation was performed, all three residents reported significant personal and professional growth following the internship.

In conclusion, training placements in PALOP countries may offer valuable opportunities to broaden clinical experience while fostering adaptability, resilience, cultural awareness and resourcefulness. Beyond their educational value, these experiences may promote greater awareness of global health challenges and encourage a more patient-centered approach to medical practice. Expanding opportunities for international training within the CPLP framework may represent an important investment in the development of well-rounded physicians prepared to deliver high-quality care in an increasingly interconnected world.

AUTHORSHIP

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