

**Inaugural Speech by in-coming COSECSA-ASEA President, Christopher A Samkange, Lusaka  
- Zambia December, 2011.**



COSECSA-ASEA 2012 President C A Samkange

It is a great honour to stand here in front of you and assume the Presidency of our College. It is, indeed, for me, a moment of gratification but primarily one of humility and one guided by a sense of the enormity of the task.

Let me start by going down memory lane. This day and this town is a myriad of anniversaries. In 2000 our first Treasurer, the neurosurgeon from Tanzania, Dr. Abednego Kinasha insisted that I pay up my Foundation Fellow fee before the first AGM of the College in this magnificent building in our northern neighbour's capital city. I left the city a member of the first Council of COSECSA. Dr Kinasha went on to become our fourth President. It is pleasing to find myself elected our sixth President in the same Hall. But then this Hall has witnessed other historical events: Mr. Yusuf Kodwawwala a far much greater son of surgery on our continent than me was inaugurated President of ASEA in this same city in 1987. The first Council was inaugurated here. Now we start another cycle.

I am so pleased to inherit the merged College of COSECSA-ASEA from a man who will go down in our history as the consummate diplomat, Mr. Fred Mutyaba. With his firm, principled and quiet and deliberate way of speaking, he ensured that we negotiated the potential minefields of our merger process very smoothly. I would wish the College to forevermore acknowledge Mr. Mutyaba's unique contribution to this process. I pledge to uphold all the principles of putting the interests of the College above all else as he practiced them.

The College is in very good shape and has certainly built on the achievements of successive Councils. Professor Pankaj Jani (Chairman of the Examinations and Credentialing Committee) repeatedly refers to the College as a Young College. Indeed that we are. This confers one strong advantage: we are not bridled with traditions and so we can freely negotiate our way through options in surgical training and examination in our quest to produce an internationally acclaimed product that is eminently suited for our practicing environment. Our product has to serve populations that are demanding of the highest quality of surgical care notwithstanding their limitations in being able to pay for all our aspirations. In this respect we value the partnerships and collaborations that we have built, which we are continuously developing and nurturing and which assist us in our lofty quest.

The College was fortunate enough to go into the RCSI-COSECSA collaboration receiving funding from the Government of the Republic of Ireland as Irish Aid. Professor Krikor Erzingatsian, our third President, played a critical part together with Professor O'Sullivan then President of the Royal College



of Surgeons in Ireland (RCSI) in making this happen. This collaboration has strengthened a number of our processes, including training through RCSI's e-learning portal, School for Surgeons. With it has come the opportunity for our Fellows as trainers to make personal contributions in innovation and adaptation of learning materials. Internet facilities have been created in our countries thereby giving our trainees access to up to date learning materials and creating opportunities for discourse with peers. Further, from the beginning, RCSI has provided external examiners to all our examination diets.

The Royal College of Surgeons of Edinburgh stood with us as we started as a College. They helped as we set up our first examinations. Today we were pleased to honour a member of the RCSEd as an Honorary Fellow, Miss Christine Evans.

The Association of Surgeons of Great Britain and Ireland have given us enormous assistance in delivering basic sciences to our trainees, strengthening what our Registering authorities had recognized as a specific weakness. We have since embarked, using The Programme resources, on a training programme whereby there will be, at the end of a three year period, three Fellows in each member country who will be specialist trainers in the three areas of anatomy, pathology and physiology.

Our College views its place on the continent with pride and a sense of commitment in terms of contribution. First, we are grateful that our Colleagues in the West African College of Surgeons (WACS) showed great flexibility by permitting us to provide services to members of PAACS in their jurisdiction who have joined our College training programmes under the management of the member state of Kenya. Our colleagues in South Africa have expressed a strong desire to work with us in developing surgical skills in the Region and we have agreed to go forth with processes to allow reciprocal recognition of our qualifications.

An umbrella body, the Pan African Association of Surgeons, PAAS exists and serves to form a firm foundation for our collaborations to be defined refined and facilitated. We agreed in Cape Town this year that we will attend each other's AGM and Scientific Conferences as a mechanism of mutual awareness and a platform for cooperation. I am pleased to report that in our discussions during this conference we intend to make these commitments more concrete. In Monrovia during the WACS AGM and Conference we expect to sign the appropriate documents

The RCSI-COSECSEA collaboration supported by Irish Aid has only two years left to run. This makes it incumbent on us to put in place mechanisms to sustain all the innovations we created through this collaboration. The college Finance and General Purpose Committee needs to advise Council on how diverse resources can be mobilized in this regard.

Our Registering Authorities and our Medical Schools have raised questions on our training in the basic sciences. Already our College has responded by the training of trainers in Basic Sciences. They have asked to see a more obvious structure to our College without Walls@ concept. Now we no longer just accredit institutions: we accredit the trainers as well. We need to translate all these efforts into the delivery of quality training to every junior in each country. Further, we are committed during the life of this council to refine the training of life support and trauma management skills to our MCS and FCS graduants so that we address this currently rising epidemic in our region. These will be examinable skills areas.

In the past two years our Committee on Examination and Credentialing has worked hard on improving and standardizing our assessment techniques and processes. We have an obligation to provide strong Quality Assurance parameters that support that what our certificates state is indeed true.

We have to strengthen our governance processes. We have a strong Constitution which I believe was well thought out. Nevertheless all Constitutions are live documents and need to be responsive to changes in the operational environment. As a start, we have recognized that the merger constitution omitted to



define the term AExecutive@. At the next AGM we shall therefore be putting forward an amendment to take care of this and any other changes Council shall note in the course of this year.

Council works for us the College. I believe members will expect members of Council to work to strengthen the College at all times. Members and Fellows will continue to expect members of Council to be elected on the basis of their commitment to College work, their capacity as well as their demonstrated propensity to perform the onerous and self-sacrificial duties required of them. We take pride in our professionalism at all times. In this regard, during the life of this Council, I shall expect Council to focus on documentation and refinement of our policies and procedures so that all members of the College are clear on how we deliver our services, perform our duties so that transparency and efficiency are our guiding principles. We have evolved some very innovative solutions to our training and examining duties and we need to document these for posterity so that all our decisions are preferably always criterion-based and evidence-based.

Looking beyond the life of this Council, we need to strengthen our resource base. I see this being achieved through collaboration with diverse groups and engaging in income-generating activities. No College has survived on examination fees and subscriptions alone. We therefore need to diversify into income generation activities which shall encompass and include offering training courses for which a realistic but affordable fee shall be raised. We need to offer a lot of these courses and consistently collect fees from each delivery. We need to strengthen our relationships with collaborating partners from which funds will flow into the College. We need property that will generate an income. The issue raised at the AGM by Dr. Okech from Nakuru is therefore very pertinent. I urge all members with influence to prevail on our governments to cede land to COSECSA then all of us to pursue donor funding to put up buildings that will support us for time to come.

Internally we need to promote fund-raising activities. We have capacity in the region to manufacture items for sale at our meetings and within our countries. We need to strengthen collection of subscriptions. In this regard I appeal to all our country reps to emulate the proficiency of Rwanda where all members and Fellows are fully paid up.

I am sure I speak for all of us when I note that in spite of being young, our College is dynamic and innovative in its processes. We, however, need to do more to improve our quality and proficiency. We go forward to ensure that we teach better, give our trainees the best learning environment and experiences possible and we assess them as accurately and painlessly as possible. We must not forget that we have to take care of the trainees as well and I expect our Surgical Societies who constitute our Country Chapters, to act as representatives of our trainers and Fellows to our Governments and employers as well registering authorities. Surgery is a noble and very essential service and we expect our Societies to promote this recognition in our member countries. Our other great function is to accredit surgical institutions and harmonize training and delivery. I wish to see our country reps strengthening that role so that the needs of our countries drive and consolidate our efforts.

Fellows and Members, I thank you for the confidence you have shown by electing me. As a result of our merger process and transitional arrangements, I am conscious that I go down in history as the longest-serving Vice President (four years). I hasten to assure you that my term as President will be one and of normal duration. I seek your support and cooperation in discharging these duties. I am already looking forward to our three meetings in 2012, the April Regional Meeting in Uganda, the August Regional meeting in Mozambique and our AGM and Annual Scientific Conference in Addis Ababa, Ethiopia.

**C A Samkange**  
**Incoming COSECSA-ASEA President**

7 December 2011 .  
Lusaka Zambia