EMERGENCY MEDICINE INTEREST GROUPS AND PEAEDIATRICS TEACHINGS: A CASE OF MBARARA UNIVERSITY OF SCIENCE AND TECHNOLOGY EMERGENCY MEDICINE INTEREST GROUP (MUST-EMIG) IN UGANDA

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Aims Emergency medicine (EM) is a new specialty in Uganda and there is currently no formal EM undergraduate curriculum. The Mbarara University of Science and Technology Emergency Medicine Interest Group (MUST-EMIG) was established to bridge this gap. The creation of a link between MUST-EMIG and the paediatric education group ‘Don’t Forget the Bubbles’ (DFTB) allowed the expansion of our programme to include emergency paediatric teaching from a variety of international sources. This survey was done to assess the impact of the paediatric emergencies teaching programme, and explore strengths and limitations of this innovative international teaching programme.

Objectives 1. To elicit feedback from students on their experiences with MUST-EMIG paediatrics teachings.

2. To explore whether international teaching via online platforms was accessible and applicable to our student population.

Methods The MUST-EMIG executive committee developed a membership survey on paediatrics teachings offered by MUST-EMIG. Members of MUST-EMIG were voluntarily asked to participate in the online survey. Results of the survey were summarised using descriptive statistics and thematic analysis. Paediatrics teachings have been freely provided to students including 3 DFTB courses, 1 DFTB conference, 4 webinars from 5 DFTB facilitators, and 1 in-person adolescent paediatrics workshop. On average we have 25-35 EMIG students who attend our activities (virtual or in-person).

Results 27 responses were collected and analysed, with students from every year of medical school responding. 21 (77.8%) male and 6 (22.2%) female medical students. Students aged <20 years (14, 51.9%), and those in their fifth and second-year of medical school had the highest preponderance of participation. All students believed the paediatrics teachings were extremely valuable to them as future emergency doctors. All students also believed teachings from international facilitating Emergency paediatricians apply to their settings. 19 (70.4%) preferred a combination of hands-on and didactic/theory modes of teaching, DFTB’s Paediatrics trauma 2021 course was the most attended event followed by the paediatrics basic airway management webinar and workshop.

Students were extremely keen for further teaching sessions to be organized on mostly non-trauma topics (figure 1).

Conclusion MUST-EMIG has greatly helped medical students acquire paediatrics emergency care skills and knowledge. The use of online platforms has allowed MUST-EMIG to access teaching from a wide variety of international speakers. Feedback from students suggests that this is relevant to their practice and felt to be of value in complementing practical teaching. In the future, MUST-EMIG hopes to expand its paediatric teaching programme and avail of opportunities to gain valuable insights from more lecturers across the globe.

THE SAHARAN TOOLBOX: A COMPREHENSIVE ASSESSMENT OF SCHOOL-AGE CHILDREN’S GROWTH, COGNITIVE AND PHYSICAL FUNCTION

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Aims School-age health, growth and development are poorly characterised in low- and middle-income countries. School-age is both highly predictive of adult function as well as an important age for protective interventions. We developed the School-Age Health, Activity, Resilience, Anthropometry and Neurocognitive (SAHARAN) toolbox to measure growth, cognitive and physical function in rural Zimbabwe.

Methods The SAHARAN toolbox was developed using a step-wise approach, with tool selection based on COSMIN principles. Growth was measured with anthropometry, knee-heel length and skinfold thicknesses. Bioimpedance analysis measured lean mass index (LMI) and phase angle. Cognition was assessed using a fine motor finger tapping task and school achievement test (SAT). The Kaufman Assessment Battery for

REFERENCES