Background: Isoniazid preventive therapy (IPT) for tuberculosis (TB) is a safe, effective intervention for preventing active TB disease. When this study was conducted, the Peruvian TB program offered free IPT for TB patient contacts <20 years old. Despite this, uptake and adherence rates were very low. Little research had been done to understand why, so we decided to conduct a qualitative study of barriers and facilitators to IPT in order to identify opportunities to improve access.

Methods: We purposively selected 30 TB affected families living in the district of Ventanilla, Peru and conducted qualitative interviews with the household member most responsible for the care of individuals <20 years old living in those homes (caretakers). We posed questions covering the themes of: TB symptoms, contagion and prevention; and the freely available IPT program. Focus groups were also conducted with physicians, nurses and field workers in Ventanilla to elucidate barriers to and opportunities for improved IPT access.

Findings: The analysis of the household interviews revealed that caretakers almost always expressed TB transmission in terms of saliva through sharing eating utensils, lacking understanding of airborne transmission. Many also believed that taking IPT could weaken healthy children. Despite this, caretakers almost universally expressed that they would follow advice to use IPT if delivered by a physician or nurse, overriding personal reservations. In focus groups nurses and physicians expressed fears that IPT could cause development of drug resistance, and concern that their time was too limited to discuss IPT.

Interpretation: In conclusion, public health education does not appear to have corrected misperceptions concerning saliva vs. airborne transmission of TB and, despite a TB program with free IPT access, there was little knowledge of its existence. Despite this, the esteem caretakers expressed for physicians and nurses in the IPT program suggested that a simple, non-time-intensive intervention of simply emphasizing IPT as a necessary and preventive treatment available for free may have a very high impact on uptake and adherence of IPT. Finally, health care provider education regarding IPT’s safety and the low time burden of emphasizing IPT will be critical to the success of expanding IPT access.

Introduction of team based learning (TBL) approach in preclinical and clinical learning: students view and its impact in preclinical medical students

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Program: While the School of Medicine at University of Rwanda aims at becoming a Centre of excellence in training and development of health professionals, there still a substantial use of inadequate learning methods among undergraduate medical students which affects both academic assessment and post-graduate district hospital performance. Medical students employ superficial readings and memorization focusing only on given syllabus materials. This study evaluated the impact of a newly introduced team based learning (TBL) learning approach with regard to academic outcome.

Methods: This comparative study compared/weighed benefits of the TBL approach among undergraduate medical students who were exposed to it and those with no prior exposition. Data collection tools such as testimonials from medical students enrolled in undergraduate program at University of Rwanda and research papers done in other accredited universities. Two-hundred medical students exposed to the TBL approach in 2013-2015 academic years and 200 others who did not ever use the system in their studies were interviewed. In addition, 16 papers describing the impact of TBL in different universities including the Deakin University Master of Nursing Practice and St. Luke’s College of Nursing were analyzed.

Outcome: First, data analysis showed that 85% of students exposed TBL did further research on the TBL topic in comparison to 12% of their peers without any prior exposure to it. Second, integration of fink and Michaelsen method showed to increase students’ participation at a rate of 100%. As from this research, documented papers demonstrated that TBL approach increased students’ success at an average rate of 84%. The 90% of exposed with 75% of non-exposed students preferred TBL approach introduction in their learning.

Going Forward: It was recommended that integrating TBL approach in all medical studies assignments is crucial to success and performance of future healthcare professionals trained at school of medicine, university of Rwanda; And that further researches on TBL need to be performed to see the probable benefit in other faculties and education levels.

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How the interdisciplinary leads to the innovative in global health: learning from the Global Health Case Competition at the University of Florida

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Uptake and utilization of tuberculosis preventive therapy in a Peruvian Peri-urban Shantytown

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