Evaluating the Feasibility of Using the BACKTRACK Screening App to Improve Low Back Pain Management in Rural Uganda

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INTRODUCTION

Digital health tools have the potential to improve the accessibility, availability, affordability and quality of care.

This study follows the feasibility testing of the BACKTRACK screening app for managing Low Back Pain (LBP) in rural communities in Uganda.

AIM

This study aimed to test the **feasibility** of the BACKTRACK Screening App to assist clinical officers (COs) and registered nurses (RNs) in managing patients with Low Back Pain in a rural setting.

ACKNOWLEDGEMENT

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ETHICAL APPROVAL

This study received an ethical approval from MUST (MUST-2022-540) and UCD (LS-LR-22-227)

METHOD

Nineteen clinicians used the BACKTRACK App for 10 weeks. The intervention consisted of the deployment of a co-designed mHealth app paired with two bespoke trainings and continuous support from a physiotherapist (GNC).

Semi-structured interviews with 15 COs and RNs working in Health Centre 4 (n=4) and Health Centre 3 (n=5) were undertaken to understand their experiences and perspectives of the BACKTRACK screening app.

All interviewed clinicians completed a System Usability Scale, an evaluative tool designed for mHealth app development[3].

RESULTS

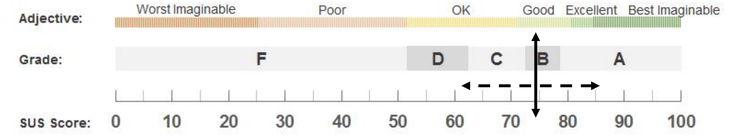

Figure 1: System Usability Scale Results for the App (mean=74; SD=13)

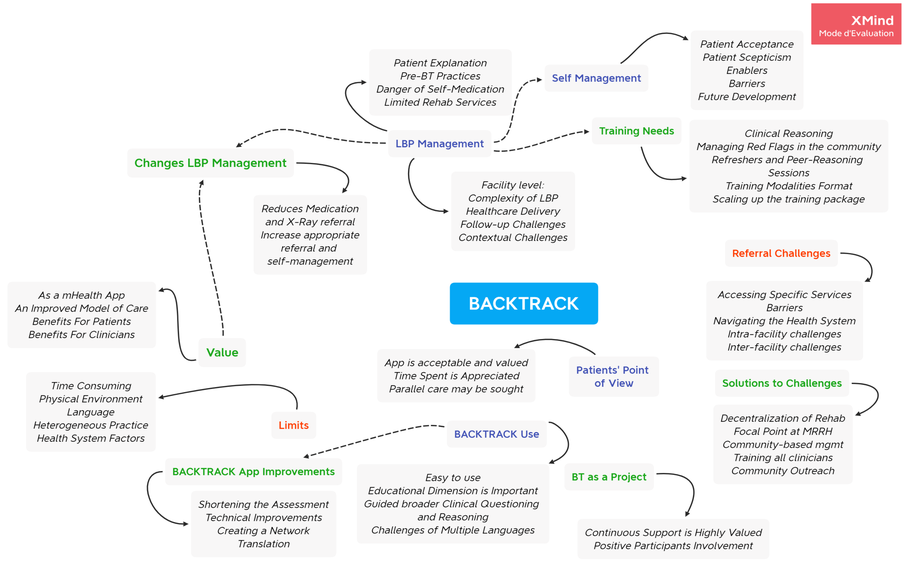

Figure 2: Interviews Results MindMap

CONCLUSIONS

Implementing the BACKTRACK Screening App was deemed feasible and of value. Clinicians saw improvements in their ability to manage LBP at the community level. The app was rated 'Good' on average.

Some structural barriers, such as the referral challenges, remained which impeded the patients' ability to seek the best evidence care. Clinicians stressed their willingness to gain more skills through trainings and education to enable community-based management.

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