

IMPROVING EMERGENCY MEDICAL SERVICES IN AFRICA

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In the face of a high burden of morbidity and mortality due to road traffic accidents, infectious diseases and, increasingly, non-communicable disease, Africans are vulnerable in times of acute illness and injury. In previous reports, I described the scary reality that in many parts of the world, casualty centers are staffed by junior physicians with no specialty training—if any particular care for emergencies is available at all. With the help of the African Federation for Emergency Medicine, local specialty organizations, Ministries of Health and nongovernmental organizations as well as local physician and allied health champions, this is slowly changing in Africa.

I continue to work with the AFEM to develop open-access content for the core curricula for specialist trainees. These lectures and simulation sessions supplement the African Federation of Emergency Medicine Handbook of Acute and Emergency Care. I authored several chapters and edited the psychiatry section for the text published in 2013, which has become a core resource for most emergency medicine specialist trainees on the continent. At the 2014 African

Congress on Emergency Medicine, held in Addis Ababa, Ethiopia, I will present a lecture on the diagnosis of brain death in the low-resource Emergency Department and also serve as a facilitator in the pre-conference research skills workshop.

In the past year, I have worked on national and international committees addressing Global Health and Emergency Care. As a member of the Society for Academic Emergency Medicine's Global Emergency Medicine Academy, I co-authored "Global Health and Emergency Care: An Undergraduate Medical Education Consensus-based Research Agenda" published in *Academic Emergency Medicine* in 2013. Specific to Africa, I lead a working group of the International Federation for Emergency Medicine's Specialty Implementation Committee to produce a manuscript for publication this winter in the *African Journal of Emergency Medicine* entitled "How to Start and Operate a National Emergency Medicine Specialty Organization." This document will provide practical guidance to stakeholders developing Emergency Care in Africa and beyond.

I continue to cultivate local relationships to provide education in training



programs for practitioners of Emergency Medicine and have worked closely with the new post-graduate training program in Rwanda. A University of Florida College of Medicine-Jacksonville senior Emergency Medicine resident will join me in Kigali to participate in an elective at the referral hospital while I continue to provide faculty support for the residency. As I transition into the role of Director of International Medical Education Programs for the College of Medicine, I hope to continue to foster relationships that will allow us to develop sustainable partnerships for educational exchange and research partnerships including undergraduate and post-graduate trainees from the University of Florida. Ideally, many will have the opportunity to participate in educational and systems development endeavors related to ongoing AFEM programs.

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