however, only 15 children (46.8%) were able to complete all stages of the program. As for the suitability of the proposal to the school environment, it was adapted after minor adjustments to the environment. Regarding the structure of the program, an "ideal" duration of 30 minutes of interventions was observed and that the children's interest was greater in the active media group. Most parents reported being quite satisfied with the program, 90% did not feel uncomfortable or dissatisfied with the messages and calls, and 31% correctly answered the daily media record chart over the four weeks. In the analysis of child development, it was observed that there was no statistically significant difference in the pre and post intervention results.
Conclusion: The need for adjustments in the procedures used in the program was identified, which led to structural changes, such as defining the duration of sessions; withdrawal from the daily record chart and changes in the places where the intervention was carried out. In view of the data obtained, it can be concluded that the feasibility study obtained satisfactory results and the changes made allow continuing with the intervention program with interactive media in the educational environment with a longer duration.
Implications: As it is a feasibility study, the results found in the present study affirmed the importance of it for carrying out a large-scale study, to continue with the intervention program with interactive media in the educational environment with a longer period. of duration.
Keywords: Tablet, Child development, Viability study

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STATIC AND DYNAMIC BALANCE IN SERIOUS PATIENTS POST-COVID-19: OBSERVATIONAL STUDY

Nádia Oliveira Gomes[1], José Carlos da Silva Júnior[2], Felipe Mendes[3], Jean Coutinho[1], Vinicius Maldanerr[2], Gerson Cipriano[1]
[1] *Postgraduate Program in Human Movement and Rehabilitation graduate program. Unievangélica, Goiania, Goiás, Brazil*
[2] *Physiotherapist*
[3] *University of Brasília (UnB), Brasilia, Distrito Federal, Brazil*

Background: Most individuals who have recovered from COVID-19 may have long-lasting systemic impairments. Previous studies have already demonstrated balance changes both in asymptomatic athletes and in patients who manifested the moderate to severe form of COVID-19. Balance uses information from the vestibular, ocular and proprioceptive systems that act in synergy to maintain posture in different conditions, called static and dynamic balance. The simultaneous impacts on static and dynamic balance and possible relationships with muscle strength and functional tests are still unknown in the scientific literature.
Objectives: To compare static and dynamic balance in volunteers with long-term COVID-19 who had the severe form of COVID-19, compared to individuals who did not have a diagnosis of COVID-19.
Methods: Ambispective observational study of the case-control type, being the case, volunteers who presented the severe form of COVID-19, and control, with asymptomatic patients. The volunteers were evaluated after 6 months of hospital discharge, in a university research laboratory. Static balance was assessed using baropodometry and stabilometry and dynamic balance using the MiniBest Test. Muscle strength was assessed by isometric contraction of quadriceps extension and flexion and the 1-minute sit-to-stand test (1MSTS).: Most individuals who have recovered from COVID-19 may have long-lasting systemic impairments. Previous studies have already demonstrated balance changes both in asymptomatic athletes and in patients who manifested the moderate to severe form of COVID-19. Balance uses information from the vestibular, ocular and proprioceptive systems that act in synergy to maintain posture in different conditions, called static and dynamic balance. The simultaneous impacts on static and dynamic balance and possible relationships with muscle strength and functional tests are still unknown in the scientific literature.
Results: Sample of 29 individuals, age 55±12.71, 12% female and 17% male BMI of 27.12± 4.23 /m^2, 38% were sedentary, 62% active, 14 (48.20 %) of the case group (COVID-19). Baropodometry revealed important changes in static balance, specifically in anteroposterior displacements, while performing simple activities with eyes open (2.12±2.18 vs. 1.6±0.57, p=0.05) and eyes closed (3.57±0.98 vs. 2.12±1.32, p =0.05). Stabilometry revealed alterations both in the total postural stability test (TSP) (2.52±2.31 vs. 1.40±0.54, p=0.05) and in the fall risk test (TRQ) (4.93±1.97 vs. 2.65±1.36, p=0.05). As for dynamic balance, the Minibest test also revealed changes in the COVID group (24.57±4.38vs 27,820.57, p=0.05) or? p=0.005?). Isometric muscle strength was lower in the COVID group only for extension (111.5±39.7 vs. 152.8±64, p=0.047), a behavior also observed by the 1MSTS (19.14±-5.47 vs. 27.58±-8.14, p=0.05).
Conclusion: Late changes in static and dynamic balance were found in patients who had the severe form of COVID-19, as well as reduced lower limb strength, functionality and increased risk of falling.
Implications: Understanding the late impacts of COVID-19 on static and dynamic balance, and muscular and functional mechanisms involved, are crucial for the development of effective rehabilitation strate.
Keywords: Covid, Postural control, Strength

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PREDICTORS OF PARTICIPATION AT HOME OF CHILDREN FROM AGE 0 TO 5 YEARS WITH AND WITHOUT DISABILITIES

Nadine Oliveira Cabral[1], Viviann Alves de Pontes[1], Kennea Martins Almeida Ayupe[1], Egmar Longo Hull[1], Aline Martins de Toledo[1]
[1] *Department of Physical Therapy, Postgraduate Program in Rehabilitation Sciences, University of Brasília (UnB), Brasilia, Distrito Federal, Brazil*

Background: Participation is currently understood as a family of constructs, which include: (1) frequency with which an activity is carried out; (2) level of involvement; (3) personal preference regarding the task; (4) competence, which is the ability to perform a certain task; and (5) self-perception, related to the recognition of one's ability to perform tasks. In children up to 5 years of age, who spend most of their time at home, participation can be affected by environmental factors, whether structural, family or socioeconomic. Participation can be measured through the Young Children's Participation and Environment Measure (YC-PEM), translated into Portuguese as Medida da Participação e do Ambiente – Crianças Pequenas, which is a questionnaire applied to parents/guardians, which assesses the frequency, involvement, desire for change, and