

FLEXIBLE, FUN & EFFECTIVE: STI SYNDROMIC MANAGEMENT GAME – A LOW-TECH, HIGH IMPACT EDUCATION TOOL



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Session Outline

Background:

- PASHIP
- 4As

STI Game:

- Design & features
- Trials
- Evaluation



Why PASHIP?



- PASHIP – Papua New Guinea Australia Sexual Health Improvement Program (AusAID funded)
- The HIV prevalence rate in PNG is the highest in the Pacific region.
- Infection with STIs significantly increases transmission and acquisition of HIV through sexual contact.
- PASHIP aimed to reduce STI rates in order to reduce the prevalence of HIV.

4As PASHIP



Anglican Health Services
Health Agency of the Anglican Church
of Papua New Guinea

The 4As objectives:

1. Increase access to and utilisation of STI services;
2. Provide a comprehensive STI service delivered by well trained and qualified staff; and
3. Effectively manage the Program through a partnership approach.



STI Game – Design & features

- An interactive resource designed to complement and reinforce education sessions on STI in Papua New Guinea (PNG).
- Structured as a large puzzle
- Based on the PNG National Department of Health (NDoH) STI Syndromic Management Treatment Guidelines,
- Developed by the AusAID funded *PNG Australia Sexual Health Improvement Program (PASHIP)* 4As consortium with PNG NDoH approval, input and encouragement.

Game contents

- Instructions for use
- Facilitator notes
- Game map
- Colour coded activity cards – 11 coloured categories x 14 diagnoses; plus 2 x 11 category title cards (total 176 cards)
- Answer key cards for printing
- Pre-activity questionnaire for printing
- Post-activity questionnaire for printing
- Facilitator evaluation form for printing
- Pre/Post-activity questionnaire answer sheet
- References
- Base Sheets x 2 (To be designed)

	11 Coloured CATEGORY cards (2 sets per pack)
1	Symptom
2	Picture/ Photo
3	PNG NDoH Diagnostic Category
4	Possible Complications
5	Diagnosis
6	Effect on Pregnancy and Newborn
7	Caused by...
8	Test (where available)
9	Treatment
10	Prevention
11	Counselling/ Management Considerations

	14 DIAGNOSES
1	Chlamydia
2	Gonorrhoea
3	Syphilis
4	Genital Herpes
5	HIV
6	Pelvic Inflammatory Disease (PID)
7	Candidiasis (not STI)
8	Genital Warts
9	Trichomoniasis
10	Swelling of scrotum (can be other than STI)
11	Scabies (can be other than STI)
12	Donovanosis
13	Pubic Lice
14	Bacterial Vaginosis (not STI)

Game Map / Base Sheet

[illegible]

Example Answer Key

– Pubic Lice

DIAGNOSIS	Both females and males: Pubic Lice
SYMPTOMS	Both females & males: Itchiness in genital or pubic area. Sometimes pubic lice can be seen crawling in hair and their eggs can be seen attached to the base of hairs. Lice can be present in any hairy areas of the body except the scalp.
PNG NDOH DIAGNOSTIC CATEGORY	Females & Males: Pubic Lice/Scabies
POSSIBLE COMPLICATIONS	In both females and males: None known
EFFECT ON PREGNANCY & NEWBORN	Pregnancy & Newborn: none
CAUSED BY	Pediculosis Pubis (<i>mite infection</i>) Spread by close body contact (including sexual activity)
TEST	Clinical examination sometimes with a magnifying glass
TREATMENT	Specifically & Syndromic management: <u>Gamma benzene hexachloride</u> (scabies lotion) rubbed gently but thoroughly into infested area and adjacent hairy areas. The lotion should be washed off after 8 hours. After treatment any visible lice and nits should be picked out of the hairs.
PREVENTION	May be transmitted other than sexually Abstinence, Safer sex, condoms (ABCD) Condoms – limited effectiveness Education – Community & individual on STI prevention & treatment Treatment – client and family members to be treated at same time. Wash all bedding, clothing and towels in hot soapy water and leave in direct sunlight for 1 day.
COUNSELLING/ MANAGEMENT CONSIDERATIONS	STI – Yes, but can also be transmitted by other means Partner notification and treatment – yes. All household members to be treated at same time Pregnancy issues - none Discuss prevention strategies and treatment regime.

Picture/Photo



Game Trials & Evaluation

- Trial one – 12 participants. St Margaret's Health Centre (Oro Bay), a general Health Service offering STI testing and management.
- Trial two (modified version) – three participants. Begabari Clinic (Port Moresby), a purpose built STI clinic.
- A pre/post questionnaire was employed to evaluate any impact of the game on knowledge,
- Participant feedback via evaluation form was gathered to evaluate individual enjoyment and opinion.
- A third trial assessing ease of use among local facilitators followed.

Participant feedback

What I will do differently in my work is:

- "To provide right treatment and diagnosis with the aid of this information" (Role not identified)
- "In syndromic management differential diagnoses and treatment according to what I learnt (Role not identified)
- "I will ask questions carefully to identify the real problem though it will be treated syndromically" (NO)
- "To try my best to categorise them (STIs) correctly (Peer Educator)
- "Now that I have a fare (sic) idea to identify and treatment (sic) of certain STIs" (Counsellor)
- "Careful history taking and examination to make a correct diagnosis and to treat the cause properly" (CHW)
- "I will really interview my clients well" (CHW/Counsellor)
- "Is to carry out what I learnt in the game" (CHW)
- "To really do a proper examination & diagnosis and give correct Treatment (CHW)
- "Will try to take a good history. Examine the client, do a correct diagnosis and treat (CHW)
- "To educator (sic) my communities and others in my awareness" (Peer Educator)
- "To inform my peers to come for check up" (Peer Educator)
- "Now that I've learnt and gain fair knowledge it will help me to assess and manage early STIs and treat accordingly" (CHW)
- "Treat STIs accordingly" (NO)

Facilitator reflection Trial 1

- For most participants, the full ten (10) minutes were required to complete the pre & post test questionnaires. The questionnaire comprises of six (6) questions written in English. In an unrelated discussion after the session, one participant stated "*our English is not always good*". This highlights the fact that English is PNG's second and sometimes third language
- The participants appeared eager to be involved in an education session and were attentive during the activity introduction and instruction. However, they initially seemed hesitant to commence the activity. This may have been due to confusion from lack of understanding of the activity instructions. For clarity, one row of the activity (symptoms, diagnosis, picture, etc) was completed as a group activity. The group was then encouraged to work together to complete the activity. The facilitators circulated among the group assisting and prompting as required. It appeared that some of the information was new to the participants (eg. pictures of the various STIs) and initially, the Peer educators and Counsellor seemed overwhelmed by the activity, unsure of where to start. As the activity progressed and the group worked together, less facilitator assistance and prompting was required. It was encouraging and satisfying to see the group collaborating independently, completing the activity as a team

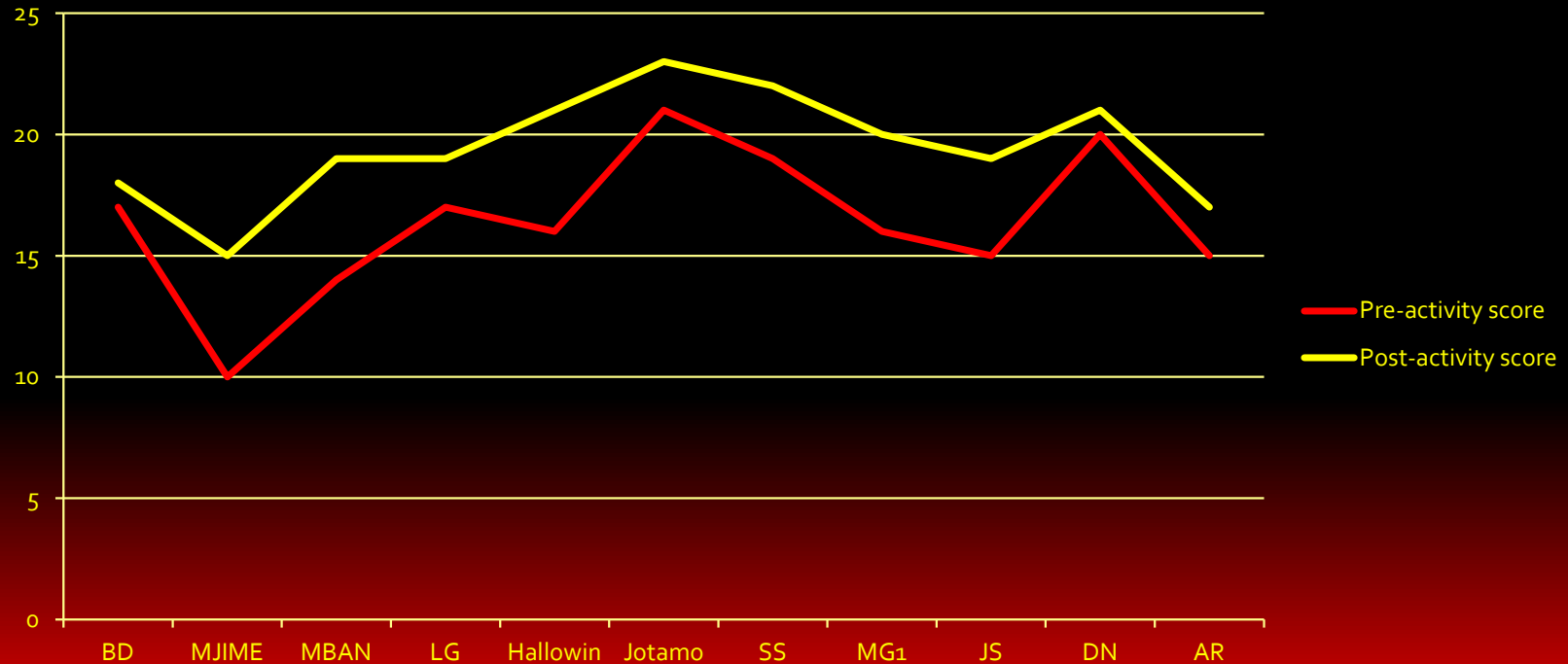
Facilitator reflection Trial 2

- Presentation of the STI Card Game at Anglicare PNG proved challenging and tested both facilitator skills and the resource itself in terms of flexibility and adaptation. Given that staff have not yet received formal training in Syndromic Management, and the small number of participants, the game was modified to concentrate on the STIs most relevant to that clinic setting. Presentation of categories was also adjusted according to expected ability.
- Recent staff disharmony has resulted in poor morale and insecurity at the Clinic. The facilitator was mindful of the potential to compound negativity and for staff to feel intimidated if the activity was too difficult. The frequent and prolonged absences of two participants may have been a manifestation of the current climate within the clinic, and the facilitator was careful to provide frequent encouragement and positive feedback to all staff throughout the activity. The participant who remained for the entire period of the activity remained focused during his colleagues' absences, working collaboratively when others were present and alone as required. The facilitator offered encouragement and advice as appropriate. The fact that staff were able to leave the activity and then re-enter it without need for additional instruction or significant impact on the completion of the activity, is testament to the resource's flexibility.

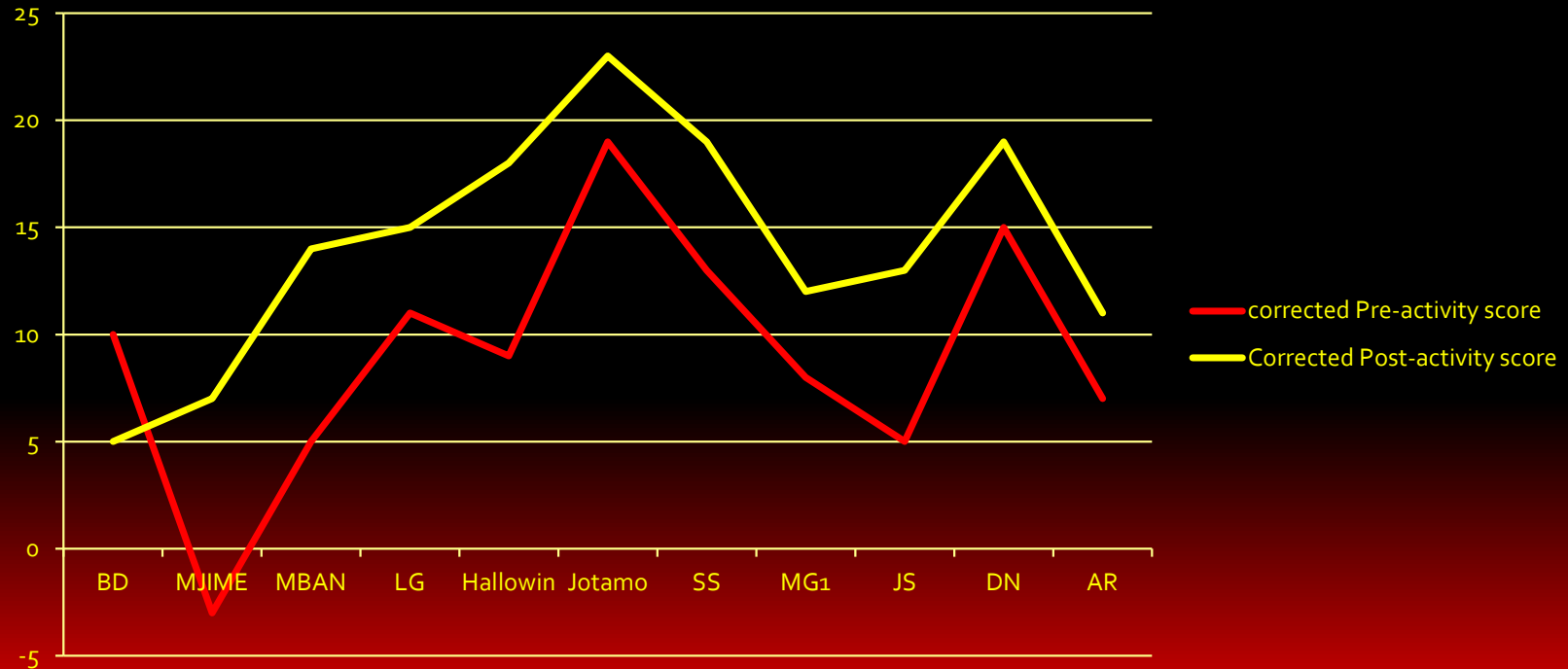
Pre & Post Activity Questionnaire

- A questionnaire was developed to assess participant knowledge pre and post the activity in order to evaluate the game as a learning tool in itself.
- The pre/post activity questionnaire comprised of six (6) questions adapted from the pre & post test utilised in the NDoH Syndromic Management Training for the Community Health Worker Certificate Program. The first question is short answer, with the remaining questions multiple-answer, multiple-choice questions.

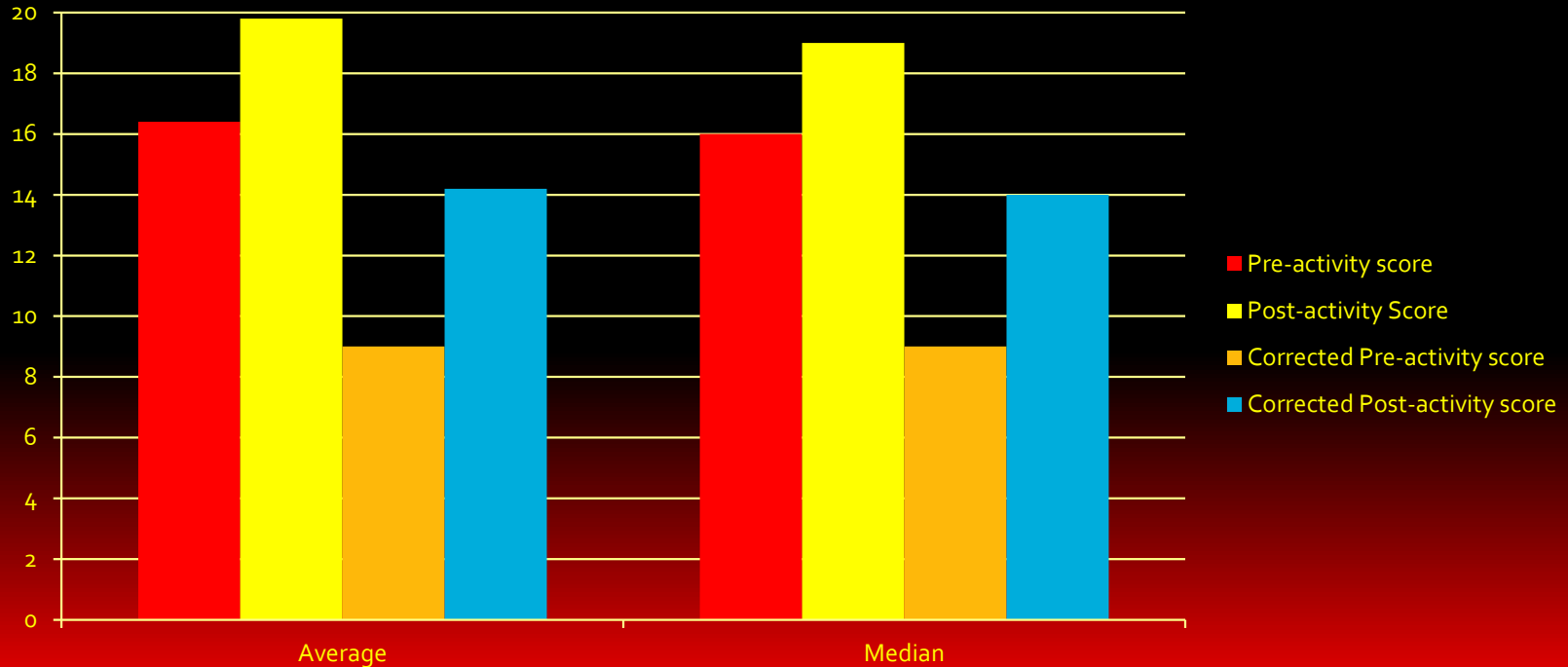
Comparison of individual scores, pre & post activity questionnaire AHS Oro Bay.



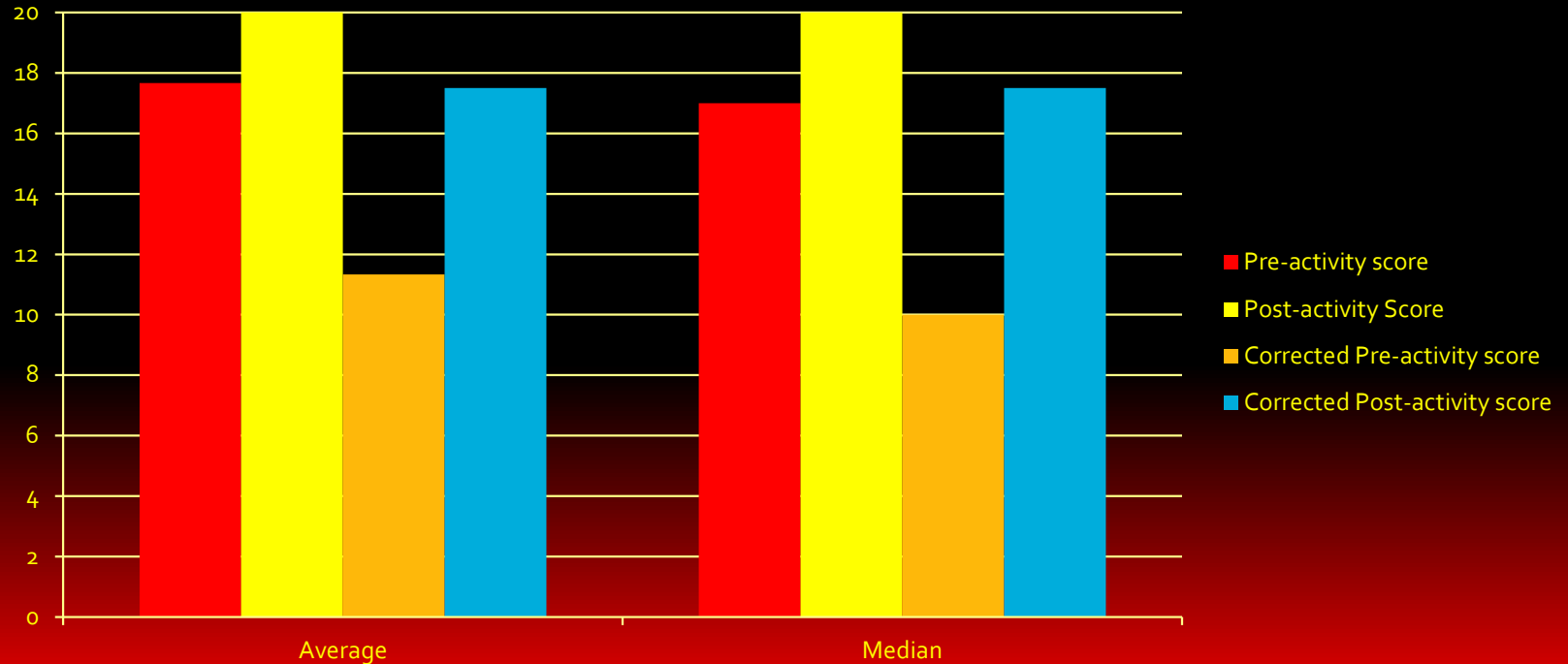
Comparison of individual corrected scores, pre & post activity questionnaire AHS Oro Bay.



Comparison of group average & group median initial and corrected scores, pre & post activity questionnaire AHS Oro Bay.



Comparison of group average & median initial and corrected scores, pre & post activity questionnaire Anglicare PNG



Staff in each trial collaborating to complete the activity



Conclusion

- The STI Syndromic Management Game has provided encouraging results in all trials.
- Diversity between cohorts in the two workshops trialling the resource indicates it is adaptable to different group sizes and occupations, while flexible enough to allow participants to oscillate in and out of the activity as needs arise.
- Comments and suggestions offered by participants have been constructive and beneficial in evaluating this new activity.
- Pre/post activity knowledge scores indicate that the activity offers an effective learning tool to complement education sessions
- Generally positive feedback suggests the interactive format is enjoyable.
- The group collaboration required by the activity further promotes teamwork and unity among participants.



Want more
information?

It is available at the
Poster display.

POSTER NUMBER 7

STI Syndromic
Management Training
Game: An Educator
Resource for Sexual
Health Trainers in
Papua New Guinea