

Development of Midwifery Emergency Curriculum by the Clinical Case-Based Crossword Games simulation and learning in midwifery students

SAMIRA KATEBI¹, LEILIMOSALANEJAD², LEILA BAZRAFKAN³

¹Master of Medical education , Medical education center , Shiraz University of Medical Sciences, Shiraz, Iran

²Associated professor ,Medical Education Department, Virtual center , Jahrom University of Medical sciences

³Assistant professor ,Medical Education Department, Medical education deputy, Shiraz University of Medical Sciences, Shiraz, Iran

Correspondence to Dr, Leilimosalanejad, Email: saedparsa2012@gmail.com, Cell phone:098-9177920813

ABSTRACT

Background: Midwife, as the first person who is in contact with mother and the newborn in healthcare centers, should have the capability of early diagnosis of pregnancy and a high-risk labor.

Aim: To develop the midwifery emergency curriculum using clinical Case-Based Crossword Games simulation and also by evaluation of learning in midwifery students.

Methods: The present study was a quasi-experimental study with a control group that was performed in midwifery groups of Islamic Azad University, Jahrom branch. In this research, the effect of electronic puzzle game simulation on the knowledge and performance was assessed and then compared with a parallel group in 2 concurrent years. In order to evaluate the satisfaction, the interview with the target group and the open-ended questions were used, and the results were then analyzed. Finally, the obtained data were analyzed using SPSS version 23.

Results: it was shown that, knowledge of the intervention group increased more than the control group. The mean of practical score increased in the experiment group from (5.95 vs 8.03), which was statistically significant (p-value <0.05). The students were satisfied with the use of educational game, and considered it as a happy, profound, and effective way of learning, since it reinforces their sense of dominance and effective learning.

Conclusion: According to the obtained results, using educational games can be recommended for educating the medical science groups.

Keywords: Midwifery, Medical Education, Game, Emergency course, technology, learning, performance, teaching, Learnings

INTRODUCTION

Midwives are known as important members of the medical community whose goal is to improve the mother and newborn health, and to play their roles as the skilled and active members. So, training of this group is of special importance. Nowadays, the midwives' training is a topic of discussion in many countries worldwide, and in this regard, one of the primary educational requirements is to adopt new policies and methods to empower and improve midwives' performance¹. Certainly, the clinical environment, especially delivery room, is an important part of the clinical environment in which the students learn to integrate theory with practice, and it is also an essential resource for the students to be prepared for playing their professional roles². Medical science education is associated with the complexities of a theoretical and clinical learning environment. Accordingly, to achieve a successful and efficient training besides dynamic qualitative and quantitative developments of medical sciences fields, an effective curriculum should be provided with a context to improve the efficiency of education³. In recent decades, as the process of education becomes more practical, educational technology growth, and increase in the significance of values in medical ethics (including respect for the patients and the least damage during learning); the traditional methods have been questioned⁴. Today, using different kinds of educational plays is one of the effective and enjoyable methods that can be used for education⁵. Also, learning through games has many advantages. Accordingly, one of the most important advantages is an

inherent reward originated from this method. Since this method is simple and understandable; it can enhance the learning persistence⁶. In a study by Baid et al., it has been reported that, using this method in medical education is also associated with different advantages including the active stimulation of learning and also improving the student's understanding. Moreover, this method provides the opportunity for the students to interact, participate, and enjoy the class⁷. Therefore, according to the importance of active strategies in learning and the students' retention, the importance of the midwifery field, which is associated with endangering mother and fetus health, is highlighted. According to the daily increase of technology in all aspects of life, by considering a large amount of printed and electronic resources of available information, it is necessary to learn using technology, and also by its positive effect on education. Another point to be considered is the habit of using traditional training, and also its major disadvantages in some cases such as lack of teacher-based deep learning and not paying attention to the attractions and the effects of technology on the educational environment. In fact, using technology in education can create a user-friendly environment in terms of the individual's needs and may provide a qualitative optimization of teaching and learning with a context for constructive learning and student-oriented approaches. Therefore, this study was conducted with the aim of designing, developing, and evaluating the curriculum of midwifery emergency (by considering its importance) in clinical-case based crossword game for the midwifery students of Islamic Azad University of Jahrom in 2018-19.

The purpose of this study was examining the design, development, and evaluation of the curriculum of midwifery emergencies in clinical-case based crossword games. Data were analyzed using SPSS version 24. To achieve the research objectives, the data were collected and then analyzed)

METHODOLOGY

The present study was a quasi-experimental one, which its process was performed in two phases of qualitative designing of the course and the scenarios and quantitative phases for the evaluation of the effect of intervention on the students. The groups of gynecologists and midwives in medical education were enrolled as experts, to validate questions, number of students, and dimensions and relevance of them. After being certified by the Research and Ethics Committee of Shiraz University of medical sciences, this study aimed at designing, improving, and evaluating the midwifery emergency curriculum by a clinical-case based crossword game in 2018-2019. 40 midwifery students of the Islamic Azad University of Jahrom from one class under research training were conveniently sampled; therefore, the whole class was included in the study census.

Inclusion criterion was studying the midwifery and students' consent to participate in the study. The exclusion criteria were also dissent and leaving the study. The students' learning in two levels of knowledge and performance was compared to a group of students from previous year under similar conditions. Also, the descriptive and analytical statistics were used for data analysis. In addition, satisfaction evaluation from focus group interview and open-ended questioning was performed, and the results were then analyzed. In this research, at first, we consulted with a specialized and academic technical team for necessary advice about the methods. After considering the feasibility, a clinical-case based crossword puzzle game was designed and then proposed in the midwifery emergency lesson. The app was designed in two phases of technical design, as well as considering the standard educational criteria. Technical design was different crosswords in game frameworks by electronic based in web. In designing educational games, we attempted to consider the educational needs of a midwifery student at the professional level. Therefore, the goals provided a comprehensive dominance on training the subjects and help in reminding the important outlines of pregnancy, labor, and midwifery emergency, which are known as the important parts of midwifery lessons (must be learned in course). Furthermore, to provide the content validity of the subjects (relevance and proper coverage of all contents), we consulted for the contents with two gynecologists teaching midwifery lessons in this group. Content edition according to the training schedule, was another intended situation; so that, the educational needs could be optimally achieved. In order to decrease the costs and increase the users, we exploited an android-based web App, so the users can utilize the game by their smart phones through internet connection. Android App web design also allows a large number of users to have access to the App with a low cost. In android designing App, the mechanisms including

feedback, score observation, and true-false feedback were utilized; so instant learning was provided in the educational environment (feedback and score monitoring elements). The technical features of the design were the presence of a management panel to observe the student's academic level and providing a good output from the student's learning level. Afterward, there were two sections of the user panel in the technical section (playing game, challenge, feedback, score and number of correct sections, and then the correct answer). Panel of manager is observing the score and also the performance of the users to enable the educational interventions through this section. Accordingly, the above-mentioned sections in addition to provide the standard indexes for educational game design includes a standard framework for personalized learning and tailored to individual differences by constructive approach. Accordingly, this plays an important role on the students' learning and the received feedbacks besides developing their knowledge. It may also affect the students' performance, which was considered in this program. Student learning was also assessed by comparing the final scores of midwifery emergency of previous year students who were trained traditionally and through lectures. Although this method is not free of bias in the perspective, it can be sometimes considered as the best option in terms of the specific conditions and non-overlapping units in comparison. Therefore, by comparing the previous year group, it was considered in comparison to learning. It also minimizes the impact of group interference and the small volume of group divisions.) (Fig. 5)

Comparison of theoretical score between the two traditional and intervention groups: Data normalization was analyzed using the Shapiro-Wilk statistical test. The obtained results showed that, the significance level of difference between the traditional and intervention groups was more than 0.05. According to table 2, the paired t-test showed that, the mean theoretical score in the traditional group increased from (14.06 vs 21.59), which was statistically significant (p-value <0.05). Moreover in the intervention group, the mean theoretical score was (15.46 vs 26.46) after the intervention. Also, this increase was statistically significant (p-value <0.05). In addition, the results of the independent t-test showed that, there was a statistically significant difference between the two traditional and intervention groups during the study period. The results showed that, despite the increasing and significant scores of the two groups, the mean of the increase in score in the intervention group had a higher value (Table 1).

Table 1: Comparison of theory scores between the traditional and intervention groups at different times (score from 30 multiple choice questions)

Group/theory	Traditional group		Intervention group	
	Mean	SD	Mean	SD
Before intervention	14.06	2.11	15.46	2.47
After intervention	21.59	5.46	26.46	4.77
Score difference	-7.52		-10.99	
Paired t-test	10.53		16.99	
p-value	0.001		0.001	

Independent t-test: 3.599, P value: 0.001

Comparison of the students' practice between the two traditional and intervention groups: Data normalization was analyzed using the Shapiro-Wilk statistical test. The results showed that, the significance level of difference between the traditional and intervention groups was less than 0.05. Also, nonparametric tests were used to evaluate the hands-on score. According to Table 3, the Wilcoxon test showed that, the mean score of the students' practice was (5.83 vs 4.84), which was statistically significant (p-value <0.05). In the intervention group, the mean theoretical score increased from (5.95 vs 8.03) after the intervention, which was statistically significant (p-value <0.05). In addition, Mann-Whitney test results showed that, there was a statistically significant difference between the two groups in terms of the practical score during the study. Also, the intervention group scores increased in the practical level (Table 2).

Table 2: Comparison of the practical score between the traditional and intervention groups at different times (score 10 from checklist performance test)

	Traditional group		Intervention group	
	Mean	SD	Mean	SD
Before intervention	5.83	1.76	5.95	1.50
After intervention	4.84	1.30	8.03	1.48
Score difference	0.98		2.07	
Paired t-test	8.27		20.01	
p-value	0.001		0.001	

Mann-Whitney tests: -6.495, P value: 0.001

Comparison between the App scores and practical scores of the two groups after intervention: Data normalization was analyzed using the Shapiro-Wilk statistical test. The results showed that, the significant level of post-test scores in the traditional and intervention groups was more than 0.05. Analysis was used to examine the mean of different groups in three categories (poor, moderate, and good from observer). The results also show that, in the intervention group, the mean score of the App was similar in three groups (poor, moderate, and good) (p-value >0.05). The results show that, the mean scores of the intervention group at moderate and good levels increased compared to the traditional group (Table 3).

Table 3: Comparison of the practice scores in different groups after intervention

Variable	Traditional group		Intervention group	
	n	%	n	%
Practice				
Poor	24	60%	4	10%
Moderate	13	32.5%	16	40%
Good	3	7.5%	20	50%
P value	0.001		0.004	

Investigating the relationship between the App, theoretical, and hands-on scores after intervention: According to Table 4, the results show a significant relationship between the App score and the hands-on score (p-value <0.05).

Table 4. Investigating the relationship between App, theoretical, and practice scores after intervention

Variable	Theoretical score	App score	Practical score
Theoretical score	1		
App score	0.074	1	
Practice score	0.045	0.307*	1

* Significant in 0.01

Figure 1: The first page of puzzle app

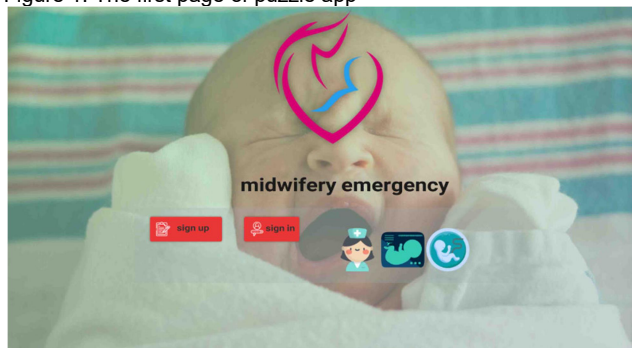


Figure 2: Number of the cases in user pages

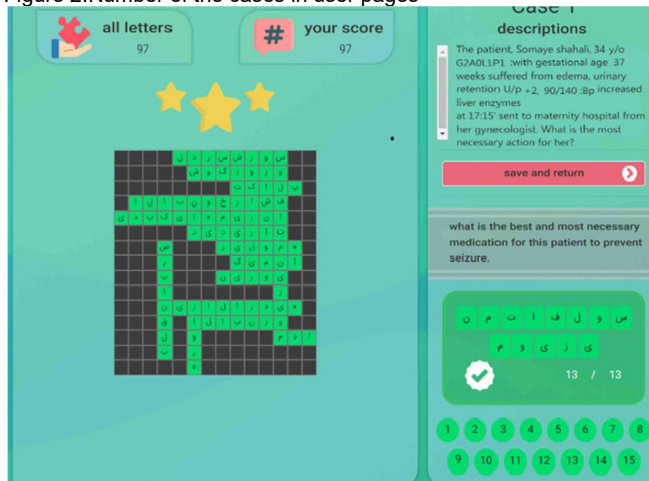


Figure 3: Case and cross word tables in game

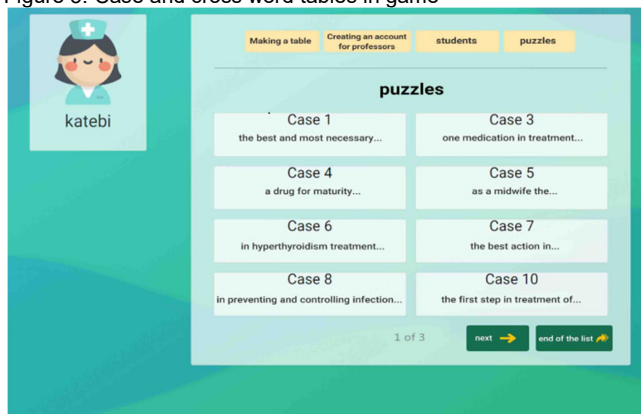


Figure 4: Cases in app and choice of cases for starting the game

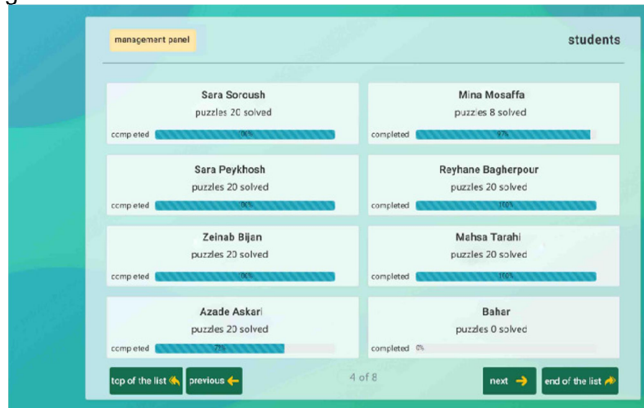
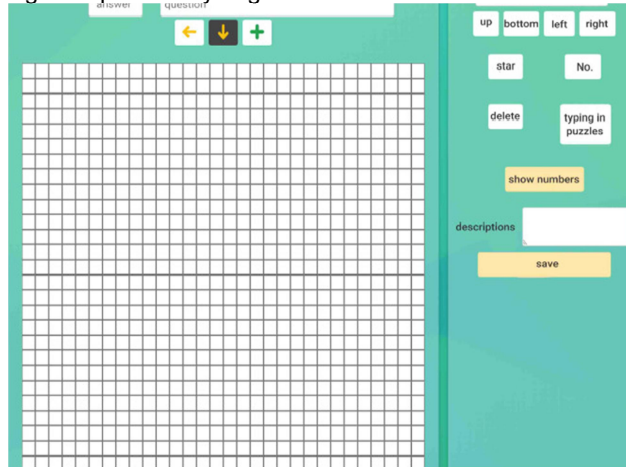


Figure 5: potentiality of game for construct table from



DISCUSSION

Educational games facilitate a context to achieve from new to the first experiences by providing an enjoyable and attractive environment⁸. The purpose of the present study was designing, developing, and evaluating the midwifery emergency curriculum (by considering its importance) in a framework of clinical-case based crossword game among the midwifery students of the Islamic Azad University of Jahrom in 2018-2019. Based on the results of the present study, and by comparing the hands-on scores between the two traditional and intervention groups, the results show that the mean score in the traditional group decreased from 5.83 prior to the study to 4.84 after performing the intervention, which was statistically significant (p-value <0.05). In the intervention group, the mean hands-on score increased from 5.95 prior to the study to 8.03 after performing the intervention, which was statistically significant (p-value <0.05). The results of O'Leary's study, by comparing satisfaction and learning through using the traditional method and educational games in teaching ectopic pregnancy showed that, the students' scores were higher than the traditional method, and student engagement to enjoy learning in this method was more than traditional methods⁹. The Bhoopathi study aimed at

reviewing the impact of using the educational games on mental health lessons. The results of the comparisons of the analysis showed that, the students' scores increased to 10% by applying the game strategy, the amount of which shows 6 points higher related to the control group¹⁰. Boeker et al., in the study of the impact of game-based e-learning as an intervention study, reported that, e-learning students performed significantly better on the cognitive test than the students in the other group¹¹. Luchi et al., in their study, investigated the effect of an educational game on the students' learning in action potentials. In all experiments, the students who played the game performed better in the assessments¹². Lee and Hammer's (2011) have shown that, educational play can be considered as effective on the students' learning, and also enhances the students' problem-solving skills in a complex way; since the book contents are not very similar with the real world, reading it cannot engage the students with real issues, so these students are afraid of facing real issues. However, in the present study, with the engagement of the students through the game, we observed a significant increase in his hands-on score, especially in the intervention group. Theoretically, although both groups showed an increase in the scores, the increase was greater in the intervention group. Furthermore, it worth noting that, there was a significant relationship between the App and the hands-on scores (p-value <0.05); and the mean scores of the intervention group at moderate and good levels had an increasing trend compared to the traditional group. Therefore, combining the training with educational games can raise some fundamental challenges at academic and educational levels including motivation, interaction, and collaboration between the learners to enhance their performance^{15,14}. Nicola Whitton (2010) in his book of Digital Games and Learning stated that, puzzle games are more suitable for learning and reminding contents of the facts¹⁶. Also, Wilson et al., in 2009, in an article entitled "Matching the Elements of Digital Games and Learning Objectives", explained that, puzzle games are ideal for learning the expressive knowledge and facts¹⁷; which is compatible with the results of the present study. The intervention group scores at intermediate and good levels indicated significant increases compared to the traditional groups.

Another study showed that, game in education have efficacy, can improve learning, and bring deep understanding of concept¹⁸⁻²³.

Overall, review of articles showed that, a game-based learning approach may be effective on facilitating the students, and ready them for 21st century skill development²⁴.

CONCLUSION

According to the results of the present study, using mobile-based puzzle games besides their availability can provide a context for the effective use of technology in the field of learning and changing the learning environment. If this method follows the technical educational standards based on numerous articles associated with fun and attractive learning, it can affect learning and retention and fulfill better education outcomes that are currently concerns to all medical education policymakers.

Conflicts of interest: No potential conflict of interest relevant to this article was reported.

Acknowledgement: I appreciate all students participate in this study.

REFERENCES

- Fraser MF, Cooper MA. Myles textbook for midwives. 15th ed. Philadelphia: Churchill Livingstone; 2009.
- Papastavrou E, Lambrinou E, Tsangari H, Saarikoski M, Leino-Kilpi H. Student nurses experience of learning in the clinical environment. *Nurse Educ Pract* 2010; 10(3): 176-82. <https://doi.org/10.1016/j.nepr.2009.07.003>
- Kuper A, D'Eon M. Rethinking the basis of medical knowledge. *Med Educ* 2011; 45(1): 36-43. <https://doi.org/10.1111/j.1365-2923.2010.03791>
- Kay D, Pasarica M. Using technology to increase student (and faculty satisfaction with) engagement in medical education. *Advances in physiology education*. 2019 Sep 1;43(3):408-13. <https://doi.org/10.1152/advan.00033.2019>
- Kerby J, Shukur ZN, Shalhoub J. The relationships between learning outcomes and methods of teaching anatomy as perceived by medical students. *Clin Anat* 2011; 24(4): 489-97. <https://doi.org/10.1002/ca.21059>
- Yee Leng E, Zahbte Wan Ali W, Baki R. Computer games development experience and appreciative learning approach for creative process enhancement. *Computers & Education*. 2010 Nov 1;55(3):1131-44. <https://doi.org/10.1016/j.compedu.2010.05.011>
- Baid H, Lambert N. Enjoyable learning: the role of humour, games, and fun activities in nursing and midwifery education. *Nurse Educ Today* 2010; 30(6): 548-52. <https://doi.org/10.1016/j.nedt.2009.11.007>
- Mellecker RR, Witherspoon L, Watterson T. Active learning: Educational experiences enhanced through technology-driven active game play. *The Journal of Educational Research*. 2013 Sep 3;106(5):352-9. <https://doi.org/10.1080/00220671.2012.736429>
- O'Leary S, Diepenhorst L, Churley-Strom R, Magrane D. Educational games in an obstetrics and gynecology core curriculum. *Am J Obstet Gynecol* 2005; 193(5): 1848-51. <https://doi.org/10.1016/j.ajog.2005.07.059>
- Bhoopathi PS, Sheoran R, Adams CE. Educational games for mental health professionals: a Cochrane review. *The International Journal of Psychiatric Nursing Research* 2007, 12(3):1497-1502.
- Boeker M, Andel P, Vach W, Frankenschmidt A. Game-based e-learning is more effective than a conventional instructional method: a randomized controlled trial with third-year medical students. *PLoS one*. 2013;8(12). doi:10.1371/journal.pone.0082328
- Luchi KC, Montrezor LH, Marcondes FK. Effect of an educational game on university students' learning about action potentials. *Advances in physiology education*. 2017 Jun 1;41(2):222-30. <https://doi.org/10.1152/advan.00146.2016>
- Lee J, Hammer J. Gamification in Education: What, How, Why Bother? 2011. 1-5 p.
- Landers RN, Landers AK. An empirical test of the theory of gamified learning: The effect of leaderboards on time-on-task and academic performance. *Simulation & Gaming*. 2014;45(6):769-85. <https://doi.org/10.1177/1046878114563662>
- Deterding S. Gamification: designing for motivation. *Interactions*. 2012;19(4):14-7. <https://doi.org/10.1145/2212877.2212883>
- Whi Whittin N. Digital games and learning: Research and theory. Routledge; 2014 Mar 26.
- Shute VJ, Ventura M, Bauer M, Zapata-Rivera D. Melding the power of serious games and embedded assessment to monitor and foster learning. *Serious games: Mechanisms and effects*. 2009 Aug 5;2:295-321
- Souvignier E, Kronenberger J. Cooperative learning in third graders' jigsaw groups for mathematics and science with and without questioning training. *British Journal of Educational Psychology*. 2007 Dec;77(4):755-71. <https://doi.org/10.1348/000709906X173297>
- Guilln-Nieto V, Aleson-Carbonell M. Serious games and learning effectiveness: The case of its a deal. *Computers & Education*. 2012;58(1):435-48.
- Doymus K, Karacop A, Simsek U. Effects of jigsaw and animation techniques on students' understanding of concepts and subjects in electrochemistry. *Educational technology research and development*. 2010 Dec 1;58(6):671-91. <https://doi.org/10.1007/s11423-010-9157-2>
- Von Wangenheim CG, Savi R, Borgatto AF. SCRUMIA—An educational game for teaching SCRUM in computing courses. *Journal of Systems and Software*. 2013 Oct 1;86(10):2675-87. <https://doi.org/10.1016/j.jss.2013.05.030>
- Mosalanejad L, Razeghi B, Ifard SA. Educational Game: A Fun and team based learning in psychiatric course and its effects on Learning Indicators. *Bangladesh Journal of Medical Science*. 2018 Sep 19;17(4):631-7. DOI: 10.3329/bjms.v17i4.38328
- Mosalanejad L, Abdollahifard S. Put Aside the Traditional Classroom and Use Effective Technology: Puzzles-Entertaining Ideas for Educating Psychiatric Diseases. *P J M H S*; 13(2):519-24.
- Qian M, Clark KR. Game-based Learning and 21st century skills: A review of recent research. *Computers in Human Behavior*. 2016 Oct 1;63:50-8. DOI: 10.1016/j.chb.2016.05.023