

**Title:**

Examining Story-Telling vs. Board Game With Community Health Nursing Students Toward Improving Intimate Partner Violence Education

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**Session Title:**

Education Posters Session 2

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**Keywords:**

intimate partner violence, lecture/story-telling and simulation board game

**References:**

Bradbury-Jones, C., Appleton, J., & Watts, S. (2016). Recognising and responding to domestic

violence and abuse: the role of public health nurses. *Community Practitioner*, 24-28.

Ladewig, P., London, M., & Davidson, M.R. (2017). Contemporary maternal-newborn nursing care (9<sup>th</sup> ed.). New York, NY: Pearson.

Pourciau, C.A. & Vallette, E. (2015). Violence. In M. A. & M. McEwen, (Eds.), Community/Public Health Nursing (pp. 543-549). St. Louis: Saunders/Elsevier.

**Abstract Summary:**

Literature suggest the prevention and identification of intimate partner violence (IPV) is challenged by subtle cues, absent warnings, and lack of IPV education in the classroom. This quasi-experiential study evaluates the effectiveness of two IPV teaching strategies used in one undergraduate nursing school.

**Learning Activity:**

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to discuss three behaviors associated with intimate partner violence.	Behaviors associated with IPV include, but are not limited to: battering that causes injury, psychological abuse, sexual assault that contributes to social isolation, and intimidation.
The learner will be able to identify one evidence-based teaching strategy evaluating the use of IPV education in undergraduate nursing students.	Lecture delivered in storied format and simulated board game have been studied regarding their use in teaching IPV in undergraduate nursing.

**Abstract Text:**

Over 10 million incidents of Intimate Partner Violence (IPV) occurs annually in the United States (CDC, 2015). IPV formerly known as domestic violence, is a pattern of coercive behaviors by someone who is or was in an intimate relationship. Behaviors may include: battering that causes injury, psychological abuse, sexual assault that contributes to social isolation, and intimidation (Pourciau & Vallette, 2015). The World Health Organization [WHO], (2013), reports 38% of all female murders are committed by an intimate partner. Unfortunately, prevention and identification of victims is challenged due to warning signs being subtle or absent (Ladewig, London & Davidson, 2017; Bradbury-Jones, Appleton & Watts, 2016; Tufts, Clements & Karlowics, 2008, & Schwartz, 2007), and lack of IPV education occurring in the classroom (Tufts et al., 2008). The purpose of this pilot study [IRB # 29896-17-0023] is to provide insight into learning mastery, critical thinking, and to identify instructional strategies for improving IPV education. A convenience sample of approximately 40 undergraduate baccalaureate nursing students in a community health course in one south eastern state is intended to participate in this study. The research method will be quasi-experimental with a pretest/posttest design. There will be two groups of students enrolled in one of two seven week blocks during the spring of 2017. Block 1 students will receive IPV information delivered in storied format using PowerPoint to highlight key points. Block two students will receive IPV information through a simulated board game. The same questions will be given to students during the information session for those who consent to participate. Participants will receive the same questions immediately following lecture content and at the end of the course. Different yet similar questions will be given during the final exam to address concerns of students remembering questions. An independent sample *t*-test will be used to compare the mean scores between and within the two groups. The result from this pilot study is intended to identify best practices to improve knowledge acquisition and retention, and to identify the effectiveness of two instructional teaching strategies used in IPV education.