

## Intervention Possibilities of Violence Against Children in Interdisciplinary Teamwork Using Simulation and E-Learning Methods

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### Abstract

**Background:** The current short article is about intervention possibilities of violence against children in interdisciplinary teamwork using simulation and e-learning methods. Based on cooperation of Tallinn Health Care College and Security Science Academy, Estonia. All forms of violence are deplorable, especially violence against children. In Estonia the legal framework of intervention for police and the healthcare has been developed, but the cooperation between the institutions is still weak, and therefore a victims support is too low and not effective

**Purpose:** To describe how students of two higher education institution (Tallinn Health Care College & Academy of Security Sciences) learn to intervene possibilities of violence against children in interdisciplinary teamwork using simulation and e-learning methods. The emphasis is on common learning of healthcare students and police students.

**Method:** Descriptive method. Creation of learning subject using simulation and e-learning methods.

**Conclusion:** Students learned better to understand the cooperation between the police work and healthcare. The knowledges and skills they acquired will allow them to offer for victims and family members the effective complete solutions. Students were satisfied with the subject and made some proposals to improvement.

**Keywords:** Violence against children, healthcare, police work, interdisciplinary teamwork, simulation, e-learning.

### Introduction

Domestic violence is one of the most common forms of violence and the challenging public health problem as well. Violence itself is the global problem. It occurs in every country in the world in a variety of forms or settings and is often deeply rooted in cultural, economic, and social practices [1]. The term 'domestic violence' is used in many countries to refer to partner violence, but the term can also encompass child or elder abuse, or abuse by any member of a household [2]. Many studies have found an association between domestic violence and negative social and health consequences for children [2-4].

Violence is not an inevitable consequence of the human condition. The full range of all forms of violence against children are only now becoming visible, as is the evidence of the harm it does. The visible violence is more pronounced and intervention is less complex. A hidden dimension of violence against children is more complicated and harder to notice and intervene. Governments are increasingly acknowledging and enforcing their human rights obligations to children, and recognising the prevalence and long-term impact of

violence [1].

Estonian context gives the statistical overview. According to social service and police, in two thirds of cases children were registered as sufferers in domestic violence in 2017. In the same year 515 sexually abused cases against children were taken place in Estonia. Most dangerous is hidden violence [5]. In Estonia the different guides describe the identification, intervention and also cooperation with other specialists or institutions. Also in Estonia a domestic violence and violence against children is a criminal offence.

Estonia has developed a strategies to prevent and reduce violence against children. The main goal is a prevention and change the attitude in the society. All forms of violence are deplorable, especially violence against children. In Estonia the legal framework of intervention for police and the healthcare has been developed, but the cooperation between the institutions is still weak, and therefore a victims support is too low and not effective. Necessity for common learning subject of Tallinn Health Care College and Security Science Academy is caused by the need to offer for victims (children) the effective complete solutions, combining the healthcare and police work intervention.

**Method and process description**

This research uses a descriptive method. Creation of learning subject and learning process description.

Process description. The Creation of joint learning subject. Learning subject volume is 4 ECTS (European Credit Transfer and Accumulation System), i.e. 104 h. The participating students were from Tallinn Health Care College (midwife and nurse students) and Estonian Academy of Security Sciences (security and police students). 25 students took part in the learning process. The Subject is built by 4 lecturer, IT and simulation support specialist, advisers and guest speakers.

Combined course design contains: e - learning in Moodle Environment and contact learning. E-learning in Moodle environment contains video lectures, videos, evidence-based literature, examples of cases, learning tests, forums and students feedback. Contact learning contains lectures, seminars and simulation based learning. In theory, different themes were considered like theoretical grounds and risk factors of domestic or other violence, coping, prevention etc., effects of violence on children health, legal frames (police work and healthcare), case study, network cooperation between helpers and sensitivity training.

The main method is simulation-based learning. In connection with rapid technology development, the simulation training has developed considerably and its integration into the curricula has increased [6]. Simulation is defined as a technique to replace or amplify real experiences with guided experiences that evoke or replicate substantial aspects of the real situation in a interactive manner [7, 8]. The simulation, as active learning method, has been implemented in both academic and service-based institutions [9]. Active learning enhances the possibilities of creating connections [10], gives confidence and rising professionalism. Students may make mistakes during the simulation, but will not receive any negative experiences [11, 12]. Simulation education makes intervention more efficient and safer [13].

In the joint learning subject of two higher education institution were used animation simulation training and simulation in vivo. Animation simulation based on virtual reality training software XVR programme. XVR is virtual reality training software for education, training and assessment of incident response safety professionals, such as police, fire and medical services [14]. Students can create, build and solve different animation tasks about how to intervene violence against a children.

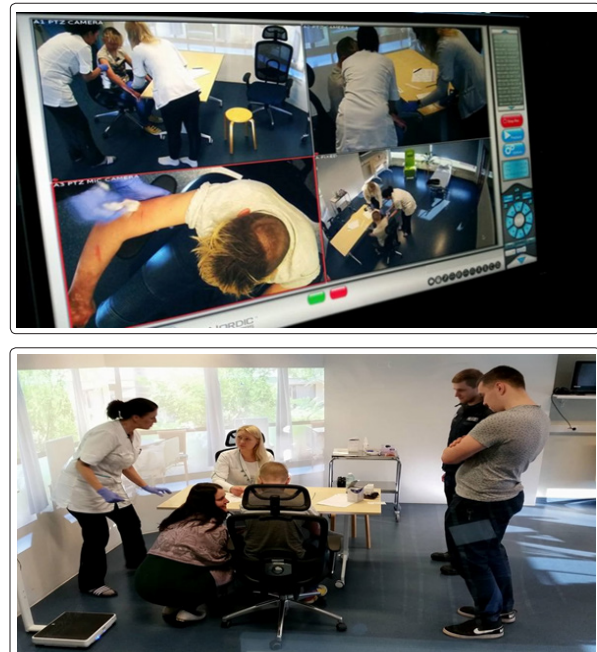


**Figure 1:** Sample of XVR animation

Simulation in vivo took place in the simulation centre of Tallinn Health Care College. Simulation training class is started with quick briefing. All participants are given instructions and their self-assigned roles. All simulations are video recorded. Students in the debriefing room observe video and evaluate situation management.

<p>Description of the case:</p> <p>During the routine health control school nurse detects that the 10-year old boy's body has the visible signs of violence: bruising, wound, scratches, etc. In the trustful atmosphere, the boy recognizes that stepfather beats and kicks him and mom is unable to do anything. A School nurse informs a social service worker and police.</p>	<p>Debriefing room students activities:</p> <ul style="list-style-type: none"> <li>✓ To watch simulation performers activities</li> <li>✓ To fill the body card</li> <li>✓ To notice mistakes and efforts (healthcare and police staff)</li> <li>✓ To map suggestions</li> <li>✓ To give additional suggestions</li> </ul>
<p>Performers (actors):</p> <ul style="list-style-type: none"> <li>✓ Victim (child)</li> <li>✓ Nurse students</li> <li>✓ Police students</li> <li>✓ Social worker</li> </ul> <p>Their activities</p>	<p>Necessary supplies and instruments:</p> <p>Gloves, body map, documenting tools, solutions, bandages, patches, blood pressure apparatus, stethoscope etc.</p>

**Figure 2:** „Window“ of instructions and activities for stutens in simulation (created by M. Merits)



An important part of the simulation-based learning is debriefing. In a debriefing teachers and students discuss and analyse the simulation. Critical assessment and feedback is not given. It is important to find the real causes of problems and errors, deviations and action deficiencies. A goal is to emphasize and reflect the process and its performance. To discuss what is important stages and process in healthcare and police work such as create and hold a contact, suitable assistance, networking between the institutions, proper documentation etc.

A significant part of subject is sensitivity training for helpers. The goal of sensitivity training is:

- ✓ avoiding re-victimization, it is important to ensure skilful and empathic interviewing and examination;
- ✓ understanding the need for victim protection, respecting a victim in the best way;
- ✓ understanding the victim's difficult mental and emotional situation and fears;
- ✓ a crime victim's expectations for police officers and for healthcare workers;
- ✓ the necessity of forwarding help-related information to victims, how to forward information and what to pay attention to while doing so.

## Conclusion

What was successful? Learning process-based assessment is given by the participating students, i.e. learning by doing. Also is collected students feedback by the questionnaire. Noted is out of frame study process - the teaching and learning took place in two different college. In the opinion of the students the subject is innovative, interesting and necessary, especially simulation-based learning and training. Students made some proposals to improvement. The Students of Tallinn Health Care College and Academy of Security Sciences learned better to understand the cooperation between the police and healthcare work. The knowledges and skills they acquired will allow them to offer for victims and family members the effective complete solutions. Students were satisfied with the subject. The subject needs improvement and the cooperation between of the two institutions will be continued.

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