

### **Community Development Free Space Programme – Application Form**

Please complete and e-mail with an outline plan and delivery schedule to [chris@slededucationuk.net](mailto:chris@slededucationuk.net) using the 'subject line "UK Education – Community Development Free space programme'. Closing date for applications: Monday 2<sup>nd</sup> July 2007.

1. Background details	
Real Life Names:	<b>Maged N Kamel Boulos</b> (Faculty of Health and Social Work, University of Plymouth, UK), <b>Steve Wheeler</b> (Faculty of Education, University of Plymouth, UK), and <b>Susan Toth-Cohen</b> (Jefferson College of Health Professions, Thomas Jefferson University, USA)
Organisation / Group: (if applicable)	<b>University of Plymouth, UK</b> (main), and Thomas Jefferson University, USA (both institutions are happy to join the project and are already running Second Life on campus/over their networks)
Department: (if applicable)	Faculty of Health and Social Work and Faculty of Education (Plymouth), Jefferson College of Health Professions (USA)
Address:	Faculty of Health and Social Work (Centre Court), University of Plymouth, Drake Circus, Plymouth, Devon, PL4 8AA, UK
Contact Emails:	<a href="mailto:mnkamelboulos@plymouth.ac.uk">mnkamelboulos@plymouth.ac.uk</a> , <a href="mailto:swheeler@plymouth.ac.uk">swheeler@plymouth.ac.uk</a> , <a href="mailto:Susan.Toth-Cohen@jefferson.edu">Susan.Toth-Cohen@jefferson.edu</a>
Job Title:	<b>MNKB:</b> Senior Lecturer in Health Informatics, <b>SW:</b> Senior Lecturer in ICT and Education, <b>STC:</b> Associate Professor

**N.B.: A delivery schedule (timeline) can be found at the end of the attached *FurtherDetails\_MNKB-et-al\_SLproposal.pdf* document.**

## 2. Project Description

### **Name of project:**

#### **A 'Sexual Health' Public Education and Outreach SIM in Second Life**

### **Rationale:**

Education on sexual health for young adults is a critical need for the international community. The negative consequences of sexually transmitted infections, unintended pregnancy, and abusive sexual relationships are significant in terms of their impact on physical and mental health, as well as their costs to the individual and society (IAG, Choosing Health? A consultation on action to improve people's health, 2004). While many programs have been developed to improve sexual health, such services are under-utilized (IAG on Sexual Health & HIV Annual Report, 2004/05). Thus, new approaches for delivering services to the young adult population are needed. Second Life represents a relatively new and untested three dimensional (3D) virtual learning environment, in which there is enormous potential for the development of creative and dynamic educational experiences. The mean age of Second Life residents on the main grid is **33** (CDC, 2007). Second Life is also known for its large and growing population (7,250,413 residents on 15 June 2007) and for the large numbers of adult/pornographic places/businesses in it, which are among the most popular places in the virtual world. Thus, Second Life seems to be an excellent medium to deliver a 'sexual health' education programme and to reach out to potentially hundreds of thousands of people in the most critical target age groups for such programmes. The proposed project will provide a comprehensive public education program for sexual health, integrating a wide spectrum of resources within an engaging, informative virtual environment. Thus, users will have opportunities to connect with extensive resources already available without the stigma often associated with accessing such resources. This is critical, because stigmatization (or the fear of it) is a significant impediment to sexual health education (IAG, Choosing Health? A consultation on action to improve people's health, 2004). The proposed program will thus address the point that "there are no hard to reach populations, only hard to reach services" (IAG on Sexual Health & HIV Annual Report, 2004/05, p. 16). Additionally, Second Life enables unique affordances such as usage tracking through computer metrics (CDC, 2007)

### **Outline of project:**

In this project, we will develop and implement a sexual health education programme targeting young adults in Second Life. We will collect data from users as to their information needs and their response to the program. We will track the development process systematically and use the "lessons learned" to suggest best practices for delivering sexual health programming in multi-user virtual environments (MUEs) and make recommendations for incorporating MUEs into comprehensive sexual health programmes.

### **Aims and Objectives:**

- Design and implement a sexual health education programme targeting young adults that focuses on:
  - prevention of sexually transmitted infections (STI's),
  - prevention of unintended pregnancy,
  - promotion of equitable sexual relationships;
- Develop methods for systematic data gathering on users' sexual health concerns and response to programming in MUEs;
- Identify best practices for delivery of health education programmes in second life and other multiple user virtual environments;
- Develop recommendations for ways that MUEs can contribute to comprehensive health education programmes that include multiple educational venues.

### **Which outcomes will be delivered through your programme?**

This program will provide descriptive data that can be used to inform future development of health education programs in MUEs, including:

- prevalent topics of concern (information needs) related to sexual health by participants in Second Life and their assessment of the quality of the in-world sexual health programme
- a preliminary picture of what strategic engagement with a 3D virtual world focused on sexual health entails (on the short and longer terms), leading to recommendations on how to prepare for, and make the best and proper use of these technologies for public health education. This will include: 1) identifying the skill sets that are most critical/essential to designing and implementing a sexual health programme in a MUE; 2) determining how to address known barriers of Second Life such as maximum number of avatars and the optimal mix of SL and other venues such as Internet sites, videoconferencing; and 3) determining the efficacy of specific promotional strategies for the Sexual Health Programme.

**How many users will be targeted (if applicable)?** The whole Second Life audience of late teens and young adults are potential users, but the maximum number on the parcel would be around 30-40 avatars at any one time. We

hope the associated Second Life Groups that we are also planning to create and material exchanged through them will grow to attract and accommodate dozens or even hundreds of users and supporters. On-demand access to seminar recordings and other material plus means of asynchronous communication on the parcel should also help those who cannot, e.g., for technical/SIM capacity reasons, attend a live event/communicate with us in real time.

**How many project support staff will be involved in the delivery and support of the programme (if applicable)?**

The three applicants, plus the invited speakers during the live events, and any volunteering supporters during the course of the project.

**Describe the expected user and / or staff experience in using Second Life:**

Users will encounter an engaging and informative virtual environment with a Sexual Health theme, in a relaxed gathering place that promotes socialization. They will gain access to a variety of sexual health information sources through:

- a 'teleport station' to other relevant places in Second Life, e.g., specific locations in Healthinfo Island, as appropriate;
- a 3D visual browsing interface to existing 2D Web-based quality collections/info/news feeds and other services about the subject, and an in-world search interface for above collections/material;
- feedback/'leave a message'/'ask us a question' objects, with Staff avatars available in-world at specified times for visitors to contact them in real time;
- chatbots who greet visitors/provide some automated but "intelligent" answers to their questions, e.g., run tweaked Google searches and provide the results back to users in-world;
- a public 'presentation slide display unit' with navigation controls for on-demand access by visitors to various presentations about the 3 primary topics;
- virtual plasma screens streaming relevant pre-recorded videos and live video webcasts;
- an audio channel with suitable 'talk shows', health podcasts, and relaxing background music;
- skyboxes for private one-to-one counselling. Skyboxes can be used (instead of/in addition to private IM) to ensure privacy for realistic one-to-one visitor-advisor/counsellor voice and text consultations (e.g., in relation to personal sexual health and contraception matters);
- scripted in-world discussion boards which users can edit (in-world) to voice their opinions and engage in asynchronous discussions (user's input is 'persistent' on the board);
- See more details in attached *FurtherDetails MNKB-et-al SLproposal.pdf*

Staff will have the experience of experimenting with editable and reusable Second Life learning objects/containers and with language tools/mashups like Babblar <http://www.maxcase.info/babblar3/> to reach out to non-English speaking audiences across Europe and beyond. We will also conduct regular meetings in world to discuss emergent issues and assess progress to date. Additionally, we expect to network with other health and human service professionals and organizations internationally. Thus, the proposed program would provide a springboard for further development of sexual health and other community health programming. Dissemination of information to both staff and users will be enhanced through the Group Notices function available in Second Life.

**Impact measurement:**

**The use of Second Life will have an impact on your communities or target group(s). Impact may include differences in: collaborative skills, confidence levels, attitudes to learning, communication skills, engagement, participation, democracy, negotiation etc.**

For impact on users, we will collect and analyze statistics on overall usage of the SIM as well as avatar engagement with specific components described above. We will also track trends in user concerns over the 1 year grant period. Measurement of the impact on staff will take place through systematic tracking of the development and implementation processes (targeting the outcomes listed in the section above).

**Analysis**

**The final report will ask you to describe the difference made by your project. How will you seek to measure the difference?**

The project team will ask participants to respond to a range of questions about their attitudes toward sexual health issues, and evaluation of their learning experience within Second Life. We will collate these responses into a coherent 'snapshot' of the opinions of Second Lifers and report it in an accessible style. In this way, the project will deliver key data that will enable designers of future virtual 3D learning environments to create effective and appropriate learning materials and experiences. The data, in both quantitative and qualitative form will inform health professionals about the demographics and attitudes of SL users and enable them to plan for future provision of health education within this nascent and so far uncharted, yet rapidly expanding social phenomenon.