The development of a self-reflective ‘Magic Triangle’ tool
by ife obikoya
About me

My name is Ife, and I am a second-year psychology student studying at the University of Nottingham.

I have a strong interest in Health Psychology and Mental Health research, which is why I was initially interested in the magic triangle tool project.
What is the Magic triangle tool?

The Magic triangle tool is a self-assessment tool created as an alternative to the conventional forms of questionnaires that health care patients and other individuals use at various stages in their lives.

Existing questionnaires are often comprised of simple computer algorithms that limit the user's output and uses language to guide the user through the questionnaire. As a result, standardised questionnaires have become dull and predictable. By contrast, The Magic triangle tool has a flexible, bottom-up design which allows for a high level of user engagement. Additionally, it provides both quantitative output and quantitative output, making it ideal for a range of different applications.
Aims and objectives

► The existing tool is a prototype developed for maxillofacial surgery patients. The project aims to adapt the current tool for different demographics of people suffering from stress.
► Provide output that will support optimal coping strategies and long term resilience.
► Explore how the current output can be changed from quantitative to meaningful output that evokes self-reflection.
Pick three thing to compare

- Appearance
- Eating/drinking
- Fatigue
- Intimacy/sex
- Pain
- Talking
- Work

If you’re done you can:

- Tell us about another problem
- Finish
Magic triangle

1. Move the red dot to show how important each item is to you.
2. Adjust the slider to describe how severe the problem is.
3. Click on a label to give further detail.

If you're done you can:
Tell us about another problem or Finish.
<table>
<thead>
<tr>
<th></th>
<th>LEVEL 1</th>
<th>LEVEL 2</th>
<th>LEVEL 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appearance</td>
<td>33%</td>
<td>Physically</td>
<td>32%</td>
</tr>
<tr>
<td>Eating/drinking</td>
<td>33%</td>
<td>Mentally</td>
<td>35%</td>
</tr>
<tr>
<td>Fatigue</td>
<td>33%</td>
<td>Emotionally</td>
<td>33%</td>
</tr>
<tr>
<td>Overall severity</td>
<td>68%</td>
<td>Overall severity</td>
<td>74%</td>
</tr>
</tbody>
</table>

**LEVEL 3**

<table>
<thead>
<tr>
<th></th>
<th>Physically</th>
</tr>
</thead>
<tbody>
<tr>
<td>Everyday stuff</td>
<td>82%</td>
</tr>
<tr>
<td>Gentle exercise</td>
<td>0%</td>
</tr>
<tr>
<td>Strenuous excercise</td>
<td>18%</td>
</tr>
<tr>
<td>Overall severity</td>
<td>69%</td>
</tr>
</tbody>
</table>
What approach did I use?

I began by researching the demographic I wanted to base the development of the Magic triangle tool on.

I read multiple articles about Health psychology. These articles highlighted how illness affects various different aspects of a person's life, such as their wellbeing, family life and behaviour.

I eventually came across an article that helped me decide what demographic that I wanted to focus on.
Medical trauma/Stress occurs as a direct consequence of an association with a medical setting, such as interactions with doctors, hospital diagnoses, etc. This results in a subjective interpretation of the event, which can have both psychological and physiological consequences.
Demographic

Parents of children who have experienced a medical event.

"Medical Event"

- Medical diagnosis.
- Medical procedure.
I planned to conduct interviews with individuals within my chosen demographic as this would allow me to gain more insight into the needs of my potential users. This required me to complete an ethics application which included an:

- Information sheet
- Interview schedule
- General application

After sending the application, I was advised by the ethics committee to include a printout transcript that detailed how I would walkthrough of the current version of the tool with my participants.

Due to time limits, we decided to develop the magic triangle tool based on existing literature.
Patterns identified in the literature:

- Parents need to establish normality after their child's medical event.
- Difficulty in communicating with medical professionals.
- Coping strategies used by parents: Positive appraisal.
Parental responses to child experiences of trauma following presentation at emergency departments: A qualitative study

Parenting Stress Among Caregivers of Children With Chronic Illness:
A Systematic Review

Evaluating different stressors among parents with hospitalized children

Parents and carers’ experiences of seeking health information and support online for long-term physical childhood conditions: a systematic review and thematic synthesis of qualitative research
Current Input: Screen shot

Communication

Level 1

Children

Level 2

Recovery

Level 3

Treatment

Level 4

Talking about behavioral changes
Talking about physical changes
Talking about wellbeing
Talking about the procedure
Talking about the diagnosis
Talking about aftercare
Potential Output: Next week

- Progressive muscle relaxation
- Energy Conservation
- Problem-based coping strategies

resilience:
“an ability to recover from or adjust easily to misfortune or change.”

—Merriam-Webster Dictionary
Overall experience

- Nice to have such a large contribution to the project.
- I felt fully supported by my supervisors.
- I enjoyed working with Supervisors from different disciplines.
- Working from home was sometimes challenging, it had some advantages.
- Overall a unforgettable experience.
Special thanks

SARAH, ANGELIKA, JO AND HANA
Thank you for listening