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applications and advantages is the most critical element in the implementation of paper assessment solutions such as LCMS+.

National Board of Medical Examiners (NBME) exams were also introduced as a benchmark to assess the performance of KCMUCo students. The NBME exams in Anatomy for MD one students and Internal Medicine for MD five students have been administered annually since 2011, making KCMUCO the first University in Africa to successfully administer NBME exams.

Along with the status of e learning, the presentation will cover the experiences, challenges, solutions, and achievements encountered thus far on the integration of information communication technology (ICT) at KCMUCo. Other medical schools will be able to use KCMUCo's experience to adopt ICT in order to enhance medical education.

Game On! Lessons Learned from Joint Development and Production of Health Games

Harro Leupen & Rob Willems, Hanze University of Applied Sciences, The Netherlands; George Onyango & Peter Odongo, HelpHeal Trust, Kenya

In September 2010, Hanze University of Applied Sciences in Groningen (the Netherlands) started a 20-week international program titled *GameOn!* The object of this program is for students to develop serious games, that aim to help the youth become aware of social and/or health related issues.

Since the start of *GameOn!* students have worked on a number of different projects, all related to education through the use of interactive media:

- In 2010-2011 the *GameOn!* program focused on children and disability. The goal of the game was to create awareness and acceptance of children with a disability among in-school children in South-Sudan. The client for this edition was War Child; a Dutch NGO that aims to help children in war affected areas
- In 2011-2012 the subject was Gender Relations. The objective of the game was to introduce topics of gender relations and choices around sexual behaviour. The game had to be complementary to the War Child training program in Sri Lanka.
- In 2012-2013 the assignment was to develop a game in the battle against malaria. The game would be a success if children were able to report signs of malaria clearly, identify malaria transmission methods, tell what times of the day mosquitoes bites occur, state cheap and effective ways of preventing malaria, understand the importance of going to the hospital and completing treatments. The client for this assignment was HelpHeal

Trust in Kenya. In January 2013 the games were tested in Kenya by HelpHeal Trust and team members from Hanze University. At three different primary schools, 26 children played the games and gave feedback. With this feedback the games were finalized and then shipped to the client.

- In 2013-2014 the subject of the game was HIV/AIDS. Different teams of students, in collaboration with Kenyan students, set out to develop PC and smartphone games addressing social (taboo's, myths and isolation), prevention and treatment (adherence to medicine) issues.
- In 2014 -2015 the subject was Personal Hygiene. The smartphone games aim to educate children about diseases associated with poor hygiene and appropriate behaviour (e.g.: hand washing). In collaboration with students of the Erasmus Medical University of Rotterdam, games were developed for primary school children in the Volta region of Ghana and the Nyanza region in Kenya.
- In 2015-present the subject is Reproductive Health. Students are developing games for smartphones that aim to educate adolescents in Senegal (Dakar) and the Ho-region in Ghana about sexual health. The games are commissioned by Oneworld (London, UK) and the Otugba Foundation (Ho, Ghana).

In all these projects, specific knowledge about the target region, domain knowledge of the subject of the game, and the target group was brought in by specialists and local representatives .

The lessons drawn, in development and production, from these projects are:

1. The importance of an agile game development method that allows for regular testing, feedback moments and changes.

2. The importance of a user/player centred design and the context of playful experiences.

3. Cultural awareness in game design and development: consider and adapt to the values and beliefs of the target audience.

4. Collaboration and co-creation with local representatives in game development adds to game acceptance.

5. A very positive attitude towards the use of computers in education in the targeted areas.

Addressing and incorporating these aspects into projects may contribute in more effective and adequate (social) health games or, in a broader sense, more effective interactive media applications aimed at facilitating educational learning.