

Role plays – advantages and disadvantages.

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Type of role play	Advantages	Disadvantages
Demonstration – medical educators (MEs) as dr and patient	Medical Educator (ME) controls action No surprises Easy to match dialogue to learning objectives Learners not threatened Can be used with large audience with only 2 educators	Learners passive
Demonstration – guest expert as dr and ME as patient	ME retains some control of action Ability to demonstrate techniques for challenging consultations Allows expert to "show" rather than "tell" Learners not threatened Can be used with large audience with only 2 educators	Learners passive Expert needs to be briefed about learning objectives - risk that they may not stick to objectives
Scripted paired role play – learners as both dr and patient, they read the script to each other	Helps learners to "find the words" for challenging consultations eg taking sexual history Learners get experience being in patient role Can be done with large group with minimal educator numbers Helps to generate discussion Learners active	Needs good script
Paired role play – learners as both dr and patient, learner plays a patient they have seen (or imagined)	Helps learners to "find the words" for challenging consultations Learners get experience being in patient role for one of their own patients - deepens empathy Can be done with large group with minimal educator numbers Helps to generate discussion Learners active	Educator has limited control over what happens in consultations

Type of role play	Advantages	Disadvantages
Paired role play – learner as dr, educator as patient (Can be scripted or ad lib)	Learners get to practice, especially in areas where there may be perceived deficiencies Learner able to get immediate feedback on their performance Educator able to control direction of consultation to meet learning needs Educator able to observe learners performance (?assessment) Learner active Can be done in practice setting as part of routine supervision	Need one-on-one ratio of learners to educators Threatening for learner
Group role play – educator as pt, learners call out questions from group as dr	ME retains some control Educator able to control direction of consultation to meet learning needs Learners less threatened but still have opportunity to be active	Very artificial situation Dominant learners may dominate!
Fishbowl role play – educator as patient (can be scripted or ad lib), learners as dr, rotating roles, 2nd educator directing action	Educator/actor able to control direction of consultation to meet learning objectives Educator able to observe learners performance (?assessment) Learners active (but only 1 at a time) Learner able to get immediate feedback on their performance	Requires good quality scripts Threatening for learners High number of educators needed depending on size of group - ideal ratio 2 educators per 5-8 learners
Fishbowl role play – actor as patient (scripted), learners as dr, rotating role, educator directing action	Actors may be better able to play role of patient(?????) Educator able to control action of consultation to meet learning objectives (depending on actors ability to follow direction) Educator able to observe learners performance (?assessment) Learners active (but only 1 at a time) Learner able to get immediate feedback on their performance	Training of actors is time consuming Need very detailed scripts Actors may not stick to intention of script and go off on their own agenda Threatening for learners High number of educators needed - 1:5-8

Fishbowl Role Plays Techniques

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Planning and set up

- Be clear about learning objectives – this determines type of role play to be used
- Set the scene
- Set the roles
- Set the rules

Getting started

- “Remember, it is all just a game. It’s a chance to have some fun, and say all those things you have always wanted to say but have been too scared to do so.”
- “Whenever you have a chance to go first in something like this, it’s really good to go first. Sowho would like to go first?”
- “You don’t have to play yourself when you are being the doctor”
- “No one will be in the hot seat for more than a few minutes”
- “Remember.....no one is going to die!”

“Being really bad” game

- Clarifies difference between role and reality
- Ask someone to demonstrate a really bad example of being the doctor
- Good to do as the first exercise
- Rewards person who goes volunteers to go first
- Relaxed, fun introduction to the role play

Re-play

- Ask actors to go back to a particular point and re-play the scene
- To try alternatives, explore options/consequences or problem solve
- Opportunity to put feedback into practice
- Can ask actor in patient role to increase or decrease “resistance” to enhance teaching point

Feedback and/or coaching

- Ask audience what they thought went well
- Starts with the positive
- Involves members of the audience in the action
- Can then ask audience what they might do differently

Role rotation 1 - “Give your character one sentence of advice”

- Ask actor to stand behind their chair and give their character one sentence of advice
- To de-role actors
- Reminds audience that participants have just been acting in that role

Role rotation 2

- Invite a member of the audience to take over the role of the doctor
- Think about asking someone who has offered a coaching suggestion
 - “Would you like to show us how you would do that?”
- To explore alternatives, collect strategies, protect/rescue players
- Opportunity to see how others handle the situation

Fast forward

- Move the action forward to a different point in the consultation
- Allows facilitator to focus on most important part of the consultation

- Can be used to avoid over-emphasis on diagnostic or therapeutic aspects of consultation if they are not part of learning goals

Hidden thoughts

- Ask member of audience to stand behind one actor and say what they think are that character's hidden thoughts (or feelings)
- Looks deeper into layers of feelings, pressures, conflicts and intentions
- Opportunity to discuss the unspoken
- Involves (quieter) members of the audience in the action

Truth game

- Ask someone to play role and to be completely truthful
- To look at what's hidden, taboo or hard to say

Good cop, bad cop

- Two audience members are asked to have a debate over what one of the actors is thinking or should do next
- One plays the "good cop", one plays the "bad cop"
- This is lots of fun AND it can bring the unspoken into the discussion
- Useful for promoting discussion about sensitive issues like sexual attraction towards the patient