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## Communicating with Children

### Teaching Soft-Skills: Role play

It is important to recognise that students learn in different ways and that role-play may be a preferred method for students who learn through concrete experiences.

Role-play (RP) is widely used as an educational method for learning about communication in medical education and is generally involved in the broader context of simulations. RP acknowledges the importance of the social context of learning and has at its basis the theory of Experiential learning, which is especially important in the acquisition of skills.

Role-play activities can be performed in different ways: they can be fully scripted (all players act from verbatim scripts) or partially scripted (players have certain prompts – often an opening line). Alternatively, one player (e.g. patient) is given a description of their role while the other (e.g. student) is provided with their task. For the acquisition of patient-centred interviewing skills, for example, students play their role performing as they would in real clinical encounters. Role-players can rotate through roles (interviewer, patient, observer) within a single role-play (switching) with the intention of gaining insight into other roles or perspectives – this is a structured approach to role-play. Players can, therefore, be substituted at various points in the role-play by observers. Some role-play activities use role cards as a way of inserting new information into a role-play.

Potentially, each role may benefit students as they are encouraged to adopt different perspectives, however, introducing role-play to a group almost always meets with resistance and/or anxiety from some students.



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