Comparing the Effect of Role-playing and Lecturing on Learning the Communication Skills Among Health Workers of Kerman Health Centers, Iran

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Abstract

Background: The proper health worker-patient communication is one of the main factors that affect patients’ satisfaction and improve healthcare outcomes.

Objectives: The current study aimed at comparing the effect of the two widely used teaching methods, role-playing and lecturing, on learning the communication skills among health workers of Kerman health centers in Iran, 2018.

Methods: The current interventional study included all health workers in Kerman City as the statistical population of whom 120 selected by the census method. Then, they were randomly assigned to three groups of 40 subjects. The first group was trained by role-playing, the second group by lecturing, and the third group, as control, received no training. All the subjects completed the Barton standard relationship communication skills questionnaire before and after the intervention. The data were then analyzed in SPSS software using Wilcoxon test.

Results: The mean age of the subjects was 38.54±8.29 years, and 46.7% of them had a high school diploma; 86.7% were married, and 74.2% were females. Based on the findings, the mean score of communication skills in the role-playing group increased from 2.90 to 4.29 after the intervention, which was statistically significant (P <0.001).

Conclusion: The score of communication skills (i.e., verbal, listening, and feedback skills) in the role-playing group was higher than those of the lecturing and control groups. Therefore, it can be concluded that the role-playing method can be useful in teaching communication skills.

Keywords: Role-playing, Lecturing, Communication Skills, Learning, Health Worker

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conditions and problems in that particular situation. The four elements of thinking, emotion, insight, and action are involved in role-playing and increase the effect of role-playing on learning of communication skills.

Lecturing is another factor that likely affects learners’ communication skills. This teaching method relies on verbal practices of the lecturer, and learning is performed through listening and note-taking by the learner. Lecturing can be performed as impromptu speaking, memorizing, and preparing. Lecturing is the most effective way to convey information through which the lecturer should benefit from the extensive knowledge and good articulation and present the material to meet the audience’s needs (3).

To the best of authors’ knowledge, several domestic and international studies are conducted on the effect of the role-playing teaching method on caregiving practices in nursing students and improvement of their communication skills, as well as this method on personal and group performance of learners in improving communication skills (4). Studies on the effect of the group discussion method using lecturing teaching style on academic achievement and communication skills of Isfahan University students (5), lecturing, play, and role-playing methods on the education of nutrition during puberty (6), and two teaching methods of conventional and role-playing on students’ skills in counseling (7) also compared two teaching methods, but no research compared the effect of two teaching methods of role-playing and lecturing on communication skills.

Also, most of the studies are performed on students, and no one is conducted on health workers so far.

In spite of the high importance of communication skills as a part of the training program of health workers, there are many concerns about weak communication skills, since poor communication by health staff, such as health workers, is one of the major complaints received by health centers in countries such as the United Kingdom (8).

Since health care, education, economics, and mass communication are developing in Iran, it is essential to accurately assess the communication skills to develop and design health promotion and prevention programs. Similar studies may raise the awareness of health workers, officials, and specialists and draw attention to this stratum of society.

Methods

The current interventional study conducted in 2018. All health workers of Kerman health centers were considered as the statistical population of the study (n=126), of whom 120 eligible subjects were selected by census sampling (six subjects were excluded due to not attending the meetings) after obtaining the informed consent and providing them with adequate explanations about the study objectives. Required permissions were also obtained from the officials. The project was conducted in Kerman in about two months.

Considering the executive facilities and practical conditions of an educational intervention, the health workers randomly assigned to three groups (two intervention and one control groups). The inclusion criteria were willingness to participate in the study and working in Kerman health centers as a health worker. Lack of unwillingness to cooperate with the project was also considered as the exclusion criterion.

The Barton standard relationship communication skills questionnaire was employed as the data collection instrument, which its reliability were confirmed with the Cronbach alpha coefficients as 0.80 in a study by Safavi et al. (9). The questionnaire consists of 18 items categorized in four sections. The first section includes demographic information (four items about age, marital status, gender, and level of education) The second section includes verbal skills (nine items), the third section, listening skills (four items), and the fourth section, feedback skills (five items). Except for demographic questions, all the items are the self-assessment of communication skills. In terms of scoring, items on verbal, listening, and feedback skills are scored based on a five-point Likert scale (completely disagree = 1, somewhat disagree = 2, I’m not sure = 3, somewhat agree = 4, and completely agree = 5).

To avoid the influence of the groups on each other, the training sessions of the two intervention groups were held on different days, and sessions were held in different health centers. Due to the availability of various training, the most concise and applicable training materials were prepared, and the contents were selected from scientific and valid resources approved by Iran’s Ministry of Health and Medical Education, based on the educational goals and learners’ level of understanding.

Prior to the intervention, the questionnaire was completed as a pretest by the subjects in the intervention and control groups. The first intervention group received training by the role-playing method and the second group by the lecturing method as four one-hour sessions weekly. The posttest was administered 10 days after the last session, and the questionnaire was completed by the two intervention and one control groups. The data were analyzed in SPSS version 22 (IBM Corporation, Armonk, NY). The results of the Shapiro-Wilk test indicated the non-normal distribution of data. Therefore, nonparametric tests (Wilcoxon and Mann-Whitney) were used.

Confidentiality of information and the anonymity of the questionnaires were considered in the study, and verbal consent was obtained from all the subjects prior to the study. The researcher tried to respect the participants’ rights and consider a break and reception during the sessions. After the completion of the project, the educational content presented in the intervention sessions was also provided for the control group. The present study protocol was approved by the Ethics Committee of the Kerman University of Medical Sciences (ethical code: IR.KMU.REC.1398.301).

Results

Of the 120 health workers of Kerman health centers, 89 (74.2%) were female, 56 (46.7%) had a high school diploma, and 104 (86.7%) were married. The mean age of the subjects was 54.38±8.29 years. There was no significant difference among the three groups in terms of the studied variables (P>0.05).
There was a significant difference between the pretest and posttest scores of the lecturing and role-playing groups (Table 1). According to Table 2, a significant difference was observed in the mean scores of verbal, listening, and feedback skills, as well as the overall score of communication skills, based on gender, level of education, and marital status among the participants, before and after the intervention.

Table 1. The Comparison of the Scores of Communication Skills and its Dimensions Among Health Workers of Kerman Health Centers, Before and After the Intervention

<table>
<thead>
<tr>
<th>Variable</th>
<th>Group</th>
<th>Mean Score Before the Intervention</th>
<th>Mean Score After the Intervention</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>3.02</td>
<td>3.02</td>
<td>0.655</td>
</tr>
<tr>
<td>Verbal skills</td>
<td>Control</td>
<td>2.97</td>
<td>3.16</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td></td>
<td>Lecturing</td>
<td>3.04</td>
<td>4.61</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Listening skills</td>
<td>Control</td>
<td>2.96</td>
<td>2.96</td>
<td>&gt;0.999</td>
</tr>
<tr>
<td></td>
<td>Lecturing</td>
<td>2.91</td>
<td>3.11</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td></td>
<td>Role-playing</td>
<td>2.75</td>
<td>3.85</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Feedback skills</td>
<td>Control</td>
<td>3.36</td>
<td>3.35</td>
<td>0.157</td>
</tr>
<tr>
<td></td>
<td>Lecturing</td>
<td>3.07</td>
<td>3.13</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td></td>
<td>Role-playing</td>
<td>2.91</td>
<td>4.46</td>
<td>0.022</td>
</tr>
<tr>
<td>Communication skills</td>
<td>Control</td>
<td>3.10</td>
<td>3.10</td>
<td>0.257</td>
</tr>
<tr>
<td></td>
<td>Lecturing</td>
<td>2.98</td>
<td>3.20</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td></td>
<td>Role-playing</td>
<td>2.90</td>
<td>4.29</td>
<td>&lt;0.001</td>
</tr>
</tbody>
</table>

Table 2. The comparison of the communication skills scores and its dimensions among health workers, before and after the intervention based on demographic characteristics

<table>
<thead>
<tr>
<th></th>
<th>Verbal skills (Mean)</th>
<th>Learning skills (Mean)</th>
<th>Feedback skills (Mean)</th>
<th>Communication skills (Mean)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Before</td>
<td>After</td>
<td>P</td>
<td>Before</td>
</tr>
<tr>
<td>Female</td>
<td>2.98</td>
<td>3.57</td>
<td>&lt;0.001</td>
<td>2.82</td>
</tr>
<tr>
<td>Male</td>
<td>3.10</td>
<td>3.66</td>
<td>0.001</td>
<td>3.02</td>
</tr>
<tr>
<td>Marital status</td>
<td>Single</td>
<td>2.90</td>
<td>3.63</td>
<td>0.003</td>
</tr>
<tr>
<td></td>
<td>Married</td>
<td>3.03</td>
<td>3.59</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Level of education</td>
<td>&lt; High school diploma</td>
<td>2.91</td>
<td>3.73</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td></td>
<td>High school diploma</td>
<td>3.09</td>
<td>3.42</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td></td>
<td>Academic degree</td>
<td>2.96</td>
<td>3.76</td>
<td>&lt;0.001</td>
</tr>
</tbody>
</table>

Discussion

The results of the current study showed that the effect of role-playing on the score of communication skills of health workers of Kerman health centers was greater than that of lecturing. The results of different studies on the lecturing method show that compared to other teaching methods, lecturing is less effective in learning. Bahador et al., in a study on the perception of midwifery apprentices of the effectiveness of two teaching methods in child care learning reported that the team-based learning method was more effective than lecturing (10).

Health workers are one of the pillars of the health system and play a pivotal role in the promotion of public health. On the other hand, they need considerable skills in helping and communicating with individuals in the community. Therefore, the development of the communication skills of health workers can play a pivotal role in the improvement of the quality of health care and raising the satisfaction of clients. Implementation of training programs using different and effective teaching methods can significantly improve the communication skills of health workers.

Based on the results of the present study, there was a significant difference between the scores of verbal, listening, and feedback skills, and the overall score of communication skills, before and after the intervention; in other words, the mean scores increased after the intervention.

To the best of authors’ knowledge, no similar study was conducted thus far on the three verbal, listening, and feedback skills.

According to the present study findings, there was
no significant difference between the average scores of listening, verbal, feedback skills, and communication skills before and after the intervention in the control group, but the average scores significantly increased in the lecturing and role-playing groups after the intervention. The average score of the role-playing group in the three verbal, listening, and feedback skills were significantly higher than those of the two lecturing and control groups.

Abraham et al., in a study on the effect of educational interventions on learning the communication skills showed that role-playing was an effective method (11), consistent with the results of the present study.

In an intervention study, Ahsen et al., evaluated the role-playing method and concluded that it can have a positive effect on personal and group performance of learners in developing communication skills (12), which was consistent with the findings of the present study as the role-playing method was more effective than lecturing.

The greater effectiveness of the role-playing method can be attributed to the point that through this method, the learners have enough communication with the role-players; they watch the play with excitement and are more involved. As a result, role-playing is more enjoyable and tangible for participants. On the other hand, the uniformity of the content and multiplicity of in-service training sessions reduce the effect of training programs over time, but considering a high potential in shaping a long-term memory for materials, role-playing is still one of the most effective methods in education because of the high importance of communication with clients, especially in the health care setting.

The findings of the study by Zraick et al., (13) were inconsistent with those of the present study. They reported that the role-playing method did not develop students’ skills compared with the lecturing method, and attributed the reason to the lack of accurate evaluation and the employment of an appropriate instrument (13). The results of the study by Abedian et al., (14) were inconsistent with those of the present study. Differences among the reported results can be explained by differences in the characteristics of the participants, and the utilization of different instruments and variables. Abedian et al., examined the effect of lecturing and role-playing on the level of awareness increase, while the present study evaluated the effect of lecturing and role-playing on learning of the communication skills (14). However, lecturing may increase the level of awareness and attitude immediately after the intervention, but such changes are not sustainable and may back to the pre-intervention level in the next assessments (15).

Conclusion

The results of the present study comparing the effects of the teaching methods of role-playing and lecturing on learning the communication skills in health workers of Kerman health centers showed that role-playing is an effective method to teach communication skills and is preferred to the lecturing method. Therefore, it is necessary to employ this method more to teach communication and other skills. On the other hand, due to the low score of the health workers in communication skills before the intervention, it seems that effective teaching methods should be employed to develop this skill in health workers that are at the forefront of the health setting in contact with the society.

More attention should be paid to the teaching of communication skills, as a compiled course, in-in-service training programs and meetings for health workers and healthcare providers via more effective methods.

Supplementary Material

Supplementary material(s) is available here [To read supplementary materials, please refer to the journal website and open PDF/HTML].

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Conflict of Interests: Authors declared no conflict of interests.

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