

The Drama of Communication

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Workshop overview

Traditionally communication skills training in programmes for general practice are taught by clinicians, enhanced by the use of direct observation and /or video recording of the trainee with patients or simulated patients. There are many similarities between a doctor's communication skills and an actor's performance abilities This workshop was designed to highlight this crossover in order to help trainees develop their interpersonal skills through the lens of drama.

In the workshop trainees were coached, using tried and tested drama techniques, to heighten their responses to their patients and extend their communication skills repertoire, without compromising their own authenticity. This poster describes the aspects of the self the workshop focuses upon.

The face

We start with the face: brow and evebrows, eyes, eye-contact, the set of the mouth and micro-expressions; the way the head 'ducks' and nods in acknowledgement. If the face is a theatre, the eyes are a lighting rig, shining on the audience - the patient. Through the play of the eyes, the play of the face itself, the curtain goes up and the 'play' begins. If truly engaged, the face lights up with interest and genuine connection, but if the power of the brow, eyes, the whole upper part of the face is not used, the professional might as well be wearing a sign saying 'the doctor is out.' The use of full and half masks demonstrate the power of facial expression on interaction in the consultation.

"A potentially life-changing session.

This was an informal and

GP Trainer

Gesture

We seek to help trainees to develop an authentic gestural repertoire in tandem with exercises on facial expression. The working of the face with gesture is an orchestra, and much professional interaction is orchestrated. If an uninvolved, neutral pose is adopted, patients are denied a large quotient of warmth and engagement. Two-handed gestures can offer the patient a reassuring apothecary of abstract cures. Hands are like subsidiary actors which are employed just below our sightline to broker, systemise and extend intentions. Gesture, therefore, is integral, not simply an add-on, to language.

> "The format was a lot of fun! This was a great day which I thoroughly recommend. I learnt the importance of 'image' in interactions with patients." GPST3

unthreatening setting. Whilst always practical and interactive learning, it This was a very wellfelt 'safe' at all times. The resource pack contained a wealth of organised day which information which is transferable to improved my practice. I felt there was a sustained communication skills "buzz" throughout the day." especially eye contact, gesture and voice tone, well done, keep up the

GPST2

The voice

The voice must have variation. Too frequently in exams nerves can lead to poor, shallow breathing and strangulated vocal sounds, causing the speaker to 'devoice,' stutter or lose vocal power. A 'voice-off' can be helpful here. This looks at various aspects of vocal modulation such as clarity, tone, pitch, emphasis /stress and lively vocal responses.

Physicality

The professional persona must appear relaxed, confident and in control; this is where professional competence is rooted and it starts with the body. Doctors deal with the workings of the body and mind, so they need to be mentally and physically present on their own 'stage.' Doctors offer a healing presence: facing forward, leaning in, giving their attention actively. A range of exercises can be explored to bring the body into the room with poise and professionalism.

'Thank-you! You helped me see the medical setting through different eyes. Very useful and refreshing experience."

"This course helped me to modify and pick up body language issues, I will be recommending it strongly to my colleagues" GPST2

good work!" GPST1

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