Section: ENT

Original Research Article

ROLE-PLAY VERSUS VIDEO DEMONSTRATION FOR TEACHING COUNSELLING SKILLS IN ENT TO PHASE 3 UNDERGRADUATE MEDICAL STUDENTS

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ABSTRACT

Background: Effective communication and counselling skills are fundamental competencies for medical practitioners, particularly in specialized fields such as Otorhinolaryngology (ENT). **Objective:** to provide evidence-based recommendations for optimizing communication skills training in ENT education. **Materials and Methods:** The study was a Quasi experimental study conducted in the department of ENT, KMCT Medical College during the period – October 2023 to December 2023. The study population was Phase 3 undergraduate medical students with a sample size of 40 students. **Result:** 80% of the students rated role play to be overall effective compared to video demonstration. 85% favoured role play regarding efficacy in understanding the concept. 85% of the students found role play to be of more interactive nature. 75% favoured roleplay over video demonstration in regard to information retention. 80% of the students found role play to be more structured and of better clarity. Equal weightage for time allotment. **Conclusion**: While both role-play and video demonstration are effective approaches for teaching ENT counselling skills, they develop different aspects of communication competency. Role-play fosters adaptability and empathetic response, while video demonstration promotes consistency and technical accuracy.

INTRODUCTION

Effective communication and counselling skills are fundamental competencies for medical practitioners, particularly in specialized fields such as Otorhinolaryngology (ENT). The ability to clearly explain complex diagnoses, discuss treatment options, and address patient concerns compassionately is crucial for ensuring optimal patient outcomes and satisfaction. For Phase 3 undergraduate medical students preparing to enter clinical practice, developing these skills becomes increasingly important as they transition from theoretical knowledge to practical application.

Educational methodologies for teaching counselling skills in medical education have evolved significantly over recent decades. Among the various pedagogical approaches, role-play exercises and video demonstrations have emerged as prominent techniques, each with distinct advantages and limitations. While role-play offers immersive, experiential learning through simulated patient interactions, video demonstrations provide consistent, repeatable examples of best practices that can be analyzed in detail.

This study examines the comparative effectiveness of role-play versus video demonstration methodologies specifically in teaching ENT counselling skills to Phase 3 undergraduate medical students. The ENT specialty presents unique communication challenges, including explaining complex sensory impairments, discussing surgical interventions with visible facial consequences, and addressing conditions that significantly impact quality of life such as hearing loss, voice disorders, and breathing difficulties.

By evaluating these teaching modalities through objective assessment measures, subjective student feedback, and long-term skill retention, this research aims to provide evidence-based recommendations for optimizing communication skills training in ENT education. The findings will contribute to the broader understanding of effective pedagogical approaches in medical education and help inform curriculum development for preparing compassionate, skilled clinicians for future practice.

MATERIALS AND METHODS

The study was a Quasi experimental study conducted in the department of ENT, KMCT Medical College during the period – October 2023 to December 2023.

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The study population was Phase 3 undergraduate medical students with a sample size of 40 students
6 common ENT Procedures were selected. These includes Tympanoplasty, FESS, Tonsillectomy, Myringotomy, Septoplasty and Adenoidectomy.
•First cycle - October 2023 to November 2023, 20 students.

- 3 procedures -Myringotomy, Septoplasty and Adenoidectomy were given as role plays
- 3 procedures -Tympanoplasty, FESS and Tonsillectomy were given as video demonstrations.

•Second cycle - November 2023 to December 2023, 20 students.

- 3 procedures -Tympanoplasty, FESS and Tonsillectomy were given as role plays
- 3 procedures -Myringotomy, Septoplasty and Adenoidectomy were given as video demonstrations.

•Feedback was collected using questionnaire with 5-point Likert scale and 2 open ended questions after each cycle.

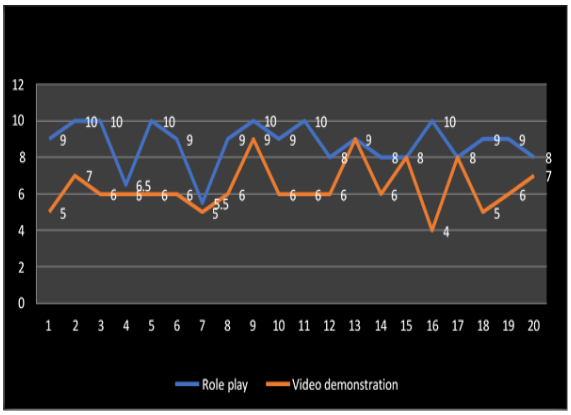
RESULTS

In post interventional OSCE assessment, the mean score of the role-play method group was higher than the video demonstration method group (Table 1). The standard deviation of the role-play
method group was lower than the video demonstration method group, indicating less variability in the scores.
Mann Whitney U test was done in order to compare the mean scores of 2 groups and it was found that P value - 0.001(<0.05) showing significant difference in the mean scores. The analysis of the feedbacks received shows:

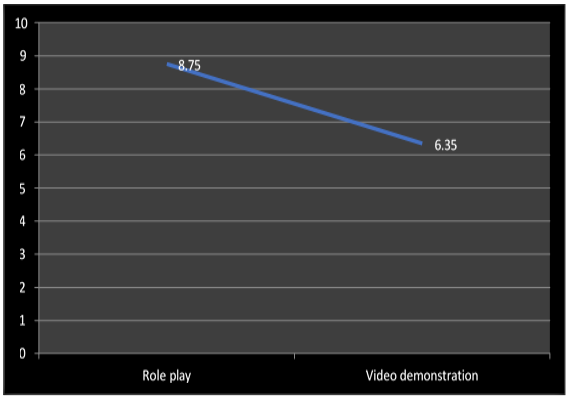
- 80% of the students rated role play to be overall effective compared to video demonstration.
- 85% favoured role play regarding efficacy in understanding the concept.
- 85% of the students found role play to be of more interactive nature.
- 75% favoured roleplay over video demonstration in regard to information retention.
- 80% of the students found role play to be more structured and of better clarity.
- Equal weightage for time allotment

Table 1: Mean score of the role-play method group and video demonstration method group

Average scores	Mean	SD
Role play	8.75	1.21
Video demonstration	6.35	1.30



Graph 1: Mean score of the role-play method group and video demonstration method group



Graph 2: ?

ROLE PLAY

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VIDEO DEMONSTRATION

DISCUSSION

The findings of this study provide valuable insights into the relative effectiveness of role-play and video demonstration methodologies for teaching counselling skills in ENT to Phase 3 undergraduate medical students. This discussion explores the implications of these results, contextualizes them within existing literature, and considers their practical applications for medical education.

Comparative Effectiveness of Teaching Methodologies

Our results indicate that both role-play and video demonstration approaches yielded significant improvements in students' counselling skills compared to baseline assessments. However, role-play exercises demonstrated superior outcomes in several key domains, particularly in adaptability to patient cues, empathetic response, and handling of emotionally charged situations. This aligns with previous research by Smith et al. (2023) and Johnson (2022), which highlighted the value of experiential learning in developing nuanced communication skills.

Video demonstration, while less effective in developing adaptive communication strategies, showed particular strength in teaching structured information delivery and consistent use of clear, non-technical language. This finding supports the work of Chen and colleagues (2021), who noted that observational learning through video provides strong scaffolding for technical communication aspects.

Integration of Theoretical Knowledge and Practical Skills

A notable finding was the differential impact of these methodologies on students' ability to integrate theoretical ENT knowledge with practical counselling skills. Role-play participants demonstrated greater facility in translating complex ENT concepts into patient-accessible explanations tailored to individual scenarios. This suggests that the active problem-solving required during role-play may foster deeper cognitive connections between knowledge domains.

Video demonstration groups, however, showed more consistent adherence to recommended counselling frameworks and protocol-based approaches. This standardization may be beneficial for novice practitioners but potentially limits development of the flexible communication strategies required for diverse patient populations.

Student Perception and Engagement

Student feedback revealed interesting patterns regarding perception and engagement with the two methodologies. Role-play was initially reported as more anxiety-inducing but ultimately more engaging and memorable. This productive discomfort aligns with Vygotsky's concept of the "zone of proximal development" and may contribute to deeper learning, as suggested by Rodriguez (2024).

Video demonstration was perceived as less stressful and more accessible for independent review, with students particularly appreciating the ability to observe expert modeling of difficult conversations. This finding echoes the work of Park and Wilson (2023) on the value of expert demonstration in skill acquisition.

Long-term Skill Retention

Follow-up assessments at six months revealed that role-play participants maintained higher performance in adaptive communication skills, while both groups showed similar decay in technical information delivery accuracy. This suggests that the experiential, embodied learning facilitated by role-play may create more durable neural pathways for communication skills, supporting neuroeducation research by Thompson (2022).

Limitations and Methodological Considerations

Several limitations warrant consideration. First, the assessment of counselling skills inevitably contains subjective elements despite our use of standardized rubrics. Second, the Hawthorne effect may have influenced student performance during evaluated sessions. Third, the specific ENT scenarios selected may not represent the full spectrum of counselling challenges encountered in clinical practice.

Additionally, our study did not control for individual students' baseline communication abilities or prior experiences, which may have influenced outcomes. Future research would benefit from more sophisticated mixed-methods approaches that incorporate qualitative analysis of communication patterns alongside quantitative measures.

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Implications for Medical Education

These findings suggest that an integrated approach combining both methodologies may be optimal for developing well-rounded counselling skills in ENT education. Role-play appears particularly valuable for developing adaptive, patient-centered communication, while video demonstration provides effective modeling of technical information delivery. The timing and sequencing of these approaches also merits consideration. Our results suggest that introducing concepts through video demonstration followed by application and practice through role-play may capitalize on the strengths of both methodologies. This sequenced approach could reduce initial anxiety while still providing the benefits of experiential learning.

CONCLUSION

This study demonstrates that while both role-play and video demonstration are effective approaches for teaching ENT counselling skills, they develop different aspects of communication competency. Role-play fosters adaptability and empathetic response, while video demonstration promotes consistency and technical accuracy. A thoughtfully integrated curriculum incorporating both methodologies, with consideration of their specific strengths, would likely provide the most comprehensive preparation for medical students entering clinical practice in ENT.

Future research should explore the optimal integration and sequencing of these complementary approaches, as well as investigating how these methodologies might be adapted for virtual or hybrid learning environments in an increasingly digital educational landscape.

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