Role Call



How to make role-playing an effective training tool

by Dr. Carolyn C. Shadle and Dr. John L. Meyer

uan reached his hand into the basket and drew a piece of paper that said simply, "Mel." Who was Mel? What did he want? Rosemary followed. The paper she drew said, "Dr. Joan." Who was Dr. Joan? What did she want? Three others reached into the basket and drew a paper, while the rest of the staff looked on, all eager to find out something about these characters.

Margaret, the facilitator for the day, had selected a case that involved five characters, two males and three females. She had selected this particular case because she thought it would raise some issues that were important to this staff.

It described a typical situation in a clinic in which two people had misunderstood each other and missed an opportunity to speak openly, honestly and respectfully to each other.

Has that situation ever arisen in your clinic? Don't answer that! Of course it has. It happens all the time. The sad thing is, we often don't realize what went wrong and therefore can't prevent it from happening again.

The case that Margaret chose was similar to situations that occur in her clinic, but it did not involve actual people or words spoken in her clinic. It was different enough to keep staff members from being too defensive and discussing actual people and events.

The purpose of this activity was to discover some important communication

Trends magazine, December 2012

F2RoleCall_Dec12.indd 30 11/13/12 12:08 PM

principles and have fun in the process. The clinic staff had been meeting regularly to read and discuss cases and had learned a lot.

Dramatic reading

Margaret thought it was time to move the process to another plane and introduce dramatic reading, which means the staff members would read word-for-word from the written case. There was no need to memorize lines or improvise a character. But they could have fun being dramatic in their reading.

After the five staff members each drew the name of their character, they set about reading the case to themselves and highlighting their lines. Margaret prepared to serve as narrator to read the lines that set the scene and introduce the characters.

It didn't go smoothly at first. When Juan read the words assigned to Mel, he became quite uncomfortable. He had found out that Mel was quite rude and said what he pleased without thinking about how his words affected his co-workers.

He said to Margaret, "I would never talk that way!" For a moment, he tried to negotiate with another staff member who said he'd love to play an obnoxious colleague, but, on second thought, Juan decided that he would give it a try.

Rosemary objected to her part, too. She said that she thought the role she had selected as Dr. Joan, the clinic owner, was not realistic.

"She's unreasonable." But, in time, she realized that the learning from the case was to discuss the judgment of the characters in their case. Others in the group might think Dr. Joan's behavior was not only reasonable but also very much needed.

While the dramatic reading was designed to be fun, Margaret wanted to be sure the session was a learning experience, too. To prepare everyone to learn from the case, she posed questions to ponder before reading the case that related to the theme.

Since this case was about an angry and assertive boss, she asked everyone to think about times they had worked with or known someone who was domineering. How did it feel? How did they cope? What did they remember about how others reacted?

When you introduce either dramatic reading or role-playing in your clinic, remember that everyone should have fun with it. After all, it's "amateur hour."

The purpose is training. There should be no effort to teach good stage-acting technique. It's not about "acting school." The objective is to raise some important points for discussion. So, let it roll and enjoy the nervous giggles.

You'll find that some people in your group are natural "hams" and will take on any role and read with delight (and expression). Juan really got into it. He raised his voice and barked his tones for everyone to hear!

For others, there may be anxiety about playing a role that is foreign to their own disposition, especially if they must display negative behavior. Some will not have any discomfort in the role but are not used to reading aloud in a group. Encourage everyone to look past the performances and listen for communication mishaps built into the case.

To aid in making this process an enjoyable one, it is important, at the end of the reading and before general discussion, to debrief the characters. Juan wanted his colleagues to know that he really would never talk the way Mel did. And Rosemary did not want her colleagues to think that she would lead her clinic as Dr. Joan did.

Let the characters be the first to speak. Ask each, in turn, to respond to questions such as: How did you feel about your character? How did you feel playing the character? What was the impact of your character's behavior? Who caused the problem(s)? What do you think your character should have done to prevent (or solve) the problem?"

Role-playing a case

When your staff members are comfortable with one another, with the process of case study and with reading cases aloud, you will be ready to move to roleplay a case.



The purpose of role-playing is to discover important communication principles and have fun in the process.

Trends magazine, December 2012

Role-playing can help staff members become better thinkers, capable of reasoning more flexibly and logically.

Role-playing will come easily and naturally to some of your staff members. If you doubt this, consider children and how they learned it as children at play. You've surely seen children play the roles of doctors, nurses and teachers, and, perhaps to your chagrin, of their parents.

You noticed how cleverly the children picked up all the mannerisms and little idiosyncrasies of those they were imitating. Some of your colleagues will jump enthusiastically to do drama. But, while actors and actresses in the theater have to think about costumes, sets and lighting, in the veterinary clinic you don't need to worry about these things. Moreover, you won't have to memorize lines or even make up lines for more than a scene of a few minutes.

As you bring role-playing into the clinic, it's best to begin with a fictional case, as you did in the dramatic reading. Even though it may raise questions close to home, it will help you to discuss hypothetical people and actions and not dwell on the facts of a situation.

This time when Rosemary reaches into the basket, the piece of paper she selects says, "You will play the role of Gloria, who has brought her stray cat to the vet. This is her first pet and her first visit to the veterinarian. Gloria is about 25 years old and holds a job as a waitress in a nearby restaurant. She's unsure of what she is getting into as a pet owner."

While she reads her role assignment, Juan selects his piece of paper. It says, "You will play the role of Robert, who is the receptionist for the veterinary clinic. He is expecting Gloria to come in for a first check, inoculations and neutering for her cat. Robert is very outgoing and loves to meet new people. He has been in his position for just 2 months and has already earned a reputation for keeping everything on schedule."

Once the characters know their roles

and a bit about their new "persona," the facilitator describes the case and the context of the interaction. For example, "The clinic is a small one, with 15 employees. It's been around for 22 years and has a loyal clientele. Gloria, one of the regulars, is 30 minutes late for her appointment. Early in the morning, the clinic had to deal with an emergency case when one of their regular clients brought in her dog, which had been attacked by another dog. The schedule for the day is now quite backed up."

With that introduction, the characters (Rosemary/Gloria, Juan/Robert) take a few minutes to think about how their character would act and what she or he would say and sound like, based on the characteristics of that person, such as age, gender, socioeconomic status, how long she or he has been a client, her relationship to her animal (a pet, a service animal, a farm animal), and what brings her to the clinic (a repeat visit, a chronic problem, a major issue or minor one).

This kind of knowledge will have an effect on how the role is portrayed and what kind of emotion the actor will express.

Then, let the drama begin. Again, don't worry about the quality of the acting. The "hams" will have fun exaggerating the characters. Newcomers to theater may hold back and stay close to the written script. Others will feel free to improvise.

The actors are not limited to the text. Instead, the case study is meant to serve as a springboard. With creative improvisation, there will be enough materials for discussion—and probably some laughs, too.

As before, always let the players debrief their roles before the general discussion. How did it feel playing your character? Did you have to display emotions or actions that were difficult for you? (Don't be surprised that some people enjoy being the villain and prefer that role to being the hero or heroine!) Do

you think you were true to the character? What did you learn about the character as the drama unfolded?

In the general discussion, as each staff member ferrets out the learnings about communication mishaps or examples of effective communication, the group can also comment on the acting.

For example, one might suggest that since Gloria was new to the veterinary process, she might have appeared more hesitant than the way the character was portrayed, or "Rosemary was too nice. That's not what I would say, if I were the receptionist in this case!"

Creating an original case

Once your staff members are comfortable improvising characters in a case that they have been given, they may want to create a situation that is open-ended.

In other words, you can outline a situation and let staff members decide what role they will play and see where it goes. For example, you may suggest that they deal with a new staff member who turns out to be a chatterbox and monopolizes co-workers' time. Let the staff decide what to say and how to approach this employee.

Or, suppose one of your clients brings in a dog that has been vomiting all night and is quite lethargic. Let your staff members decide what roles they will play and how they will interact with the client. What role would you like to play? You could be a bully or you could play the role of the victim. Would you like to play the role of the perfect boss? What does she or he sound like?

If you have staff members who have studied drama, debate or public speaking, they will be able to lead the others and give everyone confidence that these scenarios can be played out. But if none of your staff members have had such experience, forge ahead. This may be an experience they've been waiting for!

Don't be afraid to ask your role-players to switch roles to see how it feels to be on the other side—just as debaters are trained to switch sides, first on the affirmative side and then on the negative side.

Trends magazine, December 2012

Remember, the purpose of this exercise is not to resolve the problem in the drama, so stop it at some point and discuss what has taken place. What behavior was problematic? Who showed good listening or caring and careful confrontation? What was the impact of different communication styles?

As before, always allow those who have created roles to tell you how they felt about the role they played and the behavior they exhibited. They need to gradually move from the fictional character back to being themselves.

Whether it's dramatic reading, roleplaying or creating an original case, it's important to remember your purpose: Your goals have been to become aware of communication opportunities and to identify the skills needed to be effective in building an open, honest, caring and productive work environment.

Moving to the real thing

If your staff has worked well together discussing case studies openly, and if they have a good sense of what communication skills are effective, you would be ready to discuss a real situation, even to role-play it.

For example, two of your staff members who came into the clinic at the same time and became good friends have had a falling out. Other staff members seem to have lined up behind one or the other. Can you discuss a scene that actually happened? Can staff members stand "outside" of themselves long enough to see what is happening and to discuss where things have gone off course and how to get back?

Discussing the real thing can be quite threatening, so you want to be sure the staff has enough confidence in each other to be open and honest but caring and careful, too.

Role-playing can create better employees

Role-playing, especially that which calls upon your staff members to present extemporaneously, can have dramatic results. It can help them become better

thinkers, capable of reasoning more flexibly and logically.

Role-playing can stretch imaginations and lead staff members to scenarios and roles that they may not have experienced but may encounter in the future. It can help them become better communicators, capable of understanding listening and persuading.

You are in the business of providing for the health of companion animals. This means that you want to build a relationship with your clients that encourages your clients to express to you their needs and concerns.

You want to be able to listen to them and hear all they have to say, and you want them to be assured that you have heard. You also want them to trust you to give them compassionate and quality health care. As their confidence in you and your advice grows, their compliance will increase. With that, so will their pet's health improve.

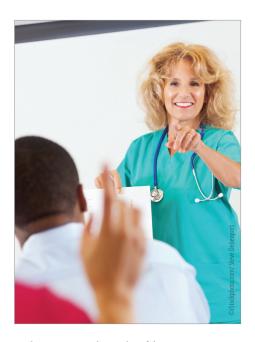
The same kind of listening and caring skills you employ with your clients are important within the clinic among staff members. As staff members show respect for one another, they increase their feeling of loyalty to the team and understand better how each person's behavior affects the others'.

With improved appreciation of staff members, work flow can become smoother and work more productive. Typically this leads to increased employee retention and job satisfaction. Isn't it interesting how happy staff members can show greater care and compassion for their clients?

And so the cycle continues. Did all that start with a dramatic reading? Maybe it did. Certainly it's worth a try! ■

Carolyn C. Shadle, PhD, earned her doctorate from the State University of New York at Buffalo in interpersonal and organizational communication. She now provides writing and training through ICS, Inc. (icsworkplacecommunication.com).

John L. Meyer earned his PhD degree from the University of Minnesota in communication studies. Through ICS, Inc., he writes and provides training in interpersonal communication as well as speech arts.



The same kind of listening and caring skills you employ with your clients are important within the clinic among staff members.

Trends magazine, December 2012