Medical Students in the Moment: improvisation for building communication skills

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Before we begin...

• What is your least favorite occupation?
The importance of “Yes, AND...”

- Working with a partner to collaboratively build a scene
  - Agree with the shared reality so far, then build
- Fundamental building-block of improv
- Important to communication of any kind
Anatomy of an improv game

Set the context

Work within constraints

Find the central issue of the scene

Resolve the issue
Viola Spolin

- Nov. 7, 1906 to Nov. 22, 1994
- Created “Theatre Games” while working for the W.P.A. in Chicago
- Refined them throughout her career
- Her son, Paul Sills, co-founded Second City and worked with her to popularize her ideas

What does improv have to do with Sociology?

- Spolin started her career with Neva Boyd
  - Created Recreational Training School at Hull House
  - Authored *Handbook of Recreational Games*
  - Became professor of Sociology at Northwestern University
- Spolin’s own work heavily influenced by J.L. Moreno’s psychodrama and sociodrama
What does improv have to do with Medicine?

Both scene-work and doctoring require:

• Focused attention
• Intellectual empathy
• Commitment to collaboration
• Comfort with disequilibrium
What does improv have to do with Medicine?

Both scene-work and doctoring are *sabotaged* by:

- Talking over the other person
- Denying
- Not listening — waiting for the person to stop talking so you can speak
No joke: The serious role of improv in medicine

SARAH MAHONEY, SPECIAL TO AAMCNEWS
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Want to be a better doctor? Try talking into a banana, muttering gibberish, and tossing balls at colleagues. Medical improv transforms goofy theater games into serious skills like empathy, teamwork, and super-quick thinking.
Others’ work

Training Programs

• Medical Improv
• Alda Medical Experience

Places using improv to train future clinicians

• Johns Hopkins
• McMaster
• Mount Sinai
• Northwestern
• Rowan University
• Temple
Published Results

• Consistent positive responses from student evaluations (Boesen et. al., Hoffman et. al., Kaplan-Liss et. al., Sawyer et. al., Shochet et. al., Watson)

• Improved scores on standardized patient scores (Boesen et. al.)

• Development of a new rating scale to test how well the techniques work (Terregino et. al.)
Our methods

• Series of workshops with medical students
• Start simple, then get more complex
• Center on relevant themes:
  • Status, Emotion, Physical presence
• Lots of debriefing
“Pecking order” – Group game for 3 - 5 people

Each player silently picks a number between 1 and the number of players in the scene. Each player keeps their number secret, so duplicates are allowed.

A suggestion is taken from the audience and then a corresponding scene is played in which each player tries to portray the status they chose: ‘1’s being higher in status than ‘2’s, ‘2’s being higher status than ‘3’s and so on. Each player must decide how to position his or her status with respect to their scene partners without knowing which numbers others have chosen.

At the end, the audience attempts to guess which number each player chose.
Some of our results

Changes in **Nonverbal Immediacy Scale-Self Report** scores after workshops

- n = 9
- Pre mean = 96.4
- Post mean = 99.9

Changes in **Self-Perceived Communication Competence Scale** scores after workshops

- n = 14
- Pre mean = 76
- Post mean = 79.7
Some of our results

• “I tend to live in my own head a lot, and that was something that Improv really helped. I think it helps a lot of those sort-of ‘stuck’ thoughts get out.”

• “I felt like it was a safe environment. I appreciated everyone’s spontaneity and willingness to get into the scenes because we are in a very stressed environment. In class, I see a lot of hesitancy to answer questions and put yourself out there, so it was nice to see that kind of openness rewarded in the sessions.”

• “Participating felt more natural and comfortable as I attended more sessions. I noticed a change between first and second session where I felt much more comfortable jumping into a scene without worrying about screwing something up.”
For further reading

https://www.zotero.org/groups/2456754/edimprov

Or reach out!
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