ORIGINAL PAPER EPEYNHTIKH EPΓAΣIA

Improvement in the therapeutic relationship and the quality of health care through utilization of the arts in experiential learning

OBJECTIVE Investigation of the application of innovative educational methods for health professionals through utilization of the arts, the philosophy of design of which is drawn from ideas that define the medical humanities. METHOD A study was carried out in an educational population of health professionals at the level of postgraduate and pre-doctoral studies. A qualitative teaching and research strategy was used, based on four pillars: (a) creative writing, (b) role-playing, (c) theatrical dramatization, and (d) educational scenarios. The method of data synthesis and analysis was thematic analysis. RESULTS Thematic analysis of the results detected innovative forms of social skills, such as affability, which encompasses the foundation of the feeling of confidence and establishment of a collaborative therapeutic framework between the health professional and the patient, and the skill of overcoming difficult situations. The health professional students developed the skills of empathy and reflection that lead to the process of self-knowledge. It was deducted that education, within the framework of teamwork learning, can provide the foundation of a type of dialectic democracy and robust social collectivity. Health professionals who focus on the patient as a person enrich the therapeutic effect of the interchange, whereas objectification of the patient is an indication of professional exhaustion. CONCLUSIONS Seminars on experiential learning for self-care will promote the strengthening of the relationship of health professionals with their patients. The importance of the integration of courses from the field of humanitarian studies at all levels of higher education of medical professionals is emphasized, and it is apparent that the arts provide a mental and psychic channel that has the power to lead to a new therapeutic culture.

ARCHIVES OF HELLENIC MEDICINE 2023, 40(1):44-49 APXEIA E $\Lambda\Lambda$ HNIKH Σ IATPIKH Σ 2023, 40(1):44-49

G. Poulimenakou, M. Sarris

Research Laboratory of Economics, Management, Health Policies and Social Protection, Department of Business Administration, University of West Attica, Athens, Greece

Ποιότητα φροντίδας υγείας και θεραπευτική πραγματικότητα διά μέσου της αξιοποίησης της τέχνης στη βιωματική μάθηση

Περίληψη στο τέλος του άρθρου

Key words

Experiential learning Quality of care Soft skills Therapeutic reality Utilization of the arts

> Submitted 29.11.2021 Accepted 22.1.2022

The new organizational environments for the provision of healthcare services require health professionals to focus on the quality of health care and the development of the process of the therapeutic relationship.¹ These conditions define the importance of continuing education that leads to the acquisition of the necessary occupational skills of the 21st century.2 One of the most effective teaching methods is experiential education, which, with utilization of the arts, provides special characteristics and dimensions. The use of the esthetic experience in education stimulates the imagination and liberates the student from restrictive social and personal beliefs.3 In experiential transformative learning, the trainees are able to develop their critical intelligence and to decode the established rules of social affairs. 4 Very effective educational forms, because of the active role undertaken by the trainees, are creative writing, role-playing and theatrical dramatization.5

Creative writing as a method of experiential learning leads the trainees towards collective-cooperative learning and stimulates their creative potential.⁶ In every relationship in the written stories of care, situations are presented that pose problems to be solved, and which contain a psychodynamic energy that is released through reflection.7 Role-playing is used when the training objective is investigation of a solution to a problem, or positive modification of beliefs, with a ruminant approach to established, but outdated rules.8 The design of the educational scenario of role-playing is modern, innovative and pioneering, in the environment of e-learning that meets the needs for the fast training of teachers in distance learning brought about by the COVID-19 pandemic.9 Social life is often defined in terms of a theatrical happening because in everyday life each person experiences and "presents" her- or himself in multiple roles, depending on the impression that she or

he wants to make on others. ¹⁰ Innovative forms of learning through theatrical expression have transformed perceptions, maximizing the quality of health care. ¹¹ Care is a primordial universal behavior, which is framed by the size of the need created by any lack. ⁷ The quality of health care is measured by the degree to which the health services work to increase the likelihood of producing desirable health effects. ¹² Among the many facets of health care, the functional range of the interpersonal relationship between the health professionals and the patient is included. ¹³ The forms of therapeutic communication, the therapeutic relationship between health professionals and the patient and the transformation of the patient from the object of disease to a subject of health, all play a determinant role. ¹

MATERIAL AND METHOD

Research design

The Research Unit for the Promotion of Experiential Learning, Empowerment and Skills Development in Decision-Making of the Research Laboratory of Economics, Management, Health Policy and Social Protection of the University of West Attica used the arts in various aspects of educational design. The purpose of the research strategy of this study was to assess the effect of implementation of innovative educational methods on the social skills (soft skills) of the 21st century health personnel, and identification of the contribution of innovative skills to the promotion of employment growth in the continuously evolving environment of the fourth industrial revolution and the achievement of sustainable development and prosperity. The ultimate aim was, through the development of social skills and the transfer of knowledge, to enhance the quality of education and health care, to defend human rights, and to promote the culture of social peace and non-violence, and the identity of the universal citizen. Within a setting of cooperation, educators and trainees, through interaction with the academic and the wider community, jointly targeted the maximization of the quality of life of patients and of society as a whole.

Research deontology and ethics

The study participants were given full written information on the purpose of the investigation and assurance of the confidentiality of their personal, and provided their written consent. Special permission was obtained by the Director of the Research Laboratory for conducting the field research and utilization of printed and audiovisual material.

Data collection

The methods of experiential learning through the utilization of the arts that were applied in the educational context of activities at the level of postgraduate and pre-doctoral studies were creative writing, role-playing, theatrical performances and the design and implementation of educational scenarios.

For the method of creative writing, the graduate students, with the first topic that of chronic disease, were required to record personal experiences and to capture the subjective dimension of chronic disease in the life of the patient. The second topic was structured around observation and analysis of the social skills of empathy, communication and leadership, and the use of creative thinking for the resolution of labor problems of professionals working in the environment of public health. Creative writing was a learning method of self-control, regarding the application of new knowledge. Thematic analysis was the qualitative research method used to analyze the data, to provide vivid, but also nonclear, findings, which would stimulate future investigation.

Role-playing was utilized in teaching post-graduate students in a course conducted on a synchronous e-learning platform, so that the educational needs could be met during the COVID-19 pandemic. The model of motivational interviewing was presented in the educational scenario "introduction of new knowledge", to teach the use of a communicative tool that health professionals can use when they want to transform the attitudes and behaviors of patients with regard to compliance with treatment, but also when they try to change behavior in the context of cooperation in the work area of administration. In the latter case, the role-playing scenario had as its subject repeated delays of the employee in attendance at work. An improvised dialogue was conducted between the leader and a member of the working group, projecting the former as the moderator of the interview and the latter as the interviewee. Thematic data analysis was conducted for the extraction of results.

For the method of descriptive evaluation and description of experience, post-graduate students were required to capture their experiences during their participation in experiential teaching through theatrical dramatization. Initially, the trainees were required to write a script, using the method of chain or group writing, with a theme of stories of treatment and care in two phases: first writing a negative scenario of a situation with behaviors, processes and procedures of health professionals disoriented from the objective of providing good health, and then writing a positive scenario of an expected situation where the health professionals target and serve quality in healthcare provision. Thematic analysis was used to analyze the data.

This modern teaching method is applied in the framework of educational planning resulting from educational scenarios. With health professionals as the educational population, in the context of postgraduate education and with the target of an interdisciplinary approach to the provision of health care of a high quality, two educational scenarios were designed, the philosophy of design of which was drawn from the fields of the sociology of health, philosophy, psychology, sociolinguistics and bioethics, converging on ideas that define the medical humanities. The utilization of the arts in the form of poetic narratives ^{14,15} was the cognitive tool for the development of the cognitive skills of the students,

46 G. POULIMENAKOU and M. SARRIS

so that they could expand their perceptual field, form critical attitudes, realize the value of reflection, and allow transformation of their attitudes and behaviors in their role of health professional. The training scenarios were applied in the synchronous distance learning setting, in order to meet the specific conditions of social distancing imposed by the COVID-19 pandemic. The theoretical model in which the teaching scenarios were architecturally founded by the educators was that of social constructivism. The presentation and the analysis of the poetic narratives took place in the presence of their author, who was simultaneously doctor and poet, which synthesized a lesson in humanities courses. In the teaching principles and practices, innovative methods of experiential learning were included, such as the theatrical performance of a student group, who set up a tele-theatrical event based on poetic narrative, and the theatrical reading of literary works by an artist-actor. The opportunity for continuing expression of questions, answering of queries and clarification of meanings was provided, even after the end of the course. The application and understanding of new ideas as metacognitive skills was explored in the work of the creative writing of the post-graduate students. Evaluation of the educators by the trainees was conducted by the method of descriptive evaluation.

RESULTS

In 18/42 essays (43%) in the creative writing exercise, data were identified which were characterized by subtle expressive composition infiltrated by the arts and showed the ability to attribute dynamic aspects to psycho-emotional, consciousness and sensory experiences. Humanistic health care is one of the main positive prerequisites of a therapeutic culture. The health professional who focuses on the person, nurtured throughout his(her) life by high human ideals, will manage to enrich his(her) therapeutic activity, offering a maximum of abilities, possibilities and skills. Data analysis demonstrated that the skill of affability is necessary in this functional intervention, as it reflects more complex, mature behavior and a deeper way of thinking of the health professional. It encompasses acceptance, authenticity, the foundation of the feeling of trust, and the formation of a cooperative therapeutic framework between the patient and the health professional. In conjunction with empathy and emotional intelligence, an expanded therapeutic field with many new possibilities is created. Absence of education in the skills of communication with the patient at the undergraduate level in schools of health sciences and the lack of courses in humanitarian studies defines the objectification of the patient. Despite the lack of formal education, health professionals who demonstrate manifestations of positive therapeutic behavior are transformed into creators of the art of experiencing the disease.

In the experiential learning sessions, before the be-

ginning of an improvised dialogue, the coordinator described the stages of the process, and immediate recall was achieved. The role-playing process was completed with success, and it was observed that the trainee could fully understand the theory and succeed in reproducing it in the theatrical simulation. Subsequently, the whole process was presented to the group, which operated in the form of a quality cycle in the virtual work interface. It was observed that the participants expressed their critical thought with boldness and freedom of expression, as a result of generation by the trainer of an environment free of reluctance. The need to change the models of leadership emerged, and through analysis of the experiential method, an effective approach was identified and a method of problem-solving was presented.

Of the essays recording the living experience, in 60/142 (43%), elements were distinguished by descriptive analysis that provided psycho-emotional descriptions that can touch both the individual and the social issues of experiential learning. The trainees acquired the skills needed to formulate the philosophical values required to act in accordance with their humanitarian ideals. They developed the skill of empathy, which enables them to enter easily into the process of reflection, which is an internal process that acts as a review, evaluation, remodeling and correction of behaviors, and is a stronghold of the process of self-knowledge. The educational process that leads to selfawareness was conducted through dialectics and reflection, with two targets: firstly, to empower health professionals, as a kind of professional attainment and secondly to promote well-being and high quality of treatment and health care for patients by offering social harmony, justice and peace in the field of health.

Another significant parameter is collective-cooperative learning, where the combination of the group microsociety with psycho-mental advancement is established and strengthened through a stochastic dialectic. A form of dialectic democracy is established, characterized by authenticity, freedom of expression, conflict resolution and acceptance of diversity, where the dawn of a wider, robust social collectivity can be seen, as the training of the group is directed towards the ultimate goal of evolution, development and culture. The educator, in the leadership role, creates the successive steps of this course, with a presence which, far from the arrogance of academic authority, is approachable. This university assistant and mentor acts as a kind of model that shapes and transforms the skills of the trainees, disseminating the essential knowledge and encouraging a modern spiritual and cultural enlightenment.

The trainees assumed the role of the mediator and

managed to stimulate emotion and reflection, and to emphasize discussion as a dialectical tool, overcoming conflict through the re-composition of the limits of the position and the opposition. Everyday stories of treatment of patients, filtered through poetic words, with profound empathy and compassion, mirrored a positive culture and a tendency to resolve problems in an evolving modern therapeutic culture. The poetic narratives were connected with the biopsychosocial model of health, and with the individual therapeutic option that includes psycho-emotional care of the patient. Through the poetic narratives, but also through interactive question and answer sessions, the present social and historical conditions were explored, and situations and procedures that define their optimization were identified. A human potential was formed, able to dare to express its way of thinking, to match everyday life with broader theories and practices and, by transforming everyday practice, to co-create the circumstances for a wider improvement of conditions. The skill of "inventing" 16 was introduced, an innovative ability and a way of recognizing, preventing and solving problems, making decisions and overcoming difficult situations. The meta-definition of "therapy", in general, was presented, and it was paired with concepts from the broader field of the sociology of health, such as the therapeutic relationship, the therapeutic alliance, therapeutic effectiveness, the quality of health care and the quality of life of the patient suffering from severe disease.1

DISCUSSION

In one of the first applications of creative writing in training workshops, 12 health professionals participated, pursuing the following objectives: (a) to record their thoughts, (b) to develop their storytelling skills, (c) to express their feelings connected with the disease and its treatment, and (d) to enhance their creativity. The participants expressed satisfaction with the duration of the course and the scope of the group dynamics. In contrast with the design of the present study, the social-historical dimensions of the stories and living experiences were not fully evaluated.¹⁷

A creative writing seminar was organized by the University of Yale Medical School in the United States, in which 15 doctors participated. The goal was to develop skills of observation, empathy and psychological projection through the teaching of the art of writing. Analysis of their stories showed that the main topics could be classified as psychological discomfort. The participants recorded feelings of insecurity, difficulty in managing the announcement of unpleasant news, emotions of internal conflict, and also occupational burnout. After the completion of the seminar,

a focus group was conducted with the participants, from which it emerged that, through the art of writing, they developed powers of observation and understanding, of both themselves and others. ¹⁸ In comparison with the present study, elements of professional burnout were recorded, and the approach was from the perspective that the free recording of stories of care that were personal experiences marks a specific time period, expresses psychosocial dimensions and constitutes a scientific and historical source of evidence that requires analysis in a wider interdisciplinary field.

In the educational planning of a medical school curriculum, the students were empowered to bring about a change, not only in the lives of patients, but also in the healthcare system. Through the application of theatrical techniques, a variety of skills were developed that are very important for medical practice, including presence, empathy, improvisation, and verbal and non-verbal communication. The evaluation of the training program showed that theatrical expression provides a space where the personal and the professional improvement of trainees can be integrated, through a process of reflection and action, aiming at a shift in the direction of medical culture towards social justice.19 In another major research study, theatrical dramatization was used as a teaching method for the development of skills of clinical communication. Over a period of nine years, the compulsory course was attended by 727 students; it took the form of a three-hour seminar in an eight-week period, during which they took part in the exercise of drama, and covered topics such as empathy, building a therapeutic relationship, taking the psychosomatic history, explaining medical problems, negotiating options of treatment, announcement of bad news and treating demanding patients. The participants filled in a questionnaire of self-assessment before and after the seminar. The majority of participants in the study recorded significant improvement (p<0.05) in confidence regarding their communication skills and their application in clinical practice.²⁰ The results of the present study are consistent with the findings of all of the above studies as to the development of the skills of empathy and therapeutic communication. As an extension of the theory that emerged from the qualitative analysis in the present study, the importance of the skills of reflection and self-awareness for the psycho-emotional balance of health professionals was recognized, along with the multiple social benefits of collective-cooperative learning.

The results of a study conducted with 284 first-year medical school students, using the method of role-playing as part of their training in communication, were also significant. Specifically, 96.5% of the students considered

48 G. POULIMENAKOU and M. SARRIS

this experience as helpful, although 22.2% had prior experience which they rated as non-effective. In that study, opportunities were given for observation and dialogue, and the activities corresponded with other courses of the curriculum. The feature that caused negative emotional reactions was that some points lacked realism, and it was concluded that role-playing is effective only when it is well-prepared, realistic and has structured instructions.²¹ In the present study, the design of the role-playing exercise was based on the preparation of post-graduate students in the structured method of motivational interviewing through certain stages, a factor which made the process of the method more effective. Its performance through synchronous e-learning, which was used to meet the requirement of social distancing because of the COVID-19 pandemic, was an innovation that attracted the attention and held the interest of the trainees, thus motivating them.

In 1992, in a Canadian medical school, the curriculum incorporated as an integral part at the undergraduate level a course derived from humanities that included literature, music, creative writing, art, bioethics, and the development of a narrative and history. The main thought behind this educational planning was that medicine is a care profession that utilizes science, and that the use of the arts and the humanities would bring about a balance with the exact sciences.²² The educational scenarios of the present study were formed in consistence with the above philosophy in educational planning, utilizing poetic narratives of a writer-doctor. The subtle difference of the present study is that in the application of this learning design the configuration of teaching hours required not simply the preparation of the

instructor, but also a scientific and artistic essay, requiring long hours of study and planning aimed at the effective learning of the trainees.

A significant finding is that, three decades after the first attempts, the importance has been realized of the integration of courses from the field of humanities at all levels of higher education in the health sciences, and the efficacy of the use of the arts has been recognized. While the lack of resources and the increased demands can lead health professionals to deal with their patients and their colleagues as "problems" rather than as people, it becomes clear that the arts provide a mental and cognitive channel that has the power to promote transformation from conformist attitudes and behaviors to a new therapeutic culture. Preventive activities through seminars for the experiential learning of self-care, according to the ancient concept of Socrates "the unexamined life is not worth living", will bring about their empowerment. Implementation of all the parameters for the prevention and treatment of professional and emotional exhaustion will help to shape a prospering working climate that will bring multiple benefits to therapeutic practice.

Future studies should be conducted on experiential learning programs using the arts and philosophical planning in the field of human sciences, applied both at the undergraduate level in medical school and in the context of continuing education in healthcare environments, to investigate their immediate results and long-term effects on the thinking processes and therapeutic practices of health professionals.

ΠΕΡΙΛΗΨΗ

......

Ποιότητα φροντίδας υγείας και θεραπευτική πραγματικότητα διά μέσου της αξιοποίησης της τέχνης στη βιωματική μάθηση

Γ. ΠΟΥΛΗΜΕΝΑΚΟΥ, Μ. ΣΑΡΡΗΣ

Ερευνητικό Εργαστήριο Οικονομικών, Διοίκησης, Πολιτικών Υγείας και Κοινωνικής Προστασίας, Τμήμα Διοίκησης Επιχειρήσεων, Πανεπιστήμιο Δυτικής Αττικής, Αθήνα

Αρχεία Ελληνικής Ιατρικής 2023, 40(1):44-49

ΣΚΟΠΟΣ Η διερεύνηση της εφαρμογής πρωτοποριακών μεθόδων εκπαίδευσης με την αξιοποίηση της τέχνης, όπου η φιλοσοφία του σχεδιασμού τους αντλήθηκε από ιδέες οι οποίες ορίζουν την ανθρώπινη Ιατρική. **ΥΛΙΚΟ-ΜΕΘΟ-ΔΟΣ** Διενεργήθηκε ερευνητική στρατηγική ποιοτικής έρευνας, βασιζόμενη σε τέσσερις πυλώνες: (α) τη δημιουργική γραφή, (β) το παιχνίδι ρόλων, (γ) τη θεατρική δραματοποίηση και (δ) τα εκπαιδευτικά σενάρια. Διερευνήθηκε υλικό που προέκυψε από μεθόδους βιωματικής μάθησης σε επίπεδο μεταπτυχιακών και προ-διδακτορικών σπουδών με εκπαιδευτικό πληθυσμό λειτουργούς υγείας. Η θεματική ανάλυση αποτέλεσε τη μέθοδο ανάλυσης και σύνθεσης δεδομένων ποιοτικής έρευνας. **ΑΠΟΤΕΛΕΣΜΑΤΑ** Από την ανάλυση των αποτελεσμάτων ανιχνεύτηκαν καινοτόμες μορφές κοινωνικής δεξιότητας όπως η προσήνεια, η οποία εμπερικλείει τη θεμελίωση του συναισθήματος εμπιστο-

σύνης και τη συγκρότηση συνεργατικού θεραπευτικού πλαισίου ασθενούς-λειτουργού υγείας, καθώς και τη δεξιότητα της επινόησης ως υπέρβασης δύσκολων καταστάσεων. Ταυτόχρονα, οι λειτουργοί υγείας ανέπτυξαν τη δεξιότητα της ενσυναίσθησης και του αναστοχασμού που οδηγούν στη βιωμένη διεργασία της αυτογνωσίας. Επιπρόσθετα αναδείχθηκε ότι η εκπαίδευση στο πλαίσιο της ομαδοσυνεργατικής μάθησης συνιστά το θεμέλιο μιας μορφής διαλεκτικής δημοκρατίας και προαναγγέλλει το λυκαυγές μιας εύρωστης κοινωνικής συλλογικότητας. Ο λειτουργός υγείας που θέτει στο επίκεντρο τον άνθρωπο κατορθώνει να εμπλουτίσει τη θεραπευτική του δράση. Στον αντίποδα, η αντικειμενοποίηση του ασθενούς αποτελεί ένδειξη επαγγελματικής εξουθένωσης. ΣΥΜΠΕΡΑΣΜΑΤΑ Σεμινάρια βιωματικής μάθησης για την επιμέλεια εαυτού θα επιφέρουν την ενδυνάμωση των λειτουργών υγείας. Καταδεικνύεται η σημαντικότητα της ένταξης μαθημάτων από το πεδίο των ανθρωπιστικών σπουδών σε όλα τα επίπεδα της τριτοβάθμιας εκπαίδευσης επιστημών υγείας και καθίσταται διαυγές ότι η τέχνη συνιστά έναν νοητικό και ψυχικό δίαυλο που έχει τη δύναμη να οδηγήσει στην αυγή ενός νέου θεραπευτικού πολιτισμού.

Λέξεις ευρετηρίου: Αξιοποίηση της τέχνης, Βιωματική μάθηση, Εγκάρσιες δεξιότητες, Θεραπευτική πραγματικότητα, Ποιότητα φροντίδας

References

- 1. SARRIS M. Sociology of health and quality of life. Papazisis Publications, Athens, 2001:238–244
- 2. BINKLEY M, ERSTAD O, HERMAN J, RAIZEN S, RIPLEY M, MILLER-RICCI M ET AL. Defining twenty-first century skills. In: Griffin P, Mc-Gaw B, Care E (eds) Assessment and teaching of 21st century skills. Springer, Dordrecht, 2010:17–66
- 3. KOKKOS A. The use of art in adult education. Available at:-htt-ps://eclass.upatras.gr/modules/document/file.php/PN1472/Kokkos_2.pdf
- 4. FREIRE P. *The treatment of the oppressed.* Rappa Publications, Athens, 1976:9–24
- 5. JARVIS C. Transformative learning through creative life writing; exploring the self in the learning process by Celia Hunt. *Biography* 2014, 37:822–825
- 6. DAGHAMIN R, NASER I, KHALES B. Effectiveness of role-playing in enhancing creative writing of English major students at Al-Quds University. *J Educ Soc Behav Sci* 2017, 19:1–12
- 7. GOUVA M, KOTROTSIOU E. *Psychological issues in healthcare stories.* Dimitris Lagos Publications, Athens, 2011:29–46
- 8. JOYNER B, YOUNG L. Teaching medical students using role play: Twelve tips for successful role plays. *Med Teach* 2006, 28:225–229
- POULIMENAKOU G, KYTAGIAS C, SHARRIS M, PSAROMILIGOS I. "Roleplaying" educational scenario, 1st Grade. Vocational Senior High School. Department of Health, Welfare and Wellness. Intensive training of teachers in distance learning, University of West Attica, Athens, 2021. Available at: https:// digitlab.uniwa.gr/wp-content/uploads/sites/472/2021/12/ %CE%92%CE%9F%CE%9F%CE%9A_eClass_T1_S1_Role_ Playing_Final.pdf
- 10. GOFFMAN E. *The presentation of the self in everyday life*. Alexandria Publications, Athens, 2006:57–59
- 11. KOURAKOS M, POULIMENAKOU G, SARRIS M. Manifestations of social consctructionism in the therapeutic process and learn-

- ing of healthcare professionals through theatrical expression. *Arch Hellen Med* 2021, 38:336–342
- 12. WORLD HEALTH ORGANIZATION. Quality of care. Available at: htt-ps://www.who.int/health-topics/quality-of-care#tab=tab_1
- 13. BALASKA D, BITSORI Z. Quality in health care and the degree of satisfaction of patients. *Perioperative Nursing* 2015, 4:107–120
- ARDAVANIS SA. Fragments and rustles. Alexandria Publications, Athens, 2010:161–167
- 15. ARDAVANIS SA. *On virtual walls*. Govostis Publications, Athens, 2014:81–83
- ARDAVANIS SA. "Delayed contre-temps" in Asphyctionia. Alexandria Publications, Athens, 2005:109–114
- 17. GULL SE, O'FLYNN R, HUNTER JYL. Creative writing workshops for medical education. Learning from a pilot study with hospital staff. *Med Humanit* 2002, 28:102–104
- 18. REISMAN AB, HANSEN H, RASTEGAR A. The craft of writing: A physician-writer's workshop for resident physicians. *J Gen Intern Med* 2006, 21:1109–1111
- 19. DE CARVALHO FILHO MA, LEDUBINO A, FRUTUOSO L, DA SILVA WAN-DERLEI J, JAARSMA D, HELMICH E ET AL. Medical education empowered by theater (MEET). *Acad Med* 2020, 95:1191–1200
- JIANGY, SHIL, CAO J, ZHUL, SHAY, LITET AL. Effectiveness of clinical scenario dramas to teach doctor-patient relationship and communication skills. BMC Med Educ 2020, 20:473
- 21. NESTEL D, TIERNEY T. Role-play for medical students learning about communication: Guidelines for maximising benefits. BMC Med Educ 2007, 7:3
- 22. MURRAY J. Development of a medical humanities program at Dalhousie University Faculty of Medicine, Nova Scotia, Canada, 1992–2003. *Acad Med* 2003, 78:1020–1023

Corresponding author:

G. Poulimenakou, 45a Nigdis street, 142 33 Nea Ionia, Greece e-mail: gpoulimenakou@gmail.com

.....