

International Journal of Nursing and Health Care Research

Perry N and Foster S. Int J Nurs Health Care Res 5: 089.

DOI: 10.29011/IJNHR-089.1000089

Opinion Article

Classroom Skits Could Be a Beneficial Addition to Assist Students Learning Psychiatric Diagnoses

N. Perry, DNP, APRN, FNP-BC*, S. Foster, MSN, RN

School of Nursing, Marshall University, Huntington, West Virginia, USA

***Corresponding author:** Natalie R. Perry, School of Nursing, Marshall University, One John Marshall Drive, Huntington, West Virginia, USA. Tel: +1-3046962639. Email: elkins80@marshall.edu

Citation: Perry N and Foster S (2019) Classroom Skits Could Be a Beneficial Addition to Assist Students Learning Psychiatric Diagnoses. Int J Nurs Health Care Res 5: 089. DOI: 10.29011/IJNHR-089.1000089

Received Date: 08 May, 2019; **Accepted Date:** 30 May, 2019; **Published Date:** 05 June, 2019

Students performing classroom skits in an Associate Degree Nursing (ADN) program can benefit the learning of psychiatric diagnoses. Learning psychiatric diagnoses such as schizophrenia and bipolar mood disorder can be difficult concepts for nursing students. Many students have limited formal education regarding psychiatric diagnoses particularly within the realm of nursing and feel ill-prepared to care for this patient population after graduation [1]. Psychiatric nursing is a specific aspect of nursing that includes nursing interventions as well as psychotherapeutic techniques [2]. Incorporating these aspects into student directed skits can be a beneficial addition to classroom teaching that can enhance learning by presenting using several teaching modalities as well as incorporating humor that is respectful and in good taste. This teaching modality addresses the visual learning as well as breaking up the podium lecturing which can be monotonous, long, and boring to some students.

Psychiatric nursing education is an important aspect of nursing education. Students often encounter psychiatric patients at many different levels of care, not just in psychiatric facilities or wards. Nurses play an important role in the care of these patients and skits within the classroom can be utilized to help display therapeutic care techniques. Unfortunately, many resources for psychiatric nursing education, such as videos, are often outdated or are unavailable on the desired topics and thus, student organized skits can be relevant to the current practice environment [3].

Classroom skits are created based on the psychiatric diagnosis assigned. Students are formed into groups with varying numbers (typically six to twelve students per group) depending on the diagnosis given. All students in the assigned group are expected to involve all members in the display of the diagnosis within a 15 to 20-minute scenario. A rubric was created to evaluate the students on 12 criteria during their skit: ability to be heard,

enthusiasm, time frame of 15-20 minutes, group involvement by all students assigned to the group, organization, knowledge, causes of the diagnosis, signs and symptoms of the diagnosis, nursing care portrayed, pharmacology aspects incorporated, therapies included and creativity/professionalism. No prior information is given to the students other than the assigned diagnosis. The skit must be performed live in the classroom during class time. Each group participant receives the same grade given from the instructor's evaluation of their skit for a total of 100 points or 10 percent of their total course grade. At the end of the semester, each student was asked to evaluate the following statement on a Likert scale from 1 (being the best) to 5 (being the worst): "The skits in class presentations were appropriate for application of course content". During the past six semesters, average scores of all students who participated in the survey were 1.220-1.723.

Students are expected to visually act out the disorder in the classroom for their peers to observe. All information presented is expected to be obtained from credible sources such as their textbook. The skit should be engaging to the audience of their peers. Students can use props or costumes as they feel could be helpful in the scenario. The causes, as well as signs and symptoms of the diagnosis, should be audibly spoken and visually demonstrated for those viewing to understand the diagnosis. Nursing care as well as therapeutic techniques, such as individual or group therapy sessions, should be included. Appropriate pharmacological interventions should also be discussed. After the skit is performed, the professor lectures on the topic and refers to aspect of the skit that displayed or did not display correct knowledge regarding the diagnosis. Students are expected to be creative and professional in the skit development. Diagnoses assigned included human sex trafficking, schizophrenia, bipolar mood disorder, depression and suicide to name a few. Some examples include a scenario

involving the impaired nurse for the topic of substance. Another example comes from a group who presented “Bipolar Mania: The Musical” which was recreated from the popular movie *High School Musical*. Additionally, another group used Alice in Wonderland’s Mad Hatter’s Tea Party to visually display of schizophrenia in the form of hallucinations.

The skit creation is beneficial to the performing group as well as their peers. Teamwork and collaboration require the group to work together to incorporate everyone in the skit performance. Students are required to study the diagnosis and create a way to visually display the characteristics of the disorder while verbalizing accurate information for additional knowledge and understanding for the audience. Skits often display signs and symptoms of behavior outside of psychiatric care then exhibits how psychiatric providers can assist patients once diagnosed. Nursing interventions and other therapeutic techniques are demonstrated to express the need for collaboration with other providers in the psychiatric setting. While creating the skit, students can also have a change to clarify their own thoughts, feelings and beliefs regarding the psychiatric diagnosis and have an opportunity to decrease their stigmatized attitudes [4].

The major advantage of utilizing skits in the classroom is to help students have a visual representation of these diagnoses while learning about them in the course. At times, psychiatric videos can be outdated and not all clinical rotations expose the students to diagnoses they learn about. For those viewing the skit, these students can visualize a scenario representing a psychiatric diagnosis. This is a memorable scenario that provides a situation for learning to be enhanced in the visual and auditory realm. The skits are used to supplement lecture regarding the diagnosis. Not all students learn by PowerPoint and lecture style classroom learning. Skits can be beneficial for those who learn better by auditory,

visual, kinesthetic, logical or social learning styles. Ultimately, skits can take the place of the lack of supplemental material to textbook content as it helps to meet many learning demands of the students.

In conclusion, skits can be a beneficial learning opportunity for nursing student. The knowledge gained through creating the skit prepares students for classroom lecture by requiring knowledge to be obtained before class time. The demonstration of the skit to classmates can be valued as a supplement to other course materials. Overall, the scenario can prove to be a vital aspect of learning for students who may otherwise struggle with understanding the content. Not all diagnoses are encountered during psychiatric clinical rotations and, with additional investigation, this technique could prove to be the next best supplement to clinical experience.

References

1. Happell B, Bennetts W, Platania PC, Tohotoa J (2016) Exploring the Scope of Consumer Participation in Mental Health Nursing Education: Perspectives from Nurses and Consumers. *Perspectives in Psychiatric Care* 52: 169-177.
2. de Melo Tavares CM, Gioza da Silveira P, Oliveira Lima T, Eleuterio Ferreira R, Silva dos Santos G (2015) Changes in Undergraduate Education in Psychiatric Nursing and Mental Health Area: Integrative Review. *Journal of Nursing UFPE* 9: 1329-1336.
3. Chambers M, McAndrew S, Nolan F, Thomas B, Watts P, et al. (2017) Service user involvement in the coproduction of a mental health nursing metric: The Therapeutic Engagement Questionnaire. *Health Expectations* 20: 871-877.
4. Horgan A, Manning F, Bocking J, Happell B, Lahti M, et al. (2018) ‘To be treated as a human’: Using co-production to explore experts by experience involvement in mental health nursing education - The COMMUNE project. *International Journal of Mental Health Nursing*, 27: 1282-1291.