Psychological effects of war: A role play. A case study in peer-to-peer education for medical students

Authors
Ziad Kronfol*; Mhd Omar Subei; Haidar Kubba; Khalid Taha; Aicha Hind Rifai

Abstract
The practice of psychiatry, perhaps more than any other specialty, is largely affected by culture. The medical student psychiatry curriculum often fails to incorporate this reality. The endemic of violence and warfare currently affecting the Middle East renders the topic of the Psychological Effects of War as a potentially essential and integral part of the psychiatry curriculum. Unfortunately, this topic is often neglected or poorly addressed in most psychiatric textbooks or curricula. A group of three students at Weill Cornell Medicine-Qatar (WCM-Q) in Doha took matter in their own hands to fill this gap. They used role play to illustrate three different conditions associated with the psychological effects of war in three different scenarios: anxiety, depression and PTSD. They made a video of the scenes with other classmates participating in the discussion. This innovative approach is a good example of peer-to-peer education to cover an important topic that is frequently missing in standard curricula.

Background
There has recently been an increased interest in curriculum revision and curriculum design for medical education all over the world. One reason for the need for constant revisions of the medical curriculum is the explosion in medical information that we are currently witnessing. Medical information is increasing and spreading at an amazing rate and it is getting harder for medical educators to decide what is important medical information that should be part of the core curriculum and what can be discarded. Innovation is also needed to meet the educational needs of today’s medical school learners, most of whom belong to the millennial generation. They like to question the value of the traditional lecture format and prefer to work in small groups in an interactive environment. Designing the psychiatry curriculum for medical students poses its own challenges. Psychiatry is more closely associated with society and culture than most other disciplines. The psychiatry curriculum has therefore to be adapted to the particular problems and issues the local country or culture is dealing with.

For the WCM-Q medical students who are mostly of Arab and/or Middle Eastern origin, adhering to the Psychiatry curriculum designed for the mother institution in New York City is not as culturally relevant or engaging. They want to learn about psychiatric conditions they are likely to encounter in their countries of origin, such as the mental health issues experienced by migrant workers in the Arabian Gulf, psychiatric issues related to refugees and victims of war, violence and terrorism. It is estimated that half of the population in Syria has been displaced, put under

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sieve, forced to migrate, or live under deplorable health conditions. It is expected that many if not most of these people will suffer psychological scars possibly for the rest of their lives. Yet, for the current medical students studying at WCM-Q, there is little in the traditional psychiatric textbooks or the western psychiatric literature that will help them know about these conditions and/or how to deal with them in the future. This creates a serious gap in knowledge and training for the students in the Middle East. The following is a case study in what a group of students decided to do to fill this gap.

Purpose

The purpose of the presentation (role play) is to fill a gap in the knowledge about the day-to-day lives of victims of war and violence in the Middle East. Rather than relying on published literature which is very meager at best, three students decided to develop a video to role play symptoms of war-related psychiatric disorders. The symptoms are based on DSM-5 criteria of common psychiatric conditions. The symptoms were slightly modified to reflect Middle Eastern culture and to emphasize the violence and fear often experienced in warfare situations.

Setting

The students involved were completing the Psychiatry clerkship at Weill Cornell Medicine–Qatar. Each student has to make a presentation on a topic of his/her choice that is loosely related to mental health to complete the clerkship. This oral presentation usually lasts about fifteen minutes with five minutes for discussion. Use of audio-visual technology is allowed and even encouraged. Group presentations involving two or three students are also permitted. Common topics for presentations have included somatization disorders, personality disorders and other psychiatric conditions. Truly original presentations covered migration and mental health with a special emphasis on migrant workers in Gulf Cooperation Council (GCC) countries, a presentation that resulted in a publication. Other interesting topics included physician suicide, the psychological effects of fasting during Ramadan and a role play of a patient with anorexia nervosa (emergency room presentation). The purpose of the following presentation is to address the psychological effects of war, with a special emphasis on current violence and warfare in Middle Eastern countries.

General conditions

The students reviewed the literature regarding the psychological effects of war. They decided to focus on three psychiatric conditions commonly associated with exposure to violence and war: anxiety, depression/suicide and PTSD. They wanted their presentation to address these conditions in current Middle Eastern countries, particularly the wars in Syria and Iraq. They found very few published manuscripts. The lack of relevant literature inspired them to write scenarios for role play based on their own experience and the collective experience of family and friends living in the conflict-ridden areas. These scenarios can be viewed in the accompanying video: https://youtu.be/wV4RoLHKZbs. They have highlighted the above three conditions in three different scenes. One scene highlights generalized anxiety disorder suffered by a Syrian refugee, another scene depicts major depressive disorder followed by a suicide attempt of an Iraqi citizen who lost friends in an explosion in his country and the third scene describes a combatant who returns home only to be devastated by symptoms of PTSD.

Format

The choice of the format is what makes the students’ presentation special. By choosing role play, not only are the students providing the necessary information about the topics (anxiety, depression, PTSD), they are also expressing empathy by acting and living the psychiatric conditions. Furthermore, the participation by fellow students makes the whole presentation more interactive, which helps in the retention of the information.

Role play has often been used as an effective educational tool in the psychiatric training of medical students, residents and psychiatric nurses. It has for instance been used to help trainees discuss medications with their future patients. Role play has also been used in the difficult task of teaching empathy.

Last but not least, we included a few words about the importance of peer teaching. While its efficacy in medical education has not been adequately investigated, its practice in medical settings has been encouraged for a number of reasons. These include: to offer education to students on their own cognitive level, to create a safe and comfortable educational environment, to enhance intrinsic motivation in students, to promote leadership skills and to enhance confidence.
Summary

In summary, students at WCM-Q developed a video that includes scenes from role-play of three psychiatric conditions common among survivors of violence and wars in Middle Eastern countries. The three conditions are generalized anxiety disorder, major depression/suicide and PTSD. The choice of role-play to fill a gap in the psychiatric curriculum is emphasized. Peer-to-peer teaching can provide a valuable contribution to medical student education, particularly in resource-limited countries where gaps in the curriculum are identified but not easily filled.

Supplementary files

Video recording of student role-plays: https://youtu.be/wV4RoLHKZbs

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References


