Reviewer's report

Title: The Fourth Wall as didactical device in medical communication training

Version: 1 Date: 22 July 2006

Reviewer: Debra Nestel

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General
This paper provides a fascinating analysis of a drama/theatre concept in relation to using role-play in medical education. The value of contributions from other disciplines to medical education is highlighted by this paper. Role-play is used extensively in medical education although we have little evidence for its benefit. This paper does not provide evidence but simply a framework to better understand what is happening in such activities. It may also help tutors who use this method to think differently about their work which is almost always beneficial.

The paper is well set out and relatively easy to read although attention to some English expression needs to be made.

Thoughtful comments made by the authors about their transcriptions.

I have set out a number of comments below and would urge the authors to consider them.

I look forward to reading more work from these authors.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Most are brief but I think should be addressed. They may sometimes seems very pragmatic and slightly missing the point of your message but as a reader I needed to understand more of the context in which the session you ran was presented. See below:

1. A specific role-play format is used in the example provided. How does the framework apply to other role-play contexts as used in medical education?
2. What level of training does the actor/actress need in the role-play you outlined?
3. What level of training does the moderator require? You mentioned the moderator's role but we were not guided as to when s/he made decisions to intervene in the activity? Given their critical role in moving the wall, I think this should be addressed. On what basis does the moderator take a timeout?
4. Please provide an operational definition for the term "didactic room" (or choose another expression).
5. Readers of the journal are likely to be medical educators who are interested in making use of what they read. How did you set up the role-play experience in this scenario in terms of aligning the learner's experience with their learning needs.
6. At the bottom of the first page in results section, mention is made of the situation that the doctor, the audience and the moderator could discuss the patient as if she were not present. I really wonder about the implications of this for learning in medical contexts. Although you are very aware of the abstract contexts in which you are working I am not sure that all participants would be. Indeed in my local Trust one of the most commonly identified problems from patients is that they are sometimes spoken about by clinicians as if they were not present. I think you need to respond to this educationally because the Location 2 concept may effectively model inappropriate behaviours.
7. I would also be interested in the authors referring to learning theory outside of drama pedagogy. It would strengthen their application of the fourth wall. For example, in what ways does Knowles's principles of adult learning or Schon's work on reflective practice fit with this framework. Does not need very much but I think it needs acknowledgement.
8. Please clarify the statement in the third page of the discussion - "the viewer must take action in order for social change to take place..." It is the social change that I am uncertain about (I am a sociologist by training) - That seems rather a broad claim in this context. The next paragraph also has some wobbly English expression (last sentence?)
Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
1. I wonder if the paper could be titled differently. I have a suspicion that something like - Analysis of role-play in medical communication training using a framework derived from theatrical studies (or something...) might be more engaging. I think using the term "fourth wall" is less attractive - especially since the concept is probably unknown to most reader of BMC Medical Education.
2. How many participants were involved in your role-play? What is their level of experience? How relevant do you think this concept is to other groups of learners with perhaps less experience?
3. Remove the word "the" from your models of the locations - just clutters the image

Discretionary Revisions (which the author can choose to ignore)

I think there is some attention to English language required. For example the opening sentence might be more direct if phrased as: "Art is increasingly used in educational settings around the world." (It would be helpful to provide some references as evidence for this statement as well.)

The title of the next section need not be "Short history of the fourth wall". It can just read as "The fourth Wall."

The last sentence of the paragraph commencing Bertold Brecht... needs to be rewritten.

You also use jargon or terms which I am not sure adds anything. (e.g. "delimited"n the section on material and methods)

What next?: Accept after minor essential revisions

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: No

Declaration of competing interests:
I declare I have no competing interests. Debra Nestel