

# Virtual Role-Player Sierra Ellis Helps Healthcare Providers Learn How to Establish Rapport with a Child Client

*Children are not always ready to participate in therapy. Providers can now practice this difficult conversation with a realistic virtual child role-player.*

COLUMBIA, MD, UNITED STATES, May 21, 2024 /EINPresswire.com/ -- Role-Players for Medical Training

“The use of medical role-players, otherwise known as ‘simulated patients’, within the medical education system is well established. Medical students need to be trained and the public need to be confident that the doctors that emerge from the training

process are fully competent, both in terms of their medical knowledge and ability to communicate effectively with patients.” ([Reference](#)) Role-player experiences with people of all ages are needed, including those with children. While children may be used as role-players, there are ethical and other issues to consider, making their use challenging, so an alternative is needed. Virtual child role-players can fill this training gap, so that providers can practice and learn the special skills needed to work with children.

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The first session with a child sent to therapy is critical for breaking down barriers and achieving success. Now, providers can practice this session with a realistic virtual child.”

*Dale Olsen, Ph.D.*



Figure 1 Providing therapy for a child can be challenging

## The Child Virtual Role-Player

Now, [SIMmersion](#), with support from Professors Beth A. Sherman and Daicia R. Price at the University of Michigan School of Social Work, has developed a virtual-child role-

player to help therapist practice and learn how to establish rapport with a reluctant child client and begin therapy. To encompass realistic situations, the child role-player, named [Sierra Ellis](#),

may be anxious, confident, frustrated, aloof, or even a people pleaser. While any time users talk with her, she could have any of these personalities, but she will never be the same twice. Learners will gain from a variety of realistic experiences. Regardless of her personality, her rapport with the learner will evolve realistically and will depend on what they say to her.

### Who Is Role-Player Sierra Ellis?

Sierra is in seventh grade at a Middle School. Two months ago, she was in her first fight at school. After being teased for putting her head down on her desk during class, Sierra got in a pushing match with a classmate. She was sent to the office and her parents were notified. In the coming weeks, Sierra's behavior escalated. Sierra has spoken harshly to multiple teachers, she has been in three more physical altercations with other students, and she has been sent to the principal's office multiple times for misbehaving in class. Now, it's the therapist's job to introduce the idea of therapy to Sierra and establish a collaborative relationship with her.

### The Role-Play

During each role-play learners will be getting to know Sierra, setting expectations, and explaining confidentiality, all while showing her respect, using active listening, encouraging collaboration, and using age-appropriate language. If rapport is not properly built, she will become uncooperative; if it is built, she will become cooperative and positive. In any case, users will receive detailed feedback, including on the 17 items that should have been covered during the conversation, four items that helped create an empowering environment, and the use of three therapeutic tools.

### Concluding Remarks



Figure 2 Sierra Ellis



Figure 3 Therapist practicing with Sierra

Sierra has been carefully scripted to emulate the typical behavior of a child who can be helped by therapy. She gives providers the opportunity to gain experience working with a child in a realistic situation where mistakes do no harm but are learning experiences.

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