

“Future-Proofing” Communication Skills for Future Physician Learners

I have often cringed at depictions of physicians in the media. The classic depiction of physicians has been marked by a detached, cold disregard, and truly awful communication skills. Though much has changed over the years, this caricature persists well beyond the era of cigarette-wielding physicians diagnosing “hysteria.” This pejorative stereotype always seemed so wrong to me, entirely at odds with the people with whom I work and know to be warm and thoughtful. Yet, as a medical education fellow in the emergency department of a busy academic medical center, I have begun to see how ineffective bedside communication skills exhibited by some learners may be contributing to the persistence of these negative perceptions.

As discussed by Eckleberry-Hunt and colleagues in their article from the August 2018 issue of the *Journal of Graduate Medical Education*, “Is Medical Education Ready for Generation Z?” the authors noted that a generation reared on electronic communication may present new challenges to the development of in-person communication skills.¹ Indeed, in a 2017 survey of 3200 worldwide Generation Z respondents, 65% reported communicating more digitally than in-person on a typical day, and in the United States this percentage was even higher at 73.7%.² While we should be careful not to make generalizations about our learners by viewing them through a singular lens (eg, generational habits), it is important to consider the ramifications of these trends and not miss a potential opportunity.

Of course, every generation brings its own challenges to medicine and education. While baby boomers may have struggled with the transition to

electronic health records, Generation Z’s deficit of face-to-face contact is surely paired with a digital savvy that will prove useful to educators and patients. Just as younger generations helped their baby boomer colleagues figure out how to deal with an error message, we must collaborate with these new learners. I am certain that we can find creative solutions to emphasize the fundamental in-person communication skills necessary to build therapeutic relationships with patients of all races, ages, genders, and walks of life. In fact, I look forward to helping them find the joy in this aspect of our work.

As our interactions as a society become more and more digitized with each generation, we must redouble our efforts to ensure the humanity of our work is not diluted, and that the physician-patient relationship remains grounded in reality—at the bedside. The stakes are clear: Ensuring learners are able to bridge the divide between themselves and their patients is imperative to restoring the public’s faith in our profession.³ Perhaps, if we are successful, we will see this reflected back to us in popular media when physicians are depicted as the compassionate, collaborative communicators we strive to be.

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References

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