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Speak My Gen Z Language: Development and Pilot Evaluation of a Communication Skills Manual for Future Global Healthcare Professionals

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ABSTRACT: Background

Effective communication is a core competency for healthcare professionals and is fundamental to patient-centred care, professionalism, and safe clinical practice. However, medical students often experience challenges translating communication theories into authentic clinical encounters. Contemporary medical education requires innovative approaches that integrate communication teaching longitudinally while supporting active learning, reflection, feedback, and clinical application.

The increasing presence of Generation Z learners in medical schools has created a need for educational resources that combine established communication frameworks with digitally enhanced, interactive, and learner-centred approaches. This short communication describes the development and pilot evaluation of the Speak My Gen Z Language Communication Skills Manual, a curriculum-integrated innovation designed to support communication skills development among undergraduate medical students.

Innovation

The manual was developed using the Calgary–Cambridge communication framework and competency-based medical education principles. It integrates communication skills across preclinical and clinical learning, including history taking, physical examination communication, procedural communication, professionalism, feedback, reflection, inclusivity, simulation, formative Objective Structured Clinical Examination (OSCE) preparation, and remediation pathways. To enhance engagement among Generation Z learners, the manual incorporates video-based learning resources, practical clinical examples, reflective activities, and an illustrated peer guide named "Nikki".

Evaluation

Following one year of implementation, a pilot evaluation was conducted among 37 Year 1 Semester 2 medical students using a five-point Likert-scale questionnaire and open-ended feedback. Students reported positive perceptions of the manual, with 86.4% agreeing or strongly agreeing that it was helpful and relevant to their learning, and 83.7%

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reporting that it was clear, understandable, and easy to navigate. Qualitative feedback highlighted strengths related to organisation, practical relevance, curriculum integration, and visual engagement.

Conclusion

The Speak My Gen Z Language Communication Skills Manual demonstrates the feasibility of integrating a learner-centred, digitally enhanced communication resource within an undergraduate medical curriculum. Preliminary findings indicate high student acceptability and perceived educational value. Further evaluation using objective measures of communication competency is warranted.

INTRODUCTION

Communication skills are fundamental competencies required for effective healthcare delivery. The ability to establish rapport, gather clinical information, demonstrate empathy, explain medical information clearly, and engage patients in shared decision-making contributes significantly to patient-centred care and professional practice.[1] Communication skills are therefore recognised internationally as essential graduate outcomes requiring deliberate teaching, practice, assessment, and feedback throughout medical education.[2]

Despite widespread recognition of their importance, communication skills remain challenging to teach and learn. Medical students frequently report difficulty transferring communication principles into authentic clinical encounters, particularly when managing emotional concerns, uncertainty, cultural differences, and complex patient expectations.[3] Traditional approaches that rely on isolated workshops or didactic sessions may not provide sufficient opportunities for repeated practice, reflection, and feedback.

The Calgary–Cambridge consultation framework provides a structured approach to communication teaching by integrating consultation organisation, relationship building, information gathering, explanation, planning, and closure.[4] Evidence suggests that communication competency develops most effectively when embedded longitudinally within curricula and reinforced through experiential learning, simulation, observation, and feedback.[5]

The changing profile of medical learners also requires consideration in curriculum design. Generation Z students, who increasingly constitute medical school cohorts, have grown up in digitally connected environments and often prefer learning resources that are interactive, visually supported, accessible, and flexible.[6] However, technology-enhanced learning should complement rather than replace authentic interpersonal learning experiences.

Digital resources, video-based learning, simulation, and reflective activities have increasingly been incorporated into communication skills education.[7] Nevertheless, many existing resources remain fragmented, focusing on individual consultation skills rather than providing an integrated curriculum-wide pathway for communication development.

To address this gap, the **Speak My Gen Z Language Communication Skills Manual** was developed at IMU University as a longitudinal communication skills resource for undergraduate medical students. The manual integrates established communication frameworks with contemporary learner-centred strategies appropriate for Generation Z learners.

This short communication describes the development of the manual and reports preliminary findings from a pilot evaluation exploring student perceptions of its usefulness, clarity, and educational value.

Innovation Description

Development of the Speak My Gen Z Language Communication Skills Manual

The Speak My Gen Z Language Communication Skills Manual was developed as part of a curriculum enhancement initiative within the School of Medicine, IMU University. The primary aim was to create a structured communication skills resource that extended beyond individual teaching sessions and supported progressive development of communication competency across the undergraduate curriculum.

The development process was guided by three educational principles:

1. Competency-based medical education (CBME)
2. Calgary–Cambridge communication framework
3. Generation Z-responsive learning design

CBME emphasises progressive development of observable competencies through deliberate learning experiences, assessment, and feedback.[2] Therefore, communication skills were integrated across multiple stages of medical education rather than being treated as a single introductory topic.

The manual was mapped to communication competencies required during preclinical and clinical learning, including:

- establishing professional relationships;
- patient-centred history taking;
- explaining investigations and procedures;
- managing difficult conversations;
- communication during physical examination;
- teamwork and professionalism;
- reflective practice;
- cultural sensitivity and inclusivity.

Educational Design Features

1. Framework-based communication learning

The Calgary–Cambridge model was used as the organising structure for communication learning. The framework enables students to understand clinical communication as a structured process rather than a collection of isolated phrases or techniques.[4]

2. Integration with simulation and OSCE preparation

Communication skills were linked with simulated patient encounters, clinical skills sessions, and formative OSCE preparation. This allowed students to practise communication behaviours within realistic clinical contexts.

3. Digital and visual learning approaches

To enhance engagement among contemporary learners, the manual incorporated:

- video-recorded demonstrations;
- examples of effective and ineffective communication;
- reflective prompts;
- visual summaries;
- practical communication tips.

Digital approaches have been increasingly recognised as useful educational supports when combined with active learning and feedback.[7]

4. "Nikki" peer guide

A distinctive feature of the manual was the introduction of "Nikki", a fictional peer character who provides practical communication advice, reminders, and reflective prompts throughout the resource. The character was designed to make communication learning more approachable and relatable.

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Pilot Evaluation

Study Design and Participants

A pilot evaluation was conducted following one year of implementation of the Speak My Gen Z Language Communication Skills Manual within the undergraduate medical curriculum at IMU University.

Participants were Year 1 Semester 2 medical students who had utilised the manual during communication skills learning activities. Participation was voluntary and responses were collected anonymously.

Evaluation Instrument

A structured questionnaire was developed to evaluate students' perceptions of the manual. The questionnaire assessed:

- relevance to communication skills learning;
- usefulness as a learning resource;
- clarity and organisation;
- ease of navigation;
- overall acceptability.

Responses were measured using a five-point Likert scale ranging from strongly disagree to strongly agree.

Two open-ended questions explored:

1. Aspects of the manual students found most useful.
2. Suggestions for improvement.

Data Analysis

Quantitative responses were analysed using descriptive statistics and presented as frequencies and percentages.

Qualitative responses were reviewed and analysed thematically. Responses were coded and grouped into recurring themes representing perceived strengths and areas requiring improvement.

Results

Thirty-seven Year 1 Semester 2 medical students completed the pilot evaluation following one year of implementation of the **Speak My Gen Z Language Communication Skills Manual**. Overall, students demonstrated favourable perceptions of the resource and reported that it supported their understanding and application of communication skills.

Quantitative Evaluation Findings

Thirty-two students (86.4%) agreed or strongly agreed that the manual was helpful and relevant to their communication skills learning. Similarly, 31 students (83.7%) agreed or strongly agreed that the manual was clear, understandable, and easy to navigate.

Students reported that the manual provided a structured approach to communication learning by consolidating key concepts, practical examples, and clinical applications within a single resource.

Table 1. Student evaluation of the Speak My Gen Z Language Communication Skills Manual (n=37)

Evaluation domain	Agree/Strongly Agree n (%)
Manual was helpful and relevant to my learning	32 (86.4%)
Manual improved understanding of communication skills	32 (86.4%)
Manual was clear, understandable and easy to navigate	31 (83.7%)
Manual supported clinical skills learning	Positive overall perception
Overall satisfaction with the manual	High

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Qualitative Evaluation Findings

Analysis of open-ended responses identified five major themes:

1. **Clear organisation and logical sequencing**
2. **Ease of understanding**
3. **Practical clinical application**
4. **Comprehensive curriculum integration**
5. **Opportunities for further improvement**

Students valued the manual as a consolidated learning resource and highlighted its usefulness during clinical skills sessions and OSCE preparation.

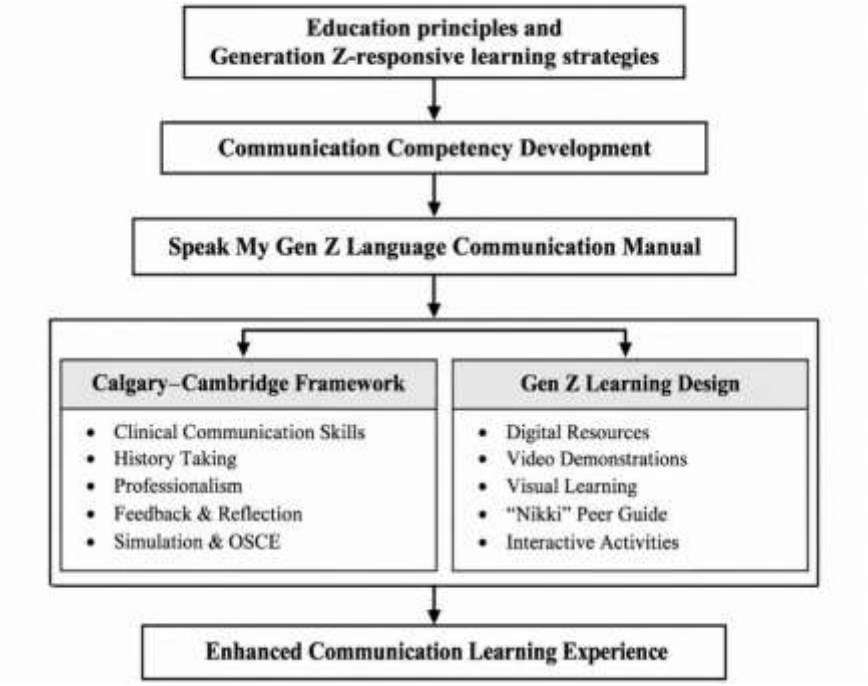
Table 2. Representative qualitative feedback from students

Theme	Representative student comments
Clear organisation	"The sequence of content is written accordingly."
Ease of understanding	"Easy to understand." / "Very clear explanation and elaboration for each section."
Practical application	"Easy to apply the skills in clinical sessions."
Comprehensive resource	"Everything compiled in one place for students."
Visual engagement	"The little drawing as a guide."
Areas for improvement	"Long sentences." / "It's very wordy." / "A lot of words."
Suggested enhancements	"More point forms." / "Example dialogues." / "Summary on the last page."

Students particularly appreciated the structured organisation, practical examples, and illustrated guide ("Nikki"), which enhanced engagement. The main recommendation was to reduce text density and incorporate more concise summaries, bullet points, and example dialogues.

Figure 1. Conceptual Framework of the Speak My Gen Z Language Communication Skills Manual

Figure legend:
The manual integrates established communication frameworks with competency-based medical



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DISCUSSION

The Speak My Gen Z Language Communication Skills Manual represents a curriculum-integrated innovation designed to address contemporary challenges in undergraduate communication skills education. Effective communication competency requires more than theoretical understanding; it requires longitudinal exposure, deliberate practice, observation, feedback, and reflection.[2–5]

A key strength of this innovation is its alignment with the Calgary–Cambridge consultation framework. This framework provides learners with a structured approach to clinical communication by integrating both consultation processes and interpersonal skills.[4] By embedding this framework throughout the curriculum, the manual supports consistency in communication teaching and reinforces transferable skills across clinical contexts.

The manual also addresses the evolving needs of Generation Z medical learners. Contemporary students increasingly engage with educational resources that are accessible, visually supported, interactive, and connected to authentic practice.[6] The integration of video demonstrations, practical examples, reflective exercises, and the "Nikki" peer guide was designed to enhance engagement while maintaining educational principles.

Importantly, the manual does not replace experiential learning or clinician–student interaction. Rather, it functions as a learning scaffold that prepares students for clinical encounters, simulation activities, and supervised practice. This aligns with evidence suggesting that digital learning resources are most effective when integrated with active learning, feedback, and authentic clinical experiences.[7]

The pilot evaluation demonstrated promising student acceptability. Most students perceived the manual as relevant, useful, and easy to navigate. Qualitative feedback suggested that students valued having a consolidated communication resource that linked theoretical principles with practical clinical applications.

The feedback obtained also provides important direction for future improvement. Students identified excessive text density as a limitation and recommended greater use of visual summaries, concise explanations, and example dialogues. These recommendations are consistent with contemporary approaches to educational design that emphasise readability, multimodal learning, and learner engagement.

The manual has potential scalability because it is designed as a longitudinal curriculum resource rather than a single educational intervention. It may support greater consistency in communication skills teaching across different teaching teams, learning environments, and clinical placements.

Strengths and Limitations

This innovation has several strengths. First, it integrates communication skills longitudinally across the undergraduate curriculum rather than treating communication as an isolated competency. Second, it combines an internationally recognised communication framework with contemporary learner-centred educational strategies. Third, it incorporates student feedback to support iterative improvement.

Several limitations should be considered. The evaluation involved a small cohort from a single institution, limiting generalisability. The findings represent student perceptions rather than objective measurement of communication performance. Future research should include larger cohorts and assess outcomes using validated communication assessment tools, OSCE performance data, and longitudinal evaluation.

CONCLUSION

The **Speak My Gen Z Language Communication Skills Manual** demonstrates a feasible and innovative approach to undergraduate communication skills education. By integrating the Calgary–Cambridge framework, competency-based medical education principles, digital learning strategies, simulation, and reflective practice, the manual provides a structured resource aligned with the needs of contemporary medical learners.

Preliminary evaluation indicates high student acceptability and perceived educational value. Further studies evaluating objective communication competency outcomes are required to determine the long-term impact of this innovation.

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