

Transforming communication across surgical generations – bridging the gap

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Effective communication is the cornerstone of successful surgical practice, directly influencing patient safety, team efficiency, and clinical outcomes. However, the modern surgical workforce faces challenges due to generational diversity, with surgeons possessing distinct communication styles shaped by their era's technology and education.¹ These differences, coupled with traditional hierarchical structures in surgery, create barriers to open dialogue, which can negatively impact teamwork and patient care.² Bridging these divides is crucial to maintaining high standards in surgical practice.

This essay explores the root causes of communication challenges within intergenerational surgical teams and presents solutions including surgical wisdom banks, communication standardisation, and cultural competence to enhance team interactions and patient care.³⁻⁵

Generational differences in communication styles reflect deeper cognitive frameworks shaped by exposure to evolving technologies and educational paradigms.¹ Senior surgeons who trained in more hierarchical environments often value brevity and authority, while younger surgeons prioritise inclusivity and feedback. This clash can lead to misunderstandings, reluctance to speak up, and reduced psychological safety.²

Additionally, surgical teams operate within rigid hierarchies, where junior members may hesitate to voice concerns, further inhibiting open communication.² This environment can result in poor decision-making, delayed interventions, and compromised patient outcomes. As Stevenson notes, the widening generational gap, if left unaddressed, can have severe consequences for both teamwork and patient care.¹

One promising solution to bridging the generational communication divide is the establishment of surgical wisdom banks, which are institutional repositories designed to capture the invaluable knowledge, experiences, and communication strategies of senior surgeons.³ These banks serve as living archives, preserving critical surgical techniques and communication insights that can be passed down to younger generations. This aligns with knowledge management theories, which emphasise systematic sharing of expertise to enhance organisational performance.³

The value of wisdom banks lies not only in preserving technical skills but also in fostering intergenerational respect and learning.¹ By documenting the insights of experienced surgeons, the wisdom bank ensures that younger colleagues

can access and internalise these lessons in real-time, applying them in complex surgical scenarios. More importantly, it encourages the bridging of communication styles, where the collaborative, feedback-oriented approach favoured by younger surgeons is informed by the brevity and precision of their senior counterparts.² This structured knowledge transfer process mitigates the risk of losing critical institutional knowledge while fostering a culture of continuous learning and mutual respect across generations.³

In environments where rapid and clear information exchange is critical, standardised communication protocols are indispensable. The use of structured tools such as Situation-Background-Assessment-Recommendation (SBAR) and Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS) has been proven to enhance communication, reduce errors, and improve patient outcomes.⁴ These tools provide a universal language that transcends generational differences, offering clarity and precision in the complex operative context of surgery.

These frameworks seamlessly bridge the communication styles of surgeons from different generations by establishing standardised protocols and fostering a shared language, ensuring clarity and cohesion in the operating room.¹ Senior surgeons, accustomed to brief exchanges, and younger surgeons, who may seek more inclusive dialogue, both benefit from the structured clarity SBAR offers. Standardised protocols eliminate the ambiguity inherent in unstructured communication, ensuring that critical information is conveyed concisely.⁴ Furthermore, the use of these tools encourages psychological safety, empowering all team members to speak up and contribute, fostering a collaborative, error-averse culture.²

As surgical teams and patient populations become increasingly diverse, cultural competence is no longer optional but a necessity for effective communication. Stubbe emphasises that cultural competence involves recognising and adapting to the varied generational expectations within both surgical teams and patient interactions.⁵ Older patients, for instance, may prefer a more paternalistic style of communication, while younger patients often expect a collaborative and transparent approach.¹

Within the surgical team, cultural competence helps surgeons navigate the generational divide. Emotional intelligence (EI), a key component of cultural competence, allows surgeons to recognise and respond to the emotional

and communicative needs of their colleagues.⁵ By fostering an environment of empathy and adaptability, cultural competence training equips surgeons to tailor their communication styles to suit both peers and patients, regardless of generational or cultural background. This skill is particularly crucial in surgery, where the ability to quickly assess communication preferences enhances team cohesion and patient trust.⁵

Implementing cultural competence training, particularly with a focus on generational dynamics, ensures that surgeons can effectively communicate with patients of all ages. This fosters improved patient satisfaction and better adherence to treatment plans, as patients feel heard and respected. In essence, cultural competence transforms how surgeons approach internal and external communication, aligning team dynamics with patient-centred care.

The communication challenges posed by generational diversity within surgical teams are profound, yet they are not insurmountable. Through innovative solutions such as surgical wisdom banks, standardised communication protocols, and cultural competence training, we can bridge these gaps and revolutionise how surgical teams collaborate and care for patients. Surgical wisdom banks offer a structured means of preserving and transferring essential knowledge, ensuring that insights from senior surgeons continuously inform younger generations. Standardised communication protocols like SBAR and TeamSTEPPS provide a common language that transcends generational differences, promoting clarity, psychological safety, and error prevention. Finally, cultural competence training equips

surgeons to navigate generational and cultural complexities, fostering a more inclusive, adaptable, and patient-centred approach to surgery.

In an era where the pace of technological and societal change accelerates, these solutions offer a pathway to sustained excellence in surgical practice. By embracing these strategies, we not only address current communication challenges but also set the stage for a new era of surgical teamwork that is adaptive, inclusive, and ultimately more effective in delivering high standards of care.

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