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Simulation for teaching communication and leadership skills

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Background: Women are under-represented in academic leadership despite growing numbers of female medical students. Communication as a component of leadership is comprised of observable behaviours, teachable to both sexes using simulation. Polarity Management uses breathing metaphorically to solve complex problems with non-binary solutions. Just as inspiration and expiration cycle together as equally important parts of breathing, traditional male and female communications are modifiable polarities in which simulation education can produce a unisex ideal. The Tuckamore Simulation Research Collaborative (TSRC) has published clinical communication scenarios for learners. Leadership skills may be taught in a similar way. **Methods:** One traditionally associates simulation with computerized human mannequins. However hybrid simulation and role-play are effective tools for teaching communication and teamwork when sound pedagogy is used alongside learning objectives that are appropriate for students' skill levels. The TSRC has developed a suite of simulation-based communication scenarios for teaching how to manage difficult patient encounters and for breaking bad news. A similar approach may be used to teach leadership skills.

Discussion: Good leadership is important when managing multiple traumas, breaking bad news or in difficult patient encounters. It depends on effective communication, which can be deconstructed into observable verbal and non-verbal behaviours that are modifiable with a simulation-based curriculum. The business literature describes female communication behaviours that may be antithetical to leadership. Male leaders may traditionally communicate successfully in the boardroom, but those skills may not apply to difficult patient encounters or Emergency Department resuscitation crises. As informed by Polarity Management, simulation can teach successful communication and leadership strategies to both sexes. Female students' leadership skills may improve if under-confident behaviours are identified and modified. Male students may become better leaders if they are taught collaboration and listening skills. Good leadership should be gender-neutral. **Conclusions:** Leadership and communication skills are necessary in many clinical settings. The observable behaviours that comprise them may be taught using simulation in the context of Polarity Management. While applicable to both sexes, this may be particularly pertinent to women who mentor future academic leaders.