Shame and the Medical Identity

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Shame is the emotion most closely linked to who we are, what are values are, our identity. It plays an important role in the formation of a professional medical identity.

Some of the causes of shame in medical trainees are:
- Feeling responsible for clinical errors
- Failing to meet organisational/educational targets
- Failing to conform to an idealised norm of a UK doctor regarding ethnicity, gender or sexuality
- Being sick or disabled as a doctor/medical student
- Being exposed to the shame and vulnerability of sick patients
- Being humiliated, or watching colleagues or patients be humiliated, by other doctors and teachers.

Common responses to shame (or defences against it)

Moving Away - Emotional and physical withdrawal from patients and colleagues, loss of empathy, depression, anxiety, addiction, disengagement with teaching or work

Moving Towards - Unthinking compliance with targets, appeasement, failure to advocate for patients, perfectionism

Moving Against - Rage, contempt for others, bullying, transfer of blame to others, power seeking, narcissism

What can Educators do?
- Recognise and acknowledge shame - could it be the cause of unprofessional behaviour?
- Spot maladaptive perfectionism - encourage self-compassion and acceptance of human imperfection
- Be interested in who your students are as individuals - not just what they know and do but who they are.
- Celebrate their diverse ideas, values and experiences and affirm their inherent worth as a person-separate from their achievements
- Talk about your own vulnerabilities, errors and failures.
- Talk about shame and encourage trainees to talk with you (or others) about their experiences of shame - meet them with empathy.

“Forget your perfect offering, There is a crack, There is a crack in everything, That’s how the light gets in” Anthem - Leonard Cohen
Further Reading


Lazare, A. “Shame and humiliation in the medical encounter.” *Archives of Internal Medicine*, vol. 147, no.9, 1987, pp. 1653-1658.

