SHAME IN MEDICAL EDUCATION: A MINDFUL APPROACH

Beth Whelan¹*, Edvin Schei¹, Tom Hutchinson²

¹* Corresponding author: Department of Global Public Health and Primary Care, University of Bergen, Bergen, Hordaland, Norway
nfbethwhelan@gmail.com

² Programs in Whole Person Care, Department of Medicine, Faculty of Medicine, McGill University, Montreal, Quebec, Canada

Shame is a ubiquitous and potentially damaging emotion with many nuances (embarrassment, humiliation, disgrace, remorse, ridicule etc.). It can be defined as “a state of experiencing oneself as devalued, diminished and an object of derision in the mind of another or others, which when internalized textures a sense of oneself”. Shame regulates social behaviour by penalizing deviations from the norm, and rewarding conformity. The influence of shame on physicians and medical learners is conspicuously absent from the literature on emotional challenges in medicine. The dearth of research on shame is not surprising given that “it is shameful and humiliating to admit that one has been shamed and humiliated.” (Lazare, 1987)

Existing literature highlights the harmful effects of shame on both physicians and learners. Humiliation is detrimental to student well-being and can lead to feelings of self-doubt, alienation and inferiority, triggers of perfectionism and loss of empathy. Practicing physicians are prone to shame if their authority is undermined, and may exhibit dismissive, defensive, or aggressive behaviors in the face of criticism, patient conflict or disagreements with colleagues.

© 2020 Beth Whelan, Edvin Schei, Tom Hutchinson. This article is distributed under the terms of the Creative Commons License CC BY. International Journal of Whole Person Care
Vol 7, No 1 (2020)
This workshop will explore mechanisms and implications of shame in medicine and medical education. We will present results from interviews with Norwegian medical students, and use an empirically validated approach called Mindful Practice to investigate challenging themes facing health professionals. This approach utilizes critical awareness (investigating the sources of shame), shared dialogue (reflecting on the personal impact of such experiences) and elements of appreciative inquiry (identifying individual qualities that mitigate negative effects).