Wrestling with the medical self –
Highlighting key factors in medical education towards enablement in doctors’ health.

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Outline

► Context
► Introducing Professional Identity Formation
► Hearing the narratives
► Reflect upon the narratives in context with the doctors’ health literature
► Integrating our knowledge into medical education

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Physician Health – a key to quality care

- Optimising health system performance
- Patient experience
- Quality of care
- Reduced cost of health care

The Quadruple Aim

- Lower Costs
- Improved Patient Care
- Better Outcomes
- Clinician Wellness

Wellness

Bodenheimer and Sinsky, 2014
Role of medical education

- Clinical knowledge
- Clinical skills
- “Attitudes” = Professionalism

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Professionalism

Transformation from Layperson to Skilled physician

- Knowledge and Skills
- Roles
- Responsibilities
- Values
- Ethical standards (boundaries)

Acculturative Process

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Professional Identity Formation (PIF)

- Adaptive process (developmental)
Transformation from Layperson to **Skilled physician**

- Psychological development - individual
- Socialisation in the community of practice - collective

**Multiple transitions**

- Student – medical student
- Preclinical – Clinical
- Medical Student – Intern
- Junior doctor – Registrar training
- Registrar - Specialist Fellow

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Professional Identity Formation (PIF)


https://www.growingtogetherpeds.com/kids-doctor.html

Professional Identity Formation (PIF)

Habits of
• Head
• Hand
• Heart

The ‘compleat healer’

“The Doctor”
by Luke Fildes

https://commons.wikimedia.org/w/index.php?curid=9004645

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Narratives within the literature

- Over 300 narratives
  - Published
  - First person accounts
- 168 individual narratives
- Rest were studies of doctors with embedded stories
  - FG, SSI

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Purposeful

Often published with the express purpose of teaching

“This account is not intended as a litany of complaint but as a call to physicians to express the compassion they feel toward sick colleagues. It is meant to draw attention to our frequent inability as physicians to deal with members of our profession who no longer fit the mold of the compleat healer.”

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“the secret of the care of the patient is in caring for the patient.”

Peabody, 1926.
Five Themes

- Self-Care
- Help-seeking
- Being a patient
- Perception of the treating doctor
- The stigma
"I had this bizarre misconception that like as a doctor you don’t get ill"

"I had never concerned myself with the possibility of developing mental or emotional disease. My internship was in a good teaching hospital, and I was doing acceptable work. Then into this picture of myself as a normal person crept a shadow, first slowly and then swiftly, the shadow of collapse, "the nervous breakdown" of the layman, and in a few weeks I was a crying and frightened child."
I have lived most of my life with the certainty that a "big illness" was waiting for me. Not an ordinary illness, but something obscure. A medical education proved very helpful in giving substance to some of these ill-defined anxieties.
Help-seeking

“I marveled at my seeming immunity to all the disease to which I was daily exposed”
Help-seeking

“I marveled at my seeming immunity to all the diseases to which I was daily exposed”

“If you see that attitude towards patients who have got those problems, it doesn’t make you want to be particularly forthcoming about your own.”
Help-seeking

“if you discuss something in the corridor or after surgery or whatever it’s not the same as actually going along to somebody specifically”
“a practitioner must cross that thin line, thereby joining the frightened half that screams “patient!”.

“But I quickly found that the view from the shore of the river is much different than it is when swimming in the swift-flowing current.”

“Crossing over to the other side”

“Changing hats”
“Then came the real psychological crunch as I had to put on hospital pajamas...I entered patient hood and **leaving behind my identity** as an invincible, hard-working, in-control physician.”
"It is truly frightening to suddenly become a patient: you tend to know the worst possible scenarios and want to know everything."

“I was unprepared for my role as a cancer patient and the new appreciation for fragility of life and sense of helplessness.”

“it is a shock and an enormous displacement to divest ourselves of the robes of superiority we wear as physicians and don the patient robes”
“You never really appreciate what it’s like being a patient until you’re a patient.”
“Many of the things we do as health professionals that are mundane and thoroughly predictable to us can, to patients, be truly bewildering, if not frightening, even if the patient is a doctor who “should know” what is involved.”

“I just…wiped out the fact that I was a doctor during that time and just let other people look after me and that was my way of dealing with it.”
The perception of the treating-doctor

“All my physicians were caring and well-intentioned, yet their reluctance to say “I don’t know” shook my trust in them”

"I still seek to play an active role in the decision making process. Together with my doctor, we weigh up the evidence, to which I apply my own preferences and values."

“it’s not just [a] doctor-patient relationship...it is more awkward”
"Although our medical profession communicates to patients that mental health should not be stigmatized, we are guilty of that very stigmatization"

“some doctors couldn’t see past the fact that I "used to be" one of them"  

“hard to accept that I had a mental illness. I felt weak and ashamed, and began to appreciate, too, the embarrassment and stigma my patients felt"
The stigma

“I found some psychiatrists so distant that they made me feel as if I were carrying some sort of contagious disease”

“everyone feels the same probably about it and by not talking about it we just perpetuate the inability to talk about it.”
The literature

- Reinforces the stereotypes
- Vagueness that all doctors need to find a GP
Knowledge and Skills

- Self-Care
- Help-seeking
- Being a patient
- Perception of the treating-doctor
- The stigma

Proactively counter the Attitudes
Responses to:

- Observation
- Doing medicine
- Exposure to work climate
  - Poor Sleep/Thirst/Hunger
Responses to:

- Observation
- Doing medicine
- Exposure to work climate
  - Poor Sleep/Thirst/Hunger
- Emotional responses
  - Grief
  - Isolation
  - Embarrassment

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Responses to:

- Observation
- Doing medicine
- Exposure to work climate
  - Poor Sleep/Thirst/Hunger

Being part of the team

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Knowledge and Skills

- Self-Care
- Help-seeking
- Being a patient
- Perception of the treating-doctor
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Knowledge and Skills

- Self-Care
- **Help-seeking**
- Being a patient
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Through medical education

- Clinical knowledge
- Clinical skills
- “Attitudes” = Professionalism

We learn to draw the line

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https://internetmonk.com/archive/where-to-draw-the-line
Knowledge and Skills

- Self-Care
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Aequanimitiy - Osler

- Understood the power of narratives
- Well-known for his teaching of compassion at the bedside
- Encouraged everyone to have an “Avocation”

Being more than a physician
Hold the medical identity lightly

“It is hardly practical to require that every physician have a serious illness as part of the process of preparing to care for patients...It may prove helpful, however, to listen carefully to physicians who have been patients”
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