Oration from 1998

Oration Title:

Stories of Shame and Humiliation in Physicians

Orator:

Aaron Lazare, M.D.

Abstract of Oration:

Dr. Lazare explains the context of shame and humiliation in the patient-physician relationship. Patients, whether by the nature of their illness, and even in the course of regular examinations, can easily feel humiliated which may be enough to discourage patients from seeing a doctor. Doctors exacerbate these feelings by criticizing patients for causing their own illness, delaying to seek help, or failing to follow the doctor's orders. He singles out three groups as most vulnerable to feeling ashamed: "adolescents, the elderly, and physicians." To clarify, he defines shame and humiliation. Shame is what we feel when "our feelings, thoughts and/or behaviors fail to meet our standard of who we are, who we aspire to be or how we want to be perceived by others," and "humiliation is the experience, usually interpersonal, of feeling unfairly demeaned, degraded or lowered in status." Having studied 300 responses from physicians as to their "most shameful or humiliating experience of [their] professional career" he places them into 15 categories.

In the first, physicians are put into the role of patients and experience feelings of professional inadequacy and loss of control. Second, as medical students, many of the respondents were mocked or criticized for incompetence, usually by medical school faculty. Third is the similar criticism of residents by senior residents or attendings. The fourth category deals with "abuse of female medical students, residents and physicians." Fifth is the category of physicians' failures in diagnoses and treatments. Failing board exams is the heading of the sixth category. The seventh group deals with physicians' malpractice suit experiences. Stories of physicians' shameful interactions or thoughts about their patients comprise the eighth group. In the ninth are stories of physician faux pas. The next category represents physicians' shame or embarrassment over the behavior of other physicians, feeling the patient's embarrassment, or their peer's shame. Next is physicians' shame over being criticized by patients and/or their families for anything from being cold or rude, to not informing patients enough about their illness, to being too interested in money. The twelfth group deals with patient betrayals of their physician, in such forms as personal attacks, sexual advances, or lying about their disease. In the next group are stories of specialists criticizing colleagues as being general practitioners, and of physicians making discriminatory remarks about colleagues' ethnicity or sexual identity. Next are stories of organizational affairs such as being fired or enduring budget cuts. Lastly are stories of a physician's family member as a patient.
Dr. Lazare believes doctors, because of the nature of their hierarchical training system and their personality traits, are especially prone to feeling shamed or humiliated more than other professionals. The people they serve have high expectations which physicians cannot always meet, sometimes resulting in a malpractice suit. Experiences like those he studied often have devastating effects on the physician. They feel depressed, doubt their professional career path, withdraw from patients, friends, and family, and feel vengeful toward the perpetrator of their humiliation. He believes a "fear of shame" can be constructive, whereas humiliation never is. Lazare gives suggestions for dealing positively with different shameful or humiliating professional experiences.