REFLECTIONS ON GROUP 2, SESSION 3, OCTOBER 21, 2003

It's not an easy thing to take a hard look at your chosen profession, especially while you're still in the process of choosing it. This turned out to be our main topic of our last discussion and it was a tough one. We uncovered a range of reactions to the role models encountered in medical training. Several students expressed serious concerns about certain physician attitudes and behaviors they'd observed, typified by arrogance, callousness, and incompetence directed at vulnerable patients (or students). They also commented strongly about the deleterious effects of the uncompromisingly hierarchical structure of medical education. There was less agreement, however, as to how widespread these problems were, and other students emphasized their positive experiences with generative, kind, and competent actions of physicians and residents. In the midst of strongly held opinions, we struggled with feelings of polarity and worked not to see each other as divided into "camps." Some of us may even have had the ironic – and humbling – experience of noticing the angry, frustrated feelings we were criticizing in attendings arising in ourselves and being directed toward other group members. Ah, let's all take a breath, relax, and even try a smile. Our emotions are tricky little things, and always provide much opportunity for learning!

When I looked back on this session, I wondered about the root of its intensity. I think it was a hard conversation to tolerate emotionally because it struck so close to core identities. No one wants to hear that the career toward which they're heading is filled with people who sometimes, if not often, exhibit arrogant, cynical behavior. No one wants to *experience* their profession as filled with arrogant, power-wielding individuals. So it's easy to make the other "wrong." Some might be labeled "cynical" and "bitter". Others might be called "naïve" and "lacking in life experience." When disagreement arises, it's natural to protect our point of view.

Also, there were strong feelings being expressed – not just "polite" emotions of mild frustration or annoyance, but great anger, bitterness, perhaps even despair. These can be uncomfortable, even frightening, emotions to experience and to witness. Often we don't want to feel them and, if we aren't feeling them, we don't want to be "infected" by them. Alternatively, sometimes we might feel that we can't give up these emotions, because we suspect they are the only things standing between us and becoming people we don't want to become.

Now, paradoxically, although it wasn't always a comfortable conversation, our session provided much fertile soil for learning, because we find ourselves in situations like this all the time: i.e., situations in which we see other people "behaving badly" (arrogant, cynical, uncaring etc.), in ways that do harm to others (and likely themselves). So how do we want to act and respond in such situations? Guess what, gang, I don't know! But here are some things I thought about:

1) One issue is how we deal with our own emotions of anger and bitterness. First we may want to ask ourselves, are these emotions helpful? As I suggested above, maybe we're afraid that if we release these feelings, we will give up, no longer

fight the good fight. I understand this fear. I also know that when I act from a place of anger anger, I usually end up saying and doing things that are unskillful and unproductive. Lately, I've wondered whether it is possible to "distill" anger so that the lack of clarity that so often accompanies it "settles," while its pure energy remains. Think of it like a glass of water into which you dump some sand. Initially, the water looks murky. But when the sand settles, the water is clear again. With such clarity, we are almost always in a better position to judge what we need to do, while maintaining the energy to implement whatever course of action we decide upon.

- 2) Another issue is how we deal with each other, especially when we disagree with what's being said, or when we see things very differently. First and foremost, let's remember some of the attitudes that have brought us together as a group. I think that we want to act toward each other in ways that expression compassion, caring, and respect. We can do this by careful listening, paraphrasing the other's point of view, and acknowledging their discomfort and distress. We can ask ourselves, what does the perspective of the other person have to teach me? (This doesn't mean we have to agree with it). What do I feel about what the other person is saying? What do I want to say in reply, what do I hope to achieve by saying it, and how can I express myself to best accomplish these goals?
- 3) A third issue is how we deal with people we feel are morally wrong or abusive. In this regard, I've learned a lot by reflecting on the Dalai Lama. Here is someone whose position of authority makes him responsible for an entire people who have been systematically oppressed and deprived of religious freedom. He has worked tirelessly on the world stage and behind the scenes to humanize the actions of the Chinese toward the Tibetan populace. He is neither passive nor helpless. Yet he consistently attempts to cultivate an attitude of kindness and respect toward those who have inflicted so much pain and suffering on his community. In other words, his attitude reminds us that, generally speaking, it is dangerous to demonize others or strive to make them wholly wrong and evil. (There may be a few wholly evil people in the world, but that's a topic for a different discussion!). I'm always amazed at how often people I can't stand and who seem to be very nasty to me can turn around and be kind and caring in another situation. People are so much more complicated than we'd like to think!

In the end, perhaps it matters less whether we view medicine as a very troubled profession, a noble healing profession, or some combination of both. We are all struggling to find our place in it. And I don't think I am too pollyannish to have sensed during our discussion a fair amount of discomfort, but also a lot of caring and commitment, both toward medicine and toward each other. Let's continue to bring attitudes of honesty, openness, compassion, and even forgiveness to our interactions as we work to heal the profession, each other, and ourselves. I have great admiration for all of us in this effort.

Happy Thanksgiving, and see you December 2. Regards, Dr. Shapiro