

THE SHAME CONVERSATION

Discussion Questions to pair with *The Shame Conversation* Film

Individual Feelings & Experiences

How does this film resonate with your experience as a healthcare learner, provider, or administrator?

Would anyone feel comfortable sharing an experience of shame with the group? How did you feel during the shame reaction? How did you feel about yourself? What effects did that experience have on you? On your learning and/or performance?

Numerous events, situations, or circumstances can trigger shame. We heard about several of these in the film. Discuss your reactions to them. Can you think of other events, situations, or circumstances that can trigger shame in healthcare?

Numerous participants in the video told shame stories related to how we talk to one another, particularly how supervisors/mentors speak to learners. Theirs stories suggest that even a seemingly minor comment to one person can cause significant, prolonged shame in another. What do you think about this? How can we better police ourselves for language and treatment that may inadvertently or intentionally cause shame in others?

Cynthia humanizes the experience of making an error in healthcare and the need to sometimes push past the error and continue caring for a patient. Have you experienced this? If so, how did you cope with your emotions immediately following the error? In the days and weeks after the error?

Kenny talks about questioning whether or not he belonged in medicine as the result of a shame experience during his training. Have you ever questioned whether you belong in medicine or your institution? What caused those feelings? How did you cope with them?

Talking about shame with others

In the video, Will says that it is risky to talk about shame. Do you agree or disagree? How did sharing their experiences seem to affect the participants in the video?

Have you witnessed other healthcare learners or providers experiencing shame? Were you able to support them? If so, how? If not, if not, what barriers made it difficult to provide support?

Numerous participants in the video point to the need to *listen* to others' shame stories, in addition to sharing our own. How can you be an effective listener to someone experiencing shame? How can you make them comfortable opening up?

The culture of medicine and medical education

Numerous participants in the video discuss the “rite of passage” in healthcare training and suggest that enduring shaming treatment is a part of the culture of medicine. How do you feel about this? How can we go about changing this culture?

In your work/learning environment, are people able to talk openly about shame and other difficult emotions? If so, what do you think allows people to openly talk about it? If not, what prevents people from openly talking about it? How can we overcome these barriers?

Developing and Promoting Shame Resilience

What strategies do you use to constructively engage with shame when it occurs or avoid significant shame when a potential trigger occurs (i.e. an error, being wrong in public, etc)? In other words, what shame resilience strategies do you use?

Cynthia talks about her role as a leader and the importance of beginning a conversation about shame. As a leader, what can you do to participate in or initiate conversations about shame?

A shame resilient culture is one in which people can openly and authentically engage with their shame experiences in a way that promotes individual healing and group belonging. What do we need to do to develop a shame resilient culture in medicine and medical education?

We have spent a lot of time discussing the negative aspects of shame in medicine. Are there ways that shame experiences can help us grow? What is required for growth to occur following a shame reaction?