# Empathy and Role modeling. Is it missing? **Editorial**

Muhammad Idrees Anwar.

Dean Surgery & Allied, Rawalpindi Medical University. Exectuive Editor, Pakistan Journal of Surgery & Medicine.

Let me start by congratulating the dedicated team of Pakistan Journal of Surgery and Medicine (PJSM) whose untiring effort brought this journal of international standard. I have the honor to be part of this professional and enthusiastic galaxy of highly intellectual writers. Insha'Allah you will witness the glory of this journal very soon.

We were never taught "empathy". In fact, let me admit my ignorance, I did not know what it meant before starting my clinical practice. Late in my clinical practice, I became conversant with emotional intelligence. Yet I feel that I accomplished those skills from my teachers presumably as part of the hidden curriculum. They were my role models and they manifest most compassionate and empathetic attitude toward their patients and doctors alike. Empathy is regarded as an essential quality for being "a good" doctor and most desired attribute by the patients. Being compassionate is the biggest virtue that a physician should possess yet it is considered least important for being promoted in medical school.

Let me admit with sorrow that we see empathy decline among doctors to an alarming extent. This is not just my "gut feeling" but national and international data support this finding. A study done in Lahore showed very low scores in both emotional intelligence and empathy than the average person. In a recent work American doctors themselves have acknowledged empathy erosion in their clinical experiences. One such study performed at the University of Arkansas, validated empathy decline among students in medical schools as the years progressed. Similar results were witnessed among students of Boston School of medicine where empathy scores of students studying in preclinical years were higher than in clinical years.

The students attributed stressful working environments, more focus on physical recovery rather than psychological well-being and stressful attitudes of senior colleagues as main reasons. Today when I have fitted in the shoes of my seniors,

I feel that we are not as good role models as our seniors once were. This is affirmed by evidence from all quarters of doctors. The young clinicians are facing mistreatment by superiors, harassment, belittlement, humiliation, genderspecific discrimination, or sexual harassment during training. Another alarming fact was that empathy tends to depreciate as the years 'progress. Senior physicians tend to become less sensitive and

empathy tends to depreciate as the years 'progress. Senior physicians tend to become less sensitive and receptive to patient sufferings. This empathetic decline tends to make them rude and insulting towards their juniors and bad role models.

training. CORRESPONDING AUTHOR
was that Prof Muhammad Idrees

Anwar
Dean Surgery & Allied,
Rawalpindi Medical
University, Rawalpindi.
Author Email:
anwar684@gmail.com
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Role models tend to play a crucial role in teaching empathy to medical students. All students and Young physician-in-training are positively influenced by their humanistic mentors. [9]

Let us talk about some solutions to this bewilder.

- 1. I think the time has come when we should question ourselves and search our souls. "Are we empathetic and good role models? " Obviously, over the years we have retrogressed and must rejuvenate ourselves by reflection. We need to explicitly "role model" for students what we value as important and send a clear message that expressing empathy is good for the patient, the clinician, and the community.
- 2. Empathy can be improved and successfully taught at medical school especially if it is embedded in the student's actual experiences with patients. Proper empathy education at both cognitive and attitude levels will greatly influence students' ability to master this skill and practice if  $^{[11,12]}$
- 3. Good social support and less stress will help students sustain their empathetic attitudes towards their patients. Senior teachers and doctors should feel their responsibility to keep students and young doctors relaxed and well supported during their training.

I wish that we would be able to bring about a positive change in our attitude and prove to be an exemplary role model like our seniors.

Thank you.

#### REFERENCES

- 1. Carmel S, Glick SM. Compassionate-empathic physicians: personality traits and social-organizational factors that enhance or inhibit this behavior pattern. Soc Sci Med.. 1996;43(8):1253-61. Available from: doi: 10.1016/0277-9536(95)00445-9.
- 2. Imran N, Aftab MA, Haider II, Farhat A. Educating tomorrow's doctors: A cross sectional survey of emotional intelligence and empathy in medical students of Lahore. Pak J Med Sci. 2013;29(3):710-4. Available from: doi: 10.12669/pjms.293.3642.
- Available from: doi: 10.12669/pjms.293.3642.
   Stratta EC, Riding DM, Baker P. Ethical erosion in newly qualified doctors: perceptions of empathy decline. Int J Med Educ. 2016;7:286-92. Available from: doi: 10.5116/ijme.57b8.48e4.
- 4. Newton BW, Barber L, Clardy J, Cleveland E, O'Sullivan P. Is there hardening of the heart during medical school?. Acad Med. 2008;83(3):244-9. Available from: doi: 10.1097/ACM.0b013e3181637837.
- 10.1097/ACM.0b013e3181637837.
  5. Chen DC, Kirshenbaum DS, Yan J, Kirshenbaum E, Aseltine RH. Characterizing changes in student empathy throughout medical school. Med Teach. 2012;34(4):305-11. Available from: doi: 10.3109/0142159X.2012.644600.
- 6. Neumann M, Edelhäuser F, Tauschel D, Fischer MR, Wirtz M, Woopen C, Haramati A, Scheffer C. Empathy decline and its reasons: a systematic review of studies with medical students and residents. Acad Med. 2011;86(8):996-1009. Available from: doi: 10.1097/ACM.0b013e318221e615
- 10.1097/ACM.0b013e318221e615.
  7.Rousseau PC, Blackburn G. The touch of empathy.
  J Palliat Med. 2008;11(10):1299-300. Available from: doi: 10.1089/jpm.2008.0174.
- 8. Crandall SJ, Marion GS. Commentary: Identifying attitudes towards empathy: an essential feature of professionalism. Acad Med. 2009 Sep 1;84(9):1174-6. Available from: doi: 10.1097/ACM.0b013e3181b17b11.
- Bratek A, Bulska W, Bonk M, Seweryn M, Krysta K. Empathy among physicians, medical students and candidates. Psychiatr Danub. 2015;27(Suppl 1):S48-52.
- 10.Batt-Rawden SA, Chisolm MS, Anton B, Flickinger TE. Teaching empathy to medical students: an updated, systematic review. Acad Med. 2013;88(8):1171-7. Available from: doi: 10.1097/ACM.0b013e318299f3e3.
- 11.Mercer SW, Reynolds WJ. Empathy and quality of care. Br J Gen Pract. 2002;52(Suppl):S9-12.
- 12.Shapiro J, Morrison E, Boker J. Teaching empathy to first year medical students: evaluation of an elective literature and medicine course. Educ Health (Abingdon). 2004;17(1):73-84. Available from: doi: 10.1080/13576280310001656196.
- (Abingdon). 2004;17(1):73-84. Available from: doi: 10.1080/13576280310001656196.
  13.Park KH, Kim DH, Kim SK, Yi YH, Jeong JH, Chae J, Hwang J, Roh H. The relationships between empathy, stress and social support among medical students. Int J Med Educ. 2015;6:103-8. Available from: doi: 10.5116/ijme.55e6.0d44.

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