

Blog Aug-Sept 2018

The Goal Posts Have Shifted...#metoo

Well no shit Sherlock. What's more, it's hard to keep track of exactly where the goal posts are. On the one hand we have a self-confessed (who seems proud of it) molester leading the so-called free world, while on the other hand we have the #metoo movement. Running in parallel to these is heightened awareness of disruptive behaviour in general, such as bullying, mental ill-health and gender imbalances.

All these threads came together at the end of June when I attended the NZSA-NZNC joint meeting and then our Executive meeting. It started with an article in M2woman magazine discussing the above issues (1) - which my wife alerted me to when travelling to these meetings. This was followed by a thought-provoking presentation on acceptable standards by Anthony Hill, our Health and Disability Commissioner. He talked through a few cases involving senior doctors; he has breached doctors for not challenging the behaviour or decisions of their colleagues. The subsequent committee discussions centred on bullying, bad behaviour and welfare. I thought the "shifting goal posts" metaphor very relevant and applicable. However, as I reflected my thinking changed and I realised that the posts are the same; it's our perception of where they are that's important. A subtle but important distinction. This blog is in essence my reflections as a middle-aged, privileged white male, of, for lack of a better description, bad behaviour by my demographic. And how this applies to us as anaesthesiologists. It is about power imbalance. I've been tempted to bail on this, as it is a highly emotive and sensitive topic. So, at the risk of getting my head chopped off here we go...

I would like to start with two quotes: One from former Australian Lieutenant General David Morrison because it encapsulates this whole topic: "The Standard you walk past is the standard you accept" and "If you become aware of any individual degrading another, then show moral courage and take a stand against it."

And the second:

"With great power comes great responsibility." (Attributed to Voltaire, Winston Churchill and more recently Peter Parker's Uncle Ben in *Spiderman*.)

Although I will try to approach this in a somewhat light-hearted manner it's a serious topic that is confronting us all and changing our workplace.

Back to the M2woman magazine and Harvey Weinstein. What a schmuck, but it took some brave women to highlight this. All industries have power hierarchies, and this is a classic example of extreme abuse of what should be a great privilege. We don't have good data for the NZ film industry but in the US the film industry is male dominated and a survey of 850 women found that virtually all (94%) reported some form of sexual harassment or abuse. The NZ film and music industries are also male dominated. In fact, most industries are. We have our own Weinsteins of sorts in NZ; in the form of some senior staff at Russell

McVeagh and more recently army instructors. Medicine is also male dominated with inherent hierarchy and although not in the spotlight to the same degree as these examples, we have not escaped without some mud sticking.

The surgeons have been, and still are, spending time and resource to address bad behaviour; primarily bullying but also sexual harassment. Our own (ANZCA) trainee surveys completed in 2011 and in 2017 show we have similar, if not identical issues, in Anaesthesiology. What's more, in NZ we scored higher (i.e. more bullying) than Australian colleagues. So, it's probably naïve to think we are different to the film industry. As an older white male, I have had to reflect on this. Where are the goal posts?

I have had several heart-to-heart conversations about goal posts with other older, privileged men in medicine (anaesthesiology, orthopaedics, psychiatry) and we're all very conscious of this paradigm. With the psychiatrist I reflected on the multiple consultations we have alone behind closed doors with vulnerable women and the consequent risk we place ourselves in. Should we insist on a chaperone for every consultation? Maybe, but it's not practical. The orthopod and I reflected on the banter that occurs daily in multiple theatres around the country. There is much earthy humour, which we had always considered harmless and good natured but, perhaps it's not. Are we potentially blurring boundaries, especially sexual boundaries and thus subconsciously and subtly moving the goal posts? Humour is important and arguably healthy, but what are the unseen consequences? For example, my daughter follows the New Yorker and recently showed me the cartoon below.



"Thanks for almost everything, Dad."

As it happens my kids are often told they look like their father, so I thought this very funny, but it may not be to all. Does this mean we should avoid everything that could potentially compromise us? Avoiding humour and compliments? Do we conduct all interactions in a cold, unemotional manner restricting conversations to objective logistical interactions? I know some take this approach. I am somewhat guilty here too. In the past I have, for example,

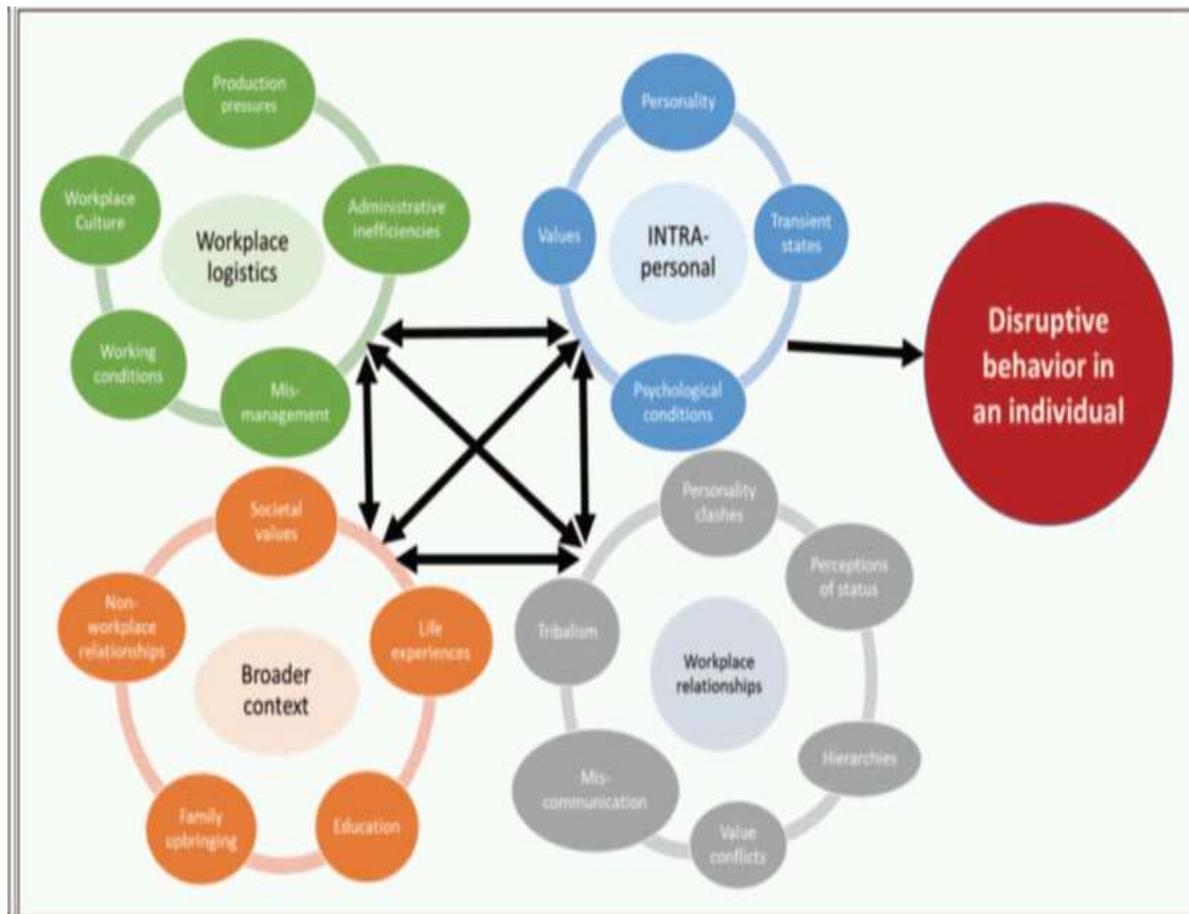
declined to mentor female trainees. Deep down I suspect this is to avoid the power imbalance trap that history repeats ad nauseam. With acquisition of power there is a tendency to lose respect and sensitivity for those with less power. This appears to be a risk for all, irrespective of gender; it just so happens older men more often end up in positions of power. Is the #metoo movement the result of power blurring boundaries, especially those of sexuality?

So to really stick my neck out and borrow a phrase from King Julian's chancellor in the animated movie "Madagascar: "the hebiegiebbes."

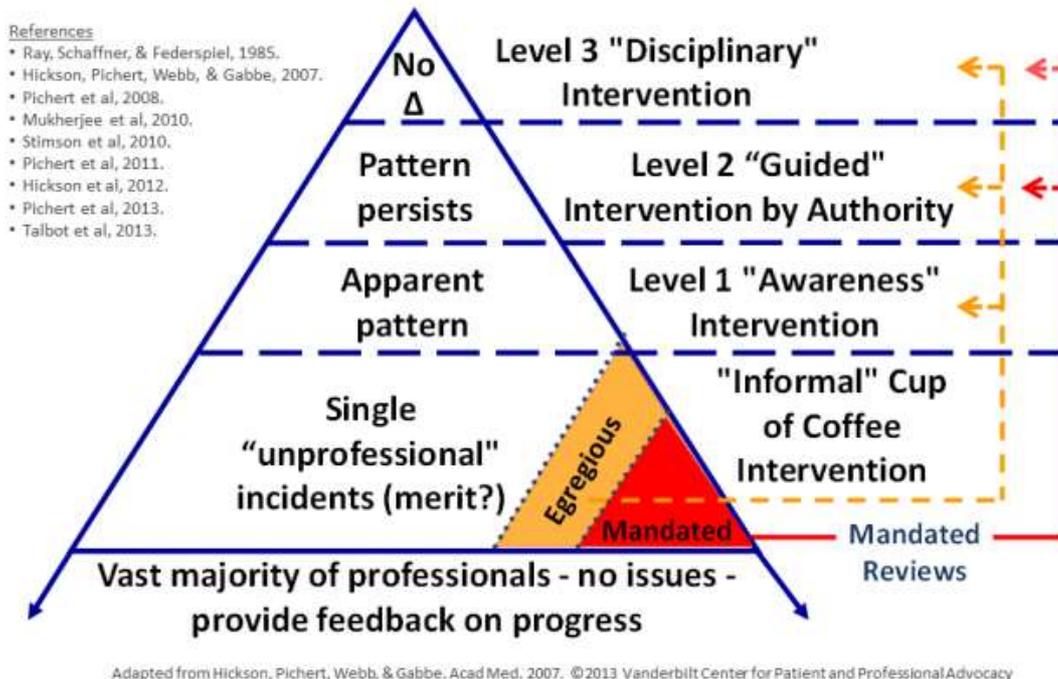
Although on one level I support the #metoo movement, on another "it gives me the hebiegiebbies," and then, "does anyone else have the hebiegiebbies?"

As discussed above there are clearly behaviours that need to change and a need to retrain and foster positive and healthy interactions. I am concerned that if not careful the #metoo pendulum will over shoot leading to defensive disengagement by an important group who have a lot to offer. Like it or not, there is a power imbalance. What we really need is to recognise this and manage it. So, to go back to my personal example of mentorship above, on reflection my current approach is defensive and safe but probably not useful. Providing robust mentorship and role modelling is thought to be one of the solutions to the unwanted behaviours discussed. So as one of the privileged, older men I need to be a positive role model by engaging and showing leadership. However, I also need to be conscious of my internal biases (this has always seemed a bit of an oxymoron to me but nevertheless a useful concept.)

Going back to General Morrison's statement above; I think we now have some very useful tools to help us. Interestingly, much of the June Current Opinions was devoted to this topic. (2). One of the articles had a useful diagram on p.367 which I have included below.



This diagram resonated as it summarises the complex dynamic of real life. We can use this model to understand both our own biases and responses but also those of others. Another useful tool is the Vanderbilt Professional Pyramid which is advocated by the college. Although difficult to manage someone who has power over us, this diagram provides a pathway. The #metoo movement has illustrated how important it is to do this, both for the victim and the perpetrator. The important concept is escalation. This should not be unfamiliar to us as it is along the lines of the PACER (Probe - Ask - Challenge - Escalate - Respond) concept that we are taught to manage difficult communication within theatre.



Although not well illustrated in the pyramid, another useful concept is the “Cool off period.” When addressing poor behaviour in a colleague, timing the conversation can be crucial.

So, quite a heavy blog but full circle and back to General Morrison:
 “The Standard you walk past is the standard you accept” and “If you become aware of any individual degrading another, then show moral courage and take a stand against it.”

Perhaps the goal posts have not shifted, rather, with the introduction of the third umpire (social media) we have realised that penalties were not being fairly called.

I do wonder if subconsciously as a society we have two different goal posts – one for me and one for others. Others being those of a different age, gender, colour or just not me. Very important to have the same posts for all and be wary of the temptation not to.

Ultimately, this is about respect and caring for our fellow travellers along life’s unpredictable journey. Unfortunately, these values are often buried beneath the road grime we pick up, or simply lost from our vision as we cope with the multiple distractions of surviving in our complex world. As anaesthesiologists and leaders we need to know where the posts are and point them out to others.

Thank you for indulging my reflections and as always, may the force be with you.
 David

References:

1. Yasmin Forsythe, "Through the Male Gaze", M2Woman May/June 2018 pp35-37.
2. Current Opinion in Anaesthesiology. **Volume 31(3) pgs. vii-viii,243-392 June 2018**
3. ANZCA Bullying, discrimination and Sexual Harassment Report 2017