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#### **Brief Communication**

### Professionalism and Ego Management: Proposed Strategies for Understanding Professionalism and Dealing with Its Current Accelerating Decline

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Ego Management: Professionalism as self-actualization, egotism as non–self-actualization, and 'ego management' as an effective means of developing true professionalism characteristics and traits

#### A Professionalism Crisis

According to a recent study conducted by the Center for Professional Excellence at York College of Pennsylvania, professionalism is presently on the decline. Not only is professionalism declining but since a lack of professionalism is most noticeable among younger workers, the decline may be accelerating as younger workers continue to comprise more and more of the workforce [1]. Patrick Miller in his analysis of the same study states, "Not only is professionalism highly valued, it can also predict success," and "a lack of professionalism is strongly associated with failure".

But we rarely if ever ask ourselves precisely how professionalism develops, and we seem to assume that professionalism traits and characteristics will develop either during our upbringing or after simply working in a professional environment. Resultantly, there has been very little call for formal education in professionalism and hence not much in that regard is on offer at the postsecondary level. Even so professionalism is of such importance that educators and employers often wittingly or unwittingly assess potential candidates during applicant interviews for evidence of preprofessional attributes such as self-awareness, altruism, moral integrity, and good communicative ability.

A landmark study conducted in 2002 revealed that in the fiscal year of 2000, between 9,250 and 27,750 deaths in Canada were attributable to preventable adverse events during hospitalization, making health care the third leading cause of death in Canada behind cancer and heart disease [2]. A similar landmark study released in 1999 estimated that at least 44,000 and as many as 98,000 deaths in the United States

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were attributable to preventable medical errors making health care the third leading cause of death in the United States behind heart disease and cancer [3]. A separate landmark study indicated that 83% of adverse medical events were attributable to errors in treatment or diagnosis, and two out of three of those adverse events were initiated as a result of communication errors [4]. Given that communicative ability resides in the domain of professionalism traits and characteristics, these data underscore the vital importance of professionalism in health care.

Professionalism does indeed appear to be on an accelerated decline. However, what should be done to address the problem is much less obvious. The dramatic decline is itself likely an indication of larger societal and cultural issues at play. Adding to the problem of declining professionalism is an accelerating increase in narcissistic behaviour [5]. Some psychologists speculate that the cause for the dramatic increase in narcissism is related to the prevalence of a "misguided self-esteem" movement, whereby parents, teachers, and others involved with children were advised to offer frequent praise to children, which may have been overdone. Others speculate that it is due to increased pressure on children to achieve. Closely linked with that argument is a noted decline in "play," whereby children can learn early on how to successfully interact with each other [6]. While the root causes for both the decline in professionalism and the increase in narcissism are debatable, there may indeed be a correlation between

### Defining Professionalism using Maslow's Hierarchy of Needs

The accelerating decline in professionalism indicates that whatever we are presently doing as a society in terms of promoting and facilitating professionalism simply is not working. And exacerbating the challenges associated with any attempt at formally teaching professionalism is the fact that a universal definition of professionalism has simply never existed. However, a scan of the websites of

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various professional associations (certifying, and regulatory bodies, etc.) reveals that there do appear to be dominant attributes which are commonly valued and associated with professional persons across disciplines. These include honesty, integrity, good communicative ability, high moral and ethical standards, competence, responsibility, accountability, self-awareness, and altruism.

In the quest for a universal definition of professionalism, it is interesting to note the striking similarity between commonly valued professional attributes, and attributes of self-actualized individuals as described by Abraham Maslow:

Attributes of Professional Persons	Attributes of Self-Actualized Persons
Honesty	Honesty
Integrity	Integrity
Good communicative ability	Humble/listens to others carefully
High moral and ethical standards	Lack of prejudice
Competence	Dedicated to some work, task, duty, or vocation
Responsibility	Good at problem solving
Accountability	Realism
Self-awareness	Self-awareness
Altruism	Altruism

Given such a high correlation, this writer postulates that for the purposes of describing and teaching professionalism, professionalism and self-actualization are essentially one and the same. Moving forward with that presumption, we may be able to use Maslow's Hierarchy of Needs as a foundation and basis for developing a teaching model that focuses on assisting people toward self-actualization, leading to the development of true preprofessional attributes in individuals not yet on a self-actualizing path. In essence, employing the processes and techniques historically used in achieving self-actualization will also result in deeply inculcated professionalism attributes. Evidence supports the idea that self-actualization is indeed related to professionalism [7].

#### Maslow's Hierarchy of Needs

Maslow's Hierarchy of Needs (Figure 1) is based on his assertion that there is a single instinctive drive that inspires us to live, survive, and thrive—the drive toward self-actualization. Maslow also asserted that "psychological disorder" can be defined essentially as anything that causes someone to deviate from moving toward self-actualization. He asserted that the role of psychologists is therefore to repatriate individuals, through therapeutic means, back onto a path toward self-actualization. According to Maslow's Hierarchy of Needs physical, emotional and spiritual needs must be met in a specific sequential order—in the following model, from the bottom of the pyramid to the top.

Although Maslow's Hierarchy of Needs was first put forward in 1943, it remains pertinent and is widely used today as a basis of social work. For example, social workers know

that unless an individual has food and shelter, there is little value in seeking activity groups for socialization.

## Egotism as Nonprofessionalism or Non-Self-Actualization

Ego theory (theory relating to the self and personal identity) remains very much in a state of flux. Sigmund Freud's definition of ego was popular and widely accepted for years. However, most of Freud's theories including his theory on ego have been widely questioned or rejected on the grounds that there is no scientific basis for Freud's claims. Frederick Crews in his article entitled The Verdict on Freud stated a view that is shared by a growing majority of psychologists: "[T]here is literally nothing to be said, scientifically or therapeutically, to the advantage of the entire Freudian system or any of its component dogmas" [8]. In opposition to Freud's ego theory, a dominant contemporary theory of ego has evolved within the areas of humanistic psychology and transpersonalism which views the ego as a "false self."

The concept of "false self" vs. "true self" was first proposed in the 1960s [9]. A growing number of contemporary psychologists as well as philosophers and thinkers such as Eckhart Tolle assert that when the ego or "false self" is mistakenly served as the "true self"—that is, when we believe this false story about ourselves and live our lives from that perspective, it results in perpetuated dissatisfaction in life. Only when the true self is allowed to emerge, and the ego seen for what it really is do we begin advancing to the level of selfactualization. The state of being a witnessing presence causes the ego to simply recede into irrelevance as ego-based concerns are "nudged aside" by genuine concerns rooted in reality, truth, and authenticity [10]. Upon acknowledging that the attributes of self-actualized individuals are identical to commonly valued attributes of professionals, it becomes clear that what we are actually seeking when we refer to "professionals" are individuals who are on a self-actualizing path, largely freed of any negative subconscious influence of their ego. Conversely, this implies that so long as the ego (false self) is dominant, self-actualization and therefore true professionalism attributes and characteristics cannot develop at a deep level (See figure 2).

Similar to many of today's psychologists, Weinhold also views the ego as a "false self" and asserts that, "The False Self is an artificial persona that people create very early in life to protect themselves from re-experiencing developmental trauma, shock and stress in close relationships. This False or "public" Self appears polite and well mannered, and puts on a "show of being real." Internally, they feel empty, dead, or "phoney," unable to be spontaneous and alive, and to show their true self in any part of their lives" [11]. Chopra states, "The ego, however, is not who you really are. The ego is your self-image; it is your social mask; it is the role you are playing. Your social mask thrives on approval. It wants to control, and it is

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