Overcoming Physician Resistance

By Patricia Williams

Type can be a lifeline for physicians who are constantly dealing with people issues and have so little training or tools for how to do it. Even the most skeptical INTP or ENTJ doctors end up grateful and excited.

These days many doctors feel overwhelmed. They make life and death decisions every day. They are continuously pressured to see more patients and spend less time with each. Little wonder they hesitate to spend time learning about type.

In my work with physicians, however, I have found they do accept type when it is presented in a way they can relate to. While my being an M.D. helps, of course, it is not so much the credential itself as the teaching approach I have developed that appeals to physicians. Here is what I have learned.

- 1. **Be sure they know before the session why type is being used** and how it will be useful. Doctors have not been taught to value behavioral sciences or self-introspection. So I try to gather data about the work situation before the first group session. Then I can point out specific applications of type; everything from how to get more accurate information from patients to how to cover for each other more effectively. If I know what precipitated their asking for help, for example conflicts in a department or the need to take on a leadership position, then I can relate those factors to type. Also, after I introduce a set of preferences, I ask, "Does this explain some of your reactions to each other? To others?" Their responses provide the best reasons for them to take type seriously.
- 2. **Doctors are data oriented** so present type as data. Allude to the vast research behind the MBTI, the many validated translations, the ongoing studies and the doctoral dissertations. Mention that medical students were a major part of the original research. Show them some of the data on how different types consistently choose different specialties.
- 3. **Present type experientially** so the physicians have data they can see with their own eyes. Physicians are first and foremost scientists. You do an experiment, they have the data, they can reach their own conclusions. Before even introducing type, I have participants do an S/N exercise which requires them to describe something. When they see with their own eyes how the type differences exist, they get interested. Doctors love theory as long as they are allowed to wrestle with it rather than have you tell them. They like to be challenged and they are skeptical so welcome and manage that process. If the S/N exercise doesn't get classic results, don't try to

4. **Use examples they can relate to**. Business examples don't help. One very dramatic example is signing out - what information will the covering physician need? Intuitives tend to say, "OK I have 8 patients in the hospital; here are the two to worry about and here is what is wrong. If there is a problem, you can look up additional information." That's the info they give and that is what they want. But sensors will write everything on the sign out sheet - detailed information on each patient with latest lab results and even room numbers. They expect the same from another physician. Neither approach is wrong, but if you are signing out to someone with the opposite preference, there can be lots of frustration. Most