



Episode 45 The Identity Roadblock with guest Dr. Maiysha Clairborne

SEE THE SHOW NOTES AT: www.doctorscrossing.com/45

[0:0:00]

HF: “What's a missing part of your identity that you'd like to cultivate or expand into?”

MC: World traveling food blogger. You know the person? The travel blogger, really. They do food, but it's the travel blogger on Instagram. They go and they take these reels from these amazing places, right? You see their feet and then you see the ocean.”

HF: Welcome to The Doctor's Crossing Carpe Diem podcast. If you're questioning your career in medicine, you've come to the right place. I'm Heather Fork, a former dermatologist and founder of The Doctor's Crossing. As a master certified coach, I've helped hundreds of physicians find greater happiness in their career, whether in medicine, a nonclinical job, or something else. I started this podcast to help you discover the career path that's best for you and give you some resources and encouragement to make it happen. You don't need to get stuck at the white coat crossroads. So pull up a chair, my friend, and let's carpe that diem.

Hello, hello and welcome back to the Doctor's Crossing Carpe Diem podcast. Today, we're talking all about our identity as a physician and how it can be helpful when you're questioning your career path and how it can also sometimes get in the way and be limiting.

www.doctorscrossing.com/45



In a recent popular episode number 33 on roadblocks, one of our four roadblocks we discussed was related to our identity as a doctor. Because this is such an important topic and has significant ramifications for your career journey, I wanted to devote an entire episode to exploring this area.

I am delighted to be joined by Dr. Maiysha Clairborne who is an integrative Family Physician, Master Practitioner of NLP and founder of the Mind Re-Mapping Academy. In addition to being a physician, she is a coach, speaker, mother of a 7-year-old boy, and host of the excellent Black Mind Garden podcast.

She also runs a coach certification program. I'm a big fan of Maiysha and enjoy watching how she continues to redefine her own identity and how this translates into the many wonderful ways she helps others.

I thought she would be a terrific person to help us dive into 4 questions around our identity as physicians. These are 4 questions you can ask yourself to gain greater clarity on your own relationship to this white coat identity. You'll want to stay to the end because I think these will be helpful for you, and the last question is really a fun one.

Alright. Let's give a warm welcome to our wonderful guest, Dr. Maiysha Clairborne who is joining us from Atlanta. Maiysha, hello there. Welcome!

MC: Hi, Heather. Thank you so much for having me. It is such a pleasure to be with you. We've been in each other's circles for quite some time and actually have been in communication. So, it's just lovely to be able to share this kind of space with you. Thank you for having me.

HF: Oh, my God. It's such a delight and it's so great to see your face there because you have such a beautiful smile and you're just so encouraging. It's a great energy you bring to the podcast.



MC: Thank you. Thank you. And by the way, I am a fan and have been a fan of yours for years. So, this is really a treat.

HF: Alright. Well, back at you, girl. **I'd love to start with the first question and put it to you, which is what does the identity of being a physician mean to you?**

MC: Well for me, Heather, being a physician, the identity of being a physician has always, for me, been being a healer. And as a family physician we are root cause kind of people, but really dealing with what is at the root cause of one's illness so that we can heal it and have people have a better well being and a better life. That's what that identity has always meant for me.

HF: I love that word healer because it's so true about so many physicians and why they went into this work. And it also speaks to why so many are feeling disappointed and disillusioned. They're not getting to be a healer. They're a typist and a clicker and a data entry clerk. And all these other things that they never signed up for.

MC: Yeah. It's interesting how much medicine has changed. I think we've been in the game for a while. And I remember when there was a lot more autonomy in the practice of medicine where it did feel like we were helping people because that's why we got into this field for the most of us is to help people.

Even if we're, what I call "legacy physicians", meaning your parents were physicians or if culturally speaking you're expected...I think for many of us, the type of personality that ends up inside of the medical field is one that likes to help people. And the way that healthcare has moved along, it has been constrained and confined so that a lot of doctors are not feeling that way. And that's why burnout is such an all-time high. Forget the pandemic and the violence that's been going on, it's just things have shifted and changed.



HF: They really have. And I hear that from so many physicians, even the early(new) ones. The ones who are recently starting out are disillusioned. It's not taking a lot of time. I'm curious Maiysha, because you do many different things besides care for patients, how attached do you feel to that piece of caring for patients as part of your identity?

MC: Well, this is a great question because I think in the beginning, I did feel a great attachment to that. It's what we're trained to do. We're trained to take care of patients. And then when you come to a point in your career where it feels like more of a burden than a satisfaction, then you hit this crossroads. Like, I've done all of my training to take care of patients. And so, now I have no attachment to that because I've been out of clinical medicine for a while, but I can tell you, as I transitioned, it was something that I had to work with. I had to expand this view of who I was of this identity that got created. Because of the doctor identity, there's the identity of what it means to me of being a healer, but then there's an identity that gets placed upon us as physicians as well. And we have to be able to distinguish the two for us to be able to move past the attachment to the way things are typically done in our career.

HF: I love that you're helping to differentiate the “who we are” from “what we do”, because when it is a one-to-one connection, who I am as a doctor and what I do is treat patients can be very restricting, but you've really expanded that “who” and so your “what” expands. I'm curious when you were shifting gears, how much did it affect you, thinking about what other people's perceptions would be of you?

MC: I will preface this by saying I've never been one to care about what other people think of me. I was minimally affected. I can't say I was not affected at all. There was some consideration around that. And especially stepping out of medicine and talking about being a coach, it did impact the level to which I spoke out about it. It impacted my voice, if you will. I kind of would talk to people on the side. I wouldn't be out on social media as

much. And then one day I had to deal with myself on that. And to deal with, listen, if you want to make the biggest difference, you have to step out of that.

HF: And you had to own it. You had to own this decision.

MC: Absolutely.

HF: Oh, I'm glad you did. You do have a beautiful voice and we need you out there. I see you out there all the time.

MC: Thank you.

HF: Before we go to the second question, I'm just going to say really, really briefly that for me, and I'll preface this with saying that I'm a three on the Enneagram. And the three is the achiever and they are a bit image oriented. However, for me, I didn't have a big problem giving up this image of being a doctor who saw patients, but it was very important to me that whatever I do, I am able to make an impact in a way that's meaningful for me, and also be successful. Because if I'm not achieving something that I feel is valuable, then I feel like I'm not doing what I'm meant to do. So, I didn't have a big problem with giving up the white coat, but I do love that I've been a doctor. I love that identity. I think it's a wonderful identity.

MC: Yeah. Can I quickly just say one thing about that? Because you spoke to something and maybe I'm getting ahead. But what you spoke to is that we will always be doctors. We've earned that. And I think that might take us into the next question, but I just had to say that because I think it's important for doctors to hear.

HF: I'm glad you did. Once a doctor, always a doctor. No one can take that away from you. You earned it. You climbed Everest. You got to the top. Wonderful. **So, let's go to**

question number two, which is what is helpful to you about this identity of being a doctor?

MC: I think what I have found helpful about it is that it gives instant credibility. As I've transitioned, I've been able to lean back on, "Well, I mean, I'm a doctor". And I know that some people in our community don't recognize that aspect of it. Because I think that once again, the system sort of has stripped us away of the pride of what it takes to be a doctor. The amount of work that we've had to do, the amount of knowledge that we've acquired. So much knowledge. We don't even recognize all the knowledge. And then it gets pushed into a corner for RVUs and metrics. And so being a doctor gives me this instant credibility, which I've been able to take into different arenas of my career.

HF: Oh, it's huge. You tell anybody you're a doctor, you used to practice, they already have this image in their mind of someone who has a lot of integrity and can heal, can save lives, works really hard, reliable, dependable, problem solving. I mean, so many things just come along with that one word.

MC: That's right.

HF: I think that's a really big key part of owning that identity when you're thinking about potentially doing something else, because so many doctors get stuck in this trap of "I'm only a clinician, I don't have transferable skills". And the skill list is infinite.

MC: Not only are we clinicians and diagnosticians, but we learn to deal with people. We are people, people. We are technologists, we are consultants. We are problem solvers. There are so many things, especially in this day and age with all the technology that we have to deal with and the myth of, as some doctors say, "Well, I'm not a great business person". But you have the potential to be. You can run a practice inside of an organization. Then there's just a little bit of learning to run a practice outside of the organization.



HF: No, that's a perfect distinction because so many of the qualities that make someone a good physician and an employee also translate to being a great entrepreneur because you have to check all these boxes and be very detail oriented and show up well to run a business.

MC: Yes. And the other thing is because we have been through so much in our training, we have the ability to withstand a lot of unknown, a lot of pressure. We work well under pressure. There are some I would say unspoken qualities that we acquire inside of the training that make us also prime for entrepreneurship as well.

HF: Yes, yes, yes. I love that you're bringing all these fantastic qualities. So, I hope if you're listening out here and you've had some doubts about what you would bring to another job or career, that's starting to melt away.

And the last one I want to leave us with, which is really just part and parcel of a physician is you are a lifelong learner. You know how to learn hard things. Things you have to memorize, skills, hand, eye coordination, under pressure, all of these ways that you can learn. And if that's not a transferable skill, I don't know what it is.

MC: I love that.

HF: **Okay, let's go to number three, which is how does this identity of being a physician get in the way and potentially keep you trapped when you're thinking about expanding what you do and who you are?**

MC: This is such a great question. I think this is a big one, Heather, because part of the reason why there is a "trappedness" or a contraction when we get too attached to the identity is this fear of losing something. Whether it's losing a skill or losing credibility or losing

the title, losing this thing that you've worked so hard for. And I think that thinking of it in this way is what gets in the way and keeps people trapped.

I think the way that we were trained in medicine, that there are only three ways to be. Right? Clinical, academia, research. Any other way, that's not the way to be a doctor. And it gets drilled in our head over time and keeps us stuck inside the other people's view of identity.

And I think that's what I was alluding to earlier is that when we are not distinguishing who we are in our own identity inside of the identity of "doctor", then it could be easy to collapse the two. And that's a way to get trapped is when you're collapsing "doctor" with who you are. "Doctor" is a profession, it's what you do. It's a great identity to put on a coat, but you can easily take off the traditional coat and try on a new expanded coat of "doctor". Try on different color coats. It reminds me of Joseph and the Amazing Technicolor Dreamcoat.

HF: Yes, Joseph and the Amazing Technicolor Dreamcoat.

MC: Yes, exactly.

HF: Yes. I really like that way of thinking about this. Is that coat contracting you, is this sort of tightening around you and hardening almost like a shell that you can't get out of? Or like you said, is it multicolored? Is it expansive? Is it helping you think creatively about this beautiful soul and spirit that you have and where it wants to take you?

MC: Yeah. Imagine that you have a coat from when you were a teenager. Now I know some of you out there can still fit your clothes from teen years, but I, my friends, cannot. And so, the coat was like your favorite coat and you have the coat on it. It fits perfectly, and then you grow up. You grow up and the coat is just too tight. It's just constraining. What do you do with the coat? Well, some of you keep the coat folded up and put it and frame it.

But you could buy a new coat. You could shop for a new coat that fits you. You can try on, like we said, different styles. Maybe there's a new style that you've adopted. I, for one, in my dress, I have evolved styles. And you can evolve inside of your identity. You can expand and evolve inside of your identity.

HF: I love all the beautiful metaphors. I can see this multicolored coat. I once made a bathrobe that was like a rainbow and had all these different colors. So, I keep picturing that in my mind. It's hard to feel confined in a rainbow.

Now I don't want to underestimate this question too, because I've seen the severity of how it affects physicians. For example, I do a cartoon drawing with a lot of my clients where on one half of the paper, they draw a cartoon figure of how they're feeling right now in their situation.

And then on the other side, they draw a picture of how they want to be feeling. And in some of these cartoons, physicians draw themselves in a box with tears coming down. I've even seen drawings where they're behind bars or even in chains. And this is that feeling of "I am stuck in this identity". And they're not prisoners, but the white coat has become prison garb. And it's heartbreaking. And then on the other side, they are free. There's always often sun and light and they're bigger. Their hair is flowing. They're often outside in nature. It's like their spirit has been freed.

MC: I think what is so poignant is the visual of the bars or the chains or there's the saying of "the golden handcuffs". There's this space where being inside this identity, and I keep referring to the systemic identity, because I believe that we adopt the systemic identity, which makes us feel that we're trapped and in chains.

And the other piece of it is when we come out of med school, thinking it's going to be one way. And we begin to start a lifestyle that represents this way that it's supposed to be. That's the other thing that could have one field trapped. It's like I've spent all of this



time. I spent all of this money. I'm accustomed to a particular lifestyle. And I don't feel like I can do anything else that will allow me to continue to live the lifestyle that I'm living. And so, I believe that the gap between the two sides of the picture is the belief of what's possible to get there.

HF: Yes, yes. Absolutely. It's changing that mindset and you're a mindset coach. You really understand that. I think physicians have a lot of guilt. And I would like to say that you are not guilty of anything. If this isn't working out for you, you're not guilty as charged. You shouldn't be behind bars or in handcuffs. You're just a human being who went into this with really good intentions. And it may not have turned out the way you wanted to. An important thing is to not get stuck in the image of who you think you should be, but look at the reality of your situation. Because when you look at the reality of it, you can actually deal with it. You can work with it.

MC: Yeah. I want to speak to the mindset piece because I honestly believe sometimes it's deeper than just changing the mindset. As a person who works a lot with the unconscious mind, there are a lot of traumas that we experience. And you know this. Some of that trauma gets really trapped and stuck in our bodies and stuck at the unconscious mind.

And I love this visual because it's so poignant, there's the side of the bars and then there's the side of freedom. That belief is hindered by the negative emotions, the negative experiences, the trauma, the decisions that we've made about ourselves that have been imposed upon us, that we've inherited about ourselves from the system, from our training, even from our childhood before we even got into medicine. And they prevent us from achieving this bridge of a shift in mindset or a new belief system.

And so, I just can't step over the trauma, sometimes that can hinder us from actually getting from one side to the other. And when we start to really look deeper into that and unhinge that, then we can actually see the possibilities. And where we can see the

possibilities, it loosens the grip on the old belief and allows for new beliefs to start to come in.

HF: It does. You brought up a really excellent and important point because just starting to be aware that the past can be influencing the present, and it can even go back to childhood. I see in a lot of physicians they were in pretty dysfunctional families and they may have taken on this role of “I need to make sure to be financially secure because right now my family doesn't know who's paying the rent”.

They grew up in this environment that led them to become physicians because that was a secure path. And in some ways, they're still living that financial insecurity, or they become a helper because they had a parent that had a lot of issues. And so, when you can look at those things, like you said, you start to loosen the grip of what that trauma may be doing and how it might be informing what you think you can or can't do. So, great point there.

And let's go to the last question. I like this one. What is a missing part of your identity that you'd like to cultivate or expand into? And for example, it could just be that you have an inner artist or musician, an inventor or a spiritual person. Maybe even it's the identity of being a parent or a lover. Whatever it is, something that you've neglected that you really want to now step into more.

MC: I think it's that world traveling food blogger. The person who travels all over the world. The travel blogger, really. They do food, but it's the travel blogger on Instagram. They go and they take these reels from these amazing places. You see their feet and then you see the ocean. I'm just like a world traveler and I get to take my son with me. We get to sit there so you see my feet and his feet in the ocean.

HF: Yeah. Yeah. Maiysha, the world traveler. Maybe creating a global school with your son where you go and learn all about other cultures.

MC: Yes, yes. And teaching the children this mind mapping technology. What a blessing for them to be able to learn at such a young age.

HF: I know, it would save us so much pain and agony if we could have this emotional agility when we're young and take it with us.

MC: I know. What about you? What's your alter ego, Heather?

HF: Oh, my gosh. Well, thank you for asking. Mine, I thought about this a bit and what keeps coming back to me is the unflappable explorer in the adventure of life. And I have to explain that a little bit, because when I think about these people such as Lewis and Clark and Ernest Shackleton, who was that Arctic Explorer who did that incredible rescue when his ship got stuck in the ice. I mean, these are people who no matter what happens to them, they're unflappable. They figure it out. They don't lose their presence of mind. They're calm and they can lead people in the sense that they inspire and motivate and handle the most challenging circumstances.

Now I'm not planning on going on some Arctic adventure or anything like that. It's really not so much about a physical adventure. It's more this adventure of life. And another visual that comes to mind when I think of this personality is that surgeon who may be operating on one eye, that a patient has left. The eye is a mess and they can just keep calm and they don't shout at anybody. They're not wrapping knuckles and they don't raise their voice. But this is a "who". This is "who" you are being. And so, that's my aspiration.

MC: I love that. I love that.

HF: This is great. Well, I've really enjoyed doing this episode with you. We could go on and dive in even further, but I think you brought up so many wonderful nuggets and pearls



that are going to help physicians so they don't feel trapped. And I would like to say, don't let your white coat become a straight jacket. Make it into a cape and fly with it. It has superpowers in it.

MC: Oh, my gosh. That's a wonderful visual. I love that. I mean, now can you imagine flying with the technicolor cape.

HF: Yes. Yes. You can take that on all your explorations. Maybe even you wear that and you take pictures of yourself in this cape and all these different scenes. And like, oh, there she is the multi-colored technicolor cape doctor.

MC: The technicolor Carmen San Diego. Oh, that's the alter ego.

HF: All right, all right! Yes. Yes. Okay. Well hashtag that. I'd love it if you would like to tell us how people could get in touch with you. And anything specific you want to tell the listeners about what you do.

MC: Absolutely. Absolutely. I'll share a little bit about what I do so that people can have a context for it. I do one-on-one work and I also do training. The one-on-one work is personal transformation work, and it really is in the realm of moving past those emotional and mental blocks that would have you not be able to, or feel like you can make that transition.

So anytime you're feeling like "I'm ready to make a transition, but..." and all the things after the "but" are the things that we work on and disappear in our transformational processes. "I'm afraid, I have imposter syndrome. I don't know if I can do it. I feel stuck". All of those things are things that disappear in our personal transformation processes.

And then for those of you who are like, "No, you know what? I'm a little bit past that point and I'm ready to take the next step and train and do something different". That is



what our Mind Re-Mapping NLP hypnosis and coach certification training do. Help people to give them the tools, not only to transform themselves, but to also transform others in the process in whatever way you choose to do it as consultant or coach or whatever.

So those are the two things that I do. If you want to learn more about those, the best way to do that is to go to drmaiysa.com. You'll get a fuller sense of all the things that I do from that standpoint. That's drmaiysa.com. And that'll lead you to the Mind Re-Mapping Academy if you want to learn more about that, or if you want to learn more about just the personal coaching that I do. It'll take you to that as well and you can just schedule a free call with me if you're interested.

HF: Excellent. And we will make sure to link to how to get in touch with you in the show notes so people can find you, your beautiful self. And you obviously have a lot you can offer for anyone who's challenged by this white coat identity issue.

MC: That's right.

HF: All right. Well, this has been just a joy. Thank you again, Maiysa, and I hope to see you again soon.

MC: I hope so, too. Thank you, Heather, for having me here and thank the listeners for being willing to listen and take these concepts and learnings into your own self and apply them. This is a wonderful and very impactful podcast. Thank you so much, Heather.

HF: Thank you. Okay, guys. So, take that cape, fly with it and don't forget to carpe that diem. I will see you in the next episode. Bye for now.

You've been listening to the Doctor's Crossing Carpe Diem podcast. If you've enjoyed what you've heard, I'd love it if you'd take a moment to rate and review this podcast and



hit the subscribe button below so you don't miss an episode. If you'd like some additional resources, head on over to my website at doctorscrossing.com and check out the free resources tab. You can also go to doctorscrossing.com/free-resources. And if you want to find more podcast episodes, you can also find them on the website under the podcast tab. And I hope to see you back in the next episode. Bye for now.

[00:31:47]

Podcast details

END OF TRANSCRIPT