



## **EPISODE 94: Become Empowered to Avoid The Victim Trap in Medicine**

**With guest Dr. Una**

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DU: “And it's like I'm stuck. There's nothing I can do about this. I suck as an entrepreneur. I look at those other people and they have really great practices. And in a way I felt like a victim.”

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. You're listening to episode number 94. Today I have a very special guest who's going to talk to us about how to shift from a victim mindset to one of being empowered and able to make positive changes in your career regardless of the reality of the healthcare system.

Our wonderful guest is Dr. Nneka Una. She is a pediatrician, author, podcaster, speaker, entrepreneur, and founder of EntreMD business school, where she helps physicians

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build profitable businesses so they can live life and practice medicine on their own terms.

I'm very excited to have Dr. Una talk to us about how we can be more empowered in our career and life, because with the way medicine has changed so drastically, it's easy to feel like a victim and trapped in this challenging system.

One of Dr. Una's saying that I love is "The cavalry is not coming. We are the cavalry." Meaning we have to help ourselves. Although the healthcare system is not changing anytime soon in major ways and the future is uncertain about whether it will get better for us., in this episode we're going to be looking at what you can do right now to start making empowered changes that work for you and help you live life on your terms. Without further ado, I am truly honored to welcome Dr. Una to the podcast. Hello, hello, Dr. Una.

DU: Hi, thank you so much for having me on this show. This is an absolute treat. I've been looking forward to it.

HF: Well, as you know, I'm a big fan of yours. I listen to your podcast. I recommend your book EntreMD, which is fabulous to a lot of my clients. And I think you have a lot to share.

DU: Well, thank you. That means a lot coming from you. Thank you.

HF: You're very welcome. So, one thing I just wanted to start off with is to just really clarify that when we say "shift from a victim to being empowered", it's not to say that there aren't significant problems with this system, which I'm not hesitant to even call it abusive in different ways. I want to acknowledge that there are valid reasons for many of you to be really unhappy, distressed, burnt out, just wanting to get out of dodge and

that's okay, but we want to help you do it from an empowered place or stay from an empowered place. So, Dr. Una, where would you like to start us off?

DU: Well, I would like to piggyback off of what you just talked about, because I think it's really important. Sometimes people think when we have conversations like this, the only option is to walk away, which is an option. But even with that, we want that to be a strategic decision. That's what I decided to do, not like I was frustrated and I did that.

And so, there really are two big problems. One is the system and that's a big problem. It's like turning around a cruise ship and it's going to take some time. There are a lot of changes happening in different pockets. And in years to come, we will see the big impacts. But like you said, probably not going to happen right away.

But on the other hand, we have been conditioned a certain way and that's made us show up a certain way and we can change that and we can change that quicker. And so, we can start experiencing a difference in medicine right now while we work and wait on the big changes that are happening in the system. And it's great because we have more control over ourselves. And so, we can start changing that right away.

HF: Beautifully said. And you made me think of a quote by Wayne Dyer. I think it was him who said "Change the way you look at things and the things you look at change."

DU: Oh, I like that.

HF: Now would you like to share a little bit about your story and maybe even let us know if there was any point where you felt like you had a victim mindset?

DU: Yeah. So, I think I'll start off from when I finished my pediatric residency training, I had the arrival fallacy as it's called, like "I'm here. I finished."

HF: Arrival fallacy. I've never heard of that.

DU: "I'm here, I'm here. I made it. I'm attending now." And all this stuff. And I still remember like yesterday walking to see my first patient walk into the room, examine them, after taking their history, wrote their prescriptions, all of that came out like a boss, like a total boss I did this and I remember it being so anticlimactic. Like, I walked out of there not as excited as I thought I would be, but almost sad. Like, "So, is this it? Am I done? Is there nothing more? Am I going to do what I just did till I'm 70 and then retire?" And for physicians we've been chasing something the whole time and you get to this place, it's like, "You've arrived. - Oh my God, I'm 30?"

And so, that started my quest for "there's more, I want more. I don't know what more is, but I want it." And my boss talked to me about starting my own practice and all of that. And eventually I did, but it was a case of ignorance is bliss. I didn't know what was truly involved in starting a practice. I didn't realize I would have to evolve and change and all of that. I thought I will hang the shingle and they will come. And so, I hung the shingle and they did not come.

And I started off as a socially awkward, super shy, introverted introvert. So, the thought of me putting myself out there, marketing, all of that, it was like, I don't do stuff like that. I'm a professional. And I didn't get any business training. So, I cannot describe how stuck I felt because here I am, I've signed the three-year lease. I have an insurance contract. I have all these things, utilities, everything. And I couldn't back away from my decision. And it's like, "I'm stuck. There's nothing I can do about this. I suck as an entrepreneur. I look at those other people and they have really great practices." And in a way I felt like a victim. Not like somebody was necessarily putting me down, but I wasn't equipped for this whole world that was in front of me.

And after feeling that way, I was saved by a book. And it was a book by Brian Tracy. And there was one line in it, is that "All business skills are learnable." That was a pivotal

moment for me. And I was like, “Wait a minute. So that means the people who are doing really well are not doing really well because they're better than me. They're doing really well because they know something I don't know. And I'm a physician. So, if there's anything I can do, I can learn.”

And that was such an empowering statement because it took my destiny, my fate, my outcomes, and put it right back in my hands. And I was like, “If I learn, I can turn this around.” And so, that was my first big pivotal shift. And after that, after being in private practice for a few years, I had that itch again. There has to be more and medicine is changing. CVS is now my competition. Walmart is my competition. Our jobs are being replaced and all of this stuff. And again, that victim thing started up. We're stuck. Somebody should do something about this. Somebody should come and save us. And I had this really big “aha” moment in 2016. It's changing, you need to change. The system has changed. You need to change. You need to retool yourself. You need to position yourself so you can compete in this space and all of that. And that's when I started embracing speaking and I didn't know what coaching was. Consulting, that's what I called it then. And would I become a writer? Can I be the CEO of my private practice, not just the lead pediatrician? Which are two different things. I started embracing that and I love to go along with people.

And so, that's how EntreMD really was born. Because I was like, “Let's go do this together. Let's get empowered together. Let's rise above what is going on in the physician space. We can do it.” And that was six years ago. We've been doing it ever since.

HF: I wish people could see you because you have this electric energy and this gorgeous smile and you bring so much sort of radiant energy to this. And I know people can hear it and you describe what you do as a movement. And I love that because it's saying we're not alone and we have energy. And I know since I started coaching over 12 years ago, I've seen the shift from there where before attorneys who were leading the biggest

efforts in nonclinical career teaching for physicians, it was attorneys. It wasn't physicians, but I think we've really taken the ball in our hands and now we're being much more self-generative in helping each other through this difficult time.

DU: Yeah. And when I think about your story 12 years ago, you're a total trailblazer, right? Because at that point, how many people were doing that? And you set this stage and this is just going to be something that snowballs and snowballs into physicians taking back control, physicians going back to being the leaders in healthcare, inside and outside the exam room. Doctors falling in love with medicine. Doctors having financial security. We're going there. It'll take a few years, but we are going there.

HF: Absolutely. And I know you have a lot of experience with physicians making changes. And when we're talking about this, as you articulated, it's not just leaving. There are lots of people that I work with who find ways to be happier. Lot of them stay, some do a hybrid, some nonclinical, some clinical. Other people become entrepreneurs like in your camp.

So, when we are talking about this, all options are on the table. I think you have a number of different tips and things that you want to share. What would be one you'd like to start with to make that change?

DU: Well, I would start with this because this applies to everybody, every physician. When I talk about every physician being an entrepreneur, it doesn't really mean starting a brick-and-mortar thing or becoming a coach because it doesn't mean that. It means that you went to school, went for training for over a decade and you acquired multiple six figure debt to get said education. You are a brand. You are a brand and you are a company essentially and you are the CEO of the company.

Once you can start from that standpoint, everything changes. Because you show up as the CEO of Dr. You Incorporated. That's the first place to start. When you think about it

that way, then you then realize “This is my company. I’m responsible for the reputation of my company. I’m responsible for how much money my company can bring in. The impact it can have. That also means I have to acquire skills like negotiation, speaking up, communication, collaboration.” All of those things. But it really starts from, “I’m not a victim.” Because you can’t say “I’m the CEO of Dr. Me Incorporated. I feel like a victim.”

HF: Exactly. Right.

DU: This totally puts you in boss mode. So, whether you are staying in your job, we call you entrepreneurs. You are an entrepreneur, but you do that in the context of employment or you decided “I want to be a coach. I want to start a product line. I want to have a service line.” The first thing is realizing “I am a CEO of a company called Dr. Me Incorporated.” That is the very first thing.

HF: I love that. And I love what you said about how you can be an intrapreneur while you’re employed, because it’s still your business. You’re making money. You have to be profitable.

DU: Exactly. And that’s also what elevates you. So, at work, you aren’t a victim. And if there are things not quite going your way, you learn how to navigate them. It’s like, if I’m an entrepreneur and I want to sell my business, I’m not going to say, “Oh, I hope somebody buys it and they give me the price I want.” I’m going to learn to negotiate. I’m going to go pick up “Never Split the Difference” and read it. And it’s the same thing. You can negotiate how much you earn. You can negotiate for a scribe. You can negotiate to speak on certain stages. You can do all of that if you show up as the CEO of your brand.

HF: That’s such a powerful shift. It really starts putting the steering wheel in our control. Because we really give it away when we go and let somebody hire us.



DU: We've been conditioned to give it all away. Like the time. And that is the reason why somebody can say, "Oh, we want you to work on this committee. It's going to cost you 10 extra hours a week. And we just want you to help people. So don't talk about being paid more for it. This is just to help." And we say yes. Like why do we say yes to that?

HF: Exactly.

DU: Why do we?

HF: We've been brainwashed.

DU: Exactly.

HF: This is what we do.

DU: Exactly.

HF: And that we're selfish if we don't.

DU: Exactly. And so, we have been conditioned to feel guilty if we serve and earn. Earning without serving, that's manipulation, that's sleazy. That's all of that. But serving and earning is like you serve and then you get a thank you note called money. There's nothing to feel guilty about. And if we think about it, we look in the medical ecosystem. We don't go to medical school for free. The patients are not seen in hospitals for free. The administrators don't work for free. Nobody in healthcare works for free, but the people who have been conditioned to feel guilty for making any kind of money for serving are physicians.

HF: Now you mentioned that one of the things we can do is we can learn the skills that we often think are more for business owners. Can you talk a little bit about some of these skills?

DU: Yeah. There are a number of them. Let me start from what will be so relevant for someone who's employed. It's for everybody but very relevant is negotiation. We're going to start having conversations. If you are a victim, the way a victim will respond to something they don't like is to whine, complain and blame. And if we do that, that's not a problem. So, I'm not calling anybody out or anything.

But if you are a CEO, if something is not going your way, you negotiate. You have a conversation that ends up being a win-win situation. And so, I say that to say we start learning how to have conversations like entrepreneurs. If you're going to talk to somebody in the C-suite, if you're going to talk to an administrator, are you able to link what you do to the bottom line? Because if you link what you do to the bottom line, then you start having these conversations, that win-win situations. Give me a scribe, I'll see four extra patients a day. So much better for your bottom line if you do the math. This is all that the scribe will cost you. This is how much more I'll be bringing in. That's very different from "Nobody cares about me and I'm burned out. I want to scribe."

So, negotiation is one. Speaking is another one. We do a lot of speaking grand rounds, all of those kinds of things. But speaking to get your message across, because speaking is one of the fastest ways to grow any business, it's one of the fastest ways to become a thought leader. And if you can learn to dominate on stage, it works wonders for your business, whether you're building a personal brand or you're a coach or you're in private practice or any of those.

That's another skill to learn. Putting yourself out there, marketing, asking people to work with you, selling. These are all things that we've kind of thought of like cuss words in the medical field, if you will. But those are the things that make the biggest difference in

medicine. Getting comfortable talking about money, realizing that money is mercury paper with dead men's faces on it. It's not a bad thing. It just is. It takes the shape of whoever has it, but that's all. So, these are things that we don't necessarily do that if we start learning them, they make a huge, huge difference whether we are intrapreneurs or we're entrepreneurs.

HF: So, you have some really great examples of what to say and what to ask for and the approach. Could you give us another example, say if a physician wants to change their schedule and potentially work less hours?

DU: Yeah. I have a doctor that I work with and she didn't start off wanting to change her hours, but let me tell you where she started from and what set the stage for that. She started off by doing a lot of media coverage and so she would go on CNN. She would go on Fox, HLN, the local news stations to represent the hospital. So, this she was doing on her own time. She got media training, did all of that.

There was nobody else in the hospital representing the hospital in media. She was primary care so she'll also go into the community, do events, like speak at events, rotary club, things like that. And she was able to demonstrate that as much as 80% of the new patients who were coming in, were coming in because they saw her on the news, they heard her on the radio, they met her at an event. It was her network. And that's that thing of understanding how what you do links to the bottom line.

And so, after she had done this for a few months, she then went up to them and said, "Listen, it is not in your best interest that I am here five days a week. If I had a day off, I could be doing all these things that are boosting the practice, bringing new patients in, nobody else is doing it. So, I would like to work four days a week." And they gave her Fridays off and she had a long weekend, every single weekend. And they kept her pay the same. So, that's the equivalent of better work hours, a raise if you will because she's earning the same for less amount of time. And she kept it that way.

HF: I love how that worked out. Now what if this is a physician who hasn't done what she did and didn't have this platform. Where would they begin if they're just burnt out, they want to be home more, but they're afraid to have that conversation and they haven't read "Never Split the Difference?" How to get more?

DU: Yeah. The thing is, it's surprising because I've had other doctors who didn't do that. They didn't necessarily go that route, but they did ask. That is literally all they did. That is all they did. They went up to administration because now they've seen right in our community that this is a thing, people are working four-day work weeks and all of that. And they're like "Listen, I am getting stretched a little too thin and all of that. And I love my job. I want to be here. I want to serve. This has been a great place for my career, but I really would like to work four days. That's what I can afford. I don't want to go part-time and I don't want to quit. Which are the other options. I don't want to do that. I want to work. But if I can get a day off, this will make all the difference." And I could think of three or four off the top of my head, who they said yes.

HF: And you're so right. Because we often tell ourselves a story. Like often when I'm speaking with my clients, they'll say, "Well, so and so just went down in time or so and so just gave their notice. It's not a good time to ask them." I'm like, "Well, is there harm in asking if you do so politely?" And then I'd say probably in 50% of the cases, something works out and it may be "No, not now, but yes, we can do it in a couple months." So, I think it's important to ask. And I like what you also said to bring it into how it's going to be helpful for them. Because if you're going to quit then you can use that as a negotiating tool. Like "I want to stay here."

DU: Exactly. It's all about creating that win-win. It's all about having that dialogue. If they say "no" once, it doesn't mean you can't go back later. That's the thing. Once we elevate out of that victim mode, we're now having conversations. If they need to be serial conversations, they will be. But we start having those kinds of conversations.



HF: Do you have some other tips in your back pocket about making this shift and becoming more empowered?

DU: Yeah. I would say this too. The doc who is like, “I hear you. I love it. But this is out of reach. I like the sound of it, but I don't think I can do stuff like this.” I started from there. Go and speak. I'm like “Speak, like be on a stage? That's never happening.” And things like that.

So, when I think about what you can do, if you recognize that you own a brand, you own a business, Doctor You Incorporated. You have to start asking yourself some questions. What does this brand stand for? Because you may not know what exactly your business idea is going to be, or you may know, but you've not owned it as far as putting your brand out there. What do you want to be known for? That's your message.

And I say this saying that your message can evolve. So, it doesn't need to be perfect. But what do you want to be known for? Own that. Pick that and own that. You may be a family medicine doc, it's all about obesity for you. You may be a coach and it's all about transitioning out or not of medicine. You may be someone who has always been concerned about people of color, their skin conditions, whatever it is. Find what that thing is and own it. It may evolve. Actually, it will evolve, but you start from somewhere.

I don't know who said this, but I hear my husband say it a lot. He says, “If you don't start from where you are, you will stay where you are.” And so, you own what that is. Now, once you do that, you take that message what you want to be known for and you start putting it out there. And sometimes people go into, “Oh, that means I need a website. I need this. I need that. I don't know where to go. I'm stuck.” Don't even do that. We're physicians, we're professionals. Just go to LinkedIn, set up a profile there. Clean it up and start talking about your message. Start creating that brand ownership. Start creating that thought leadership. Start from there, putting it there.

And when you show up at work, where you show up in your business, start speaking up. I've had friends who are like, "We want you to be the CMO of this hospital." They're like, "Oh, I don't do things like that." No, come on, before you did intubations, you didn't do things like that. You know what I mean? Learn it, say yes, do it. And things like that.

But start speaking up, start owning what you do. Start putting yourself out there. Start taking your space in the healthcare space. Put a stake there, own it. And you start from there. The thing that happens is once you start showing up, opportunities start showing up. I cannot tell you how many speaking opportunities I've had because I talked about a speaking opportunity I had before. I cannot tell you how, it happens all the time. Or you do one social media post and somebody sees that. It's like, "Oh my goodness, I've been looking for a coach like you."

Once you start doing that, all kinds of opportunities show up. I've had clients who got Ted talks that way. I've had clients who are in talks for movie deals and that's the way it happened. I have a client, she sends emails back and forth with Mark Cuban. And that's how it happened. You cannot predict what happens when you start putting yourself out there.

HF: That's such a great message. And we're going to pause for a short break so I can share some resources with you and then we'll be back to wrap up here.

LinkedIn has been one of the most helpful resources for my clients in landing great jobs. Initially, many of them were reluctant to put themselves out there and network on this platform. But once they created a profile and learned how to use LinkedIn strategically, they had a lot of success.

My LinkedIn for physicians course shows you how to create your own standout profile, have success, networking, and land nonclinical jobs. To learn more about this online



course, go to [doctorscrossing.com/linkedincourse](https://doctorscrossing.com/linkedincourse) or simply visit the Doctors Crossing website and hit the products tab at the top of the page. Now back to our podcast.

We are back here with Dr. Una and we are talking about changing from a victim to an empowered mindset. And this conversation really reminds me of what I talk about a lot, which is shifting from fear-based thinking to trust-based thinking. Trusting that you can figure this out.

And what I see so often with clients I work with is when they're thinking about doing something different or making changes, it's the problems that come up, not the possibilities. "If I make a change, I might not be happy. My income is going to go down. I don't have any transferable skills. I could lose my job and be out on the street."

We get into that so fast. But when we are aware of it, we make that shift, we can start, like you said, moving forward. So, do you have any last words for us about getting out of this fear-based victim mode? I think we're wired a little bit to think of what could go wrong.

DU: We are wired that way. And I think in the field of medicine, as far as what we do clinically, I think it's fairly helpful. But in the world of entrepreneurship or kind of finding your path and all of that, it's actually the opposite. It is not helpful at all.

And for someone thinking that way, this is what I want to leave you with. Mistakes are part of the journey. Failures are part of the journey. And the sooner you can realize that and embrace it, the sooner you can enjoy your journey. All of it. I'm a pediatrician and I try to link concepts to things that happen naturally, because it makes a lot of sense.

And you think about a one-year-old. So, here's Johnny, he's one. We've been waiting for him to walk the whole time. Johnny hasn't started walking and all of a sudden with five adults in the room, Johnny takes his first three steps and he falls. What do you think

happens in that room? The room goes wild. Everybody's cheering on. Everybody's like, "Oh, my goodness, Johnny walked." Somebody was trying to FaceTime while he was doing it and all of that.

We celebrate the progress. We don't get discouraged by the fact that he fell. In fact, nobody mentions that he fell. What they say is he took three steps. And we don't talk about the fall because we know that's part of the process and we know the more he walks, the less he'll fall. And if you think about it, that's only for that season. Once he masters walking and he starts running, he starts tripping all over again. Again, we're not worried that he tripped. We're excited that he ran.

And if you can bring that to your journey, the question becomes, "Am I further along today than I was yesterday?" Then we celebrate that. Because your only competition is yourself. "Am I further along?" Then you celebrate that. And we do have to stop because sometimes people say "I'm not further along." I'm like, "Oh, but you've done 1, 2, 3, 4, 5. You are further along." That's what we measure because the distance between where you are and where your potential can have you is always going to be more than the distance you've come.

And so, if you can't celebrate the process, if you can't celebrate the progress that's been made, then chances are, we just stay stuck. And so, embrace the mistakes. If you think about iPhones, they could have waited for iPhone 13 before they released their first one, but they didn't do that. They gave us iPhone One, took feedback, made it better. iPhone two, took feedback, made it better. And that's what we do with our lives. I mean just keep getting better and better. And that way we can enjoy the imperfect journey. It's a lot of fun.

HF: That was so beautifully said. I'm not even going to touch it because it's so beautiful. I love the visuals. Yeah. Let's clap for those falls that we make and just get up because then we moved. You can't fall if you're not moving.



DU: Exactly. Exactly.

HF: All right. Well, this has been such a treat Dr. Una. How can folks get in touch with you and learn more about you?

DU: Yeah. First of all, you're on a podcast platform. You can just hit the search bar, look for EntreMD. And that's my podcast. We have two episodes every week. So, conversation doesn't have to end here. And then as Dr. Heather referenced this earlier, I wrote a book that I call this \$16 MBA for physicians.

HF: It's so good. It's so good.

DU: Take her word for it. It's called "The EntreMD Method" book. And you can grab that on Amazon, but as a physician, I think that's the best \$16 you'll spend. It'll really set you on the path for a brand-new journey in medicine. We can create an alternate reality. We do not have to. Life does not have to be the way it is now. The practice of medicine does not have to be the way it is now at all. We are in control. We can change it.

HF: Amen. I will have ways to contact you in the show notes as always and on this podcast and on my website. I hope you get the book. You don't need to want to start a business. This is just great, just for you being inspired to know that you are empowered.

All right, guys. Well, thank you so much for listening. Don't forget to carpe that diem and I'll see you in the next episode. Bye for now.

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