

Episode 54 | Bullies in Vet Med

FULL EPISODE TRANSCRIPT



for **Veterinary
Professionals**

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The three types of vet med bullies, the characteristics of each, and what makes us susceptible to their influence, that's what we're talking about in Episode 54.

Welcome to the Joyful DVM Podcast. I'm your host, Veterinarian, and Certified Life Coach, Cari Wise. Whether you're dealing with the challenges in Vet Med, struggling with self-confidence, or you're just trying to figure out how to create a life and a career that you actually enjoy, you'll find encouragement, education, and empowering concepts you can apply right away. Let's get started.

Hey everybody. Welcome to Episode 54, and hang onto your hats because today we're going to talk about bullying. Bullying is one of those things that comes up a lot in the world especially now, here in 2021, we've been in the world of the pandemic for over a year. People are kind of emotionally worn out and people aren't behaving all that well. Many of us, myself included, have had moments that were not our best moments, things we're not proud of. In veterinary medicine, we do see a lot of it. You guys have heard me talking about this quite a bit recently and it's got me really thinking about bullying in general, the culture of bullying that exists in the veterinary profession. There really are three places that it comes from. So we're going to talk about the three places that bullying shows up in veterinary medicine and then we're also going to talk about what makes us susceptible to bullying in veterinary medicine because I think these two concepts together if we can understand a little bit more of each side of it, both pieces of it, it can really change our experience of it.

Where are the bullies in veterinary medicine? Number one, no surprise, the clients. So clients can absolutely be bullies to veterinary professionals.

The second one, leadership. So whether this is practice owners, this is just maybe practice managers, bosses. If you're in a corporate or a multi-hospital structure, then the bullies can be at higher leadership there. In the corporate world, there tends to be a lot of bullying from a sales team. So if you've got that division between the medical team and the sales team, there tends to be a lot of bullying that happens from the sales side of veterinary medicine. So that's another place. Leadership is number two.

Number three is coworkers and that includes me and that includes you. So really all of us have the potential to be a bully when it comes to veterinary medicine. That doesn't mean we all will be, but from time to time, I think that we all certainly have the possibility of behaving that way. For some people, this is just the normal way that they show up day in and day out as a bully.

So what is a bully? What actually defines a bully? Well, you know, me, I love my definitions. A bully is a person who habitually seeks to harm or intimidate those who they perceive as vulnerable. Intentionally seeks to harm or intimidate those that they perceive as vulnerable.

When we come to veterinary medicine, we think about bullying in veterinary medicine, and I think about my own experiences with bullying. I don't know that the harm, especially from the standpoint of physical harm is so much the intent. So if we think about a bully as somebody who intends to harm somebody else. I don't know that the physical, in most cases. I'm not going to say in all cases because there are certainly those cases, but in most cases, that physical harm isn't the thing. But the intimidation piece is huge. So, people who seek to intimidate those who they perceive as vulnerable, that's really what defines a bully. So if we think about now, that definition, we think about these three types of bullies, we think about clients in their behaviors. They're seeking to intimidate the veterinary professionals with their behavior. They're perceiving that the veterinary professionals are vulnerable and many of you have recognized that a client may behave very differently with a front desk person or with somebody like an assistant or a veterinary technician than they do with a veterinarian. This happens a lot. You know, they'll be very aggressive with somebody at the front desk who is on the telephone. Even a veterinarian, some more on the telephone than in person and definitely with our support staff. More so than they will with the actual veterinarian.

So why is that? It all comes down to their perception. They perceive that the receptionist or the veterinary technician, the veterinary assistant, that first person - the person between the client and the doctor - that client is perceiving that that person, the intermediate person is more vulnerable to the pressures, more vulnerable to intimidation. So why are they trying to intimidate them? Well, they're trying to intimidate them because there's something that they want. There's something that they want and they think they can kind of strong-arm their way into getting it. So whether that is manipulating somebody on the telephone to put them into an appointment slot that doesn't exist; whether it's threatening, which is a lot of the behavior. A lot of this bullying behavior is threats. So threatening from a client perspective, threatening with a negative social media review; threatening with a board complaint; threatening if you're talking about maybe a technician or a receptionist threatening to turn you into your bosses; if it's corporate threatening to call into the corporate offices. So the behavior of a client who is bullying is often very threatening behavior. We want to keep an eye out for this because it's never okay.

Let me just stop and point this out very clearly. Bullying is never okay. Never is it okay. But we have to understand both the motive of the bully and also what makes us susceptible to it. So the motive, remember, it's because the bully thinks that they're going to be able to get what they want. They're trying to strong-arm their way into it. They're really trying to be intimidating to get whatever that thing is that they want, particularly when we're talking about clients, but that's only one kind of bully. The other two kinds of a bully - leadership and co-workers.

Let's go to the leadership side. Let's just use very specific for my corporate friends out there. Those of you who feel bullied by if you have a division between medical team and sales team, and you feel bullied by the sales team. Why would they do that? Why do they use those kinds of tactics? The

threats. A lot of us threats, right? We're right back to that again. Threats of, it's more of empty threats, by the way, part of not meeting your numbers and then what. So there may be clear consequences as far as how these metrics lead to your ability to keep your job. So that may be there, but the manner in which that is communicated can feel very, very threatening. Sometimes the threats are empty. Sometimes they really just bluster and say all these things to intimidate you, but they're actually isn't a consequence if your organization doesn't meet the certain benchmark numbers that are there, and this type of sales really heavy-headed sales-driven management often comes from somebody who's in that kind of leadership position that doesn't have a history in medicine. There's a disconnect. A lot of us feel this disconnect between providing good quality services, veterinary medicine services to our clients, and meeting metrics that are being driven and communicated by somebody that doesn't understand medicine. Two totally different things. Trying to get somebody to buy a car versus trying to get somebody to invest in a heartworm test. Two completely different things. Now I'm not saying, I think that the way that cars are sold is ideal either. There are lots to be gained there, but we are a service-based industry. So trying to apply sales, like retail tactics to a service-based industry, doesn't work, and many, many, many times the people in the organizations, in the hospitals feel very bullied by the people in leadership who come from retail because of the way that they're communicating and because of the way that they threaten their position and just communicate expectations.

So why do those people do that? Why does anybody who's relaying some kind of expectation to you do it in a bullying manner? Why do they feel like they have to intimidate you? Well, this all comes back to something we've talked about many times. It comes back to Think-Feel-Act. We have to think about what is driving that behavior to communicate in that way. What's driving the behavior of trying to manipulate somebody; of trying to intimidate somebody. Also, they're trying to get the outcome that they want. There's an outcome that they think they need to have. They think the way to do it is to control the behavior of other people, and if the only way they know to control people is by intimidating them, then that's what they're going to do. So if we think about our sales example, that person in that sales leadership role has their own benchmarks that they have to hit. I know I'm talking corporate at the moment. We're going to pull this back to private practice as well. But I think it's super important for our friends at corporate because there's so much pressure that comes from there. I remember this from my days in the corporate so I think it's important. But if we think about that pressure that's coming in like that person who's in that sales leadership role for you has their own metrics. They have their own things that they have to report on. So, how their market is doing? How the hospitals in their market are doing? They may have, I don't know, the structures of pay for all the corporate hospitals anymore, but they absolutely may have some kind of their own personal compensation being tied to the production of the hospitals. These two things like being measured on how well their hospitals are doing and that potential for maybe their own compensation to be tied to that as well, that's where their skin in the game is. They need the hospitals to do well so that they can do well. If the hospitals aren't doing well, then they are believing it's a direct reflection on them. So in

order to get the hospitals to do better, they become intimidating. They become threatening. It's not useful. It doesn't work. It just makes everybody feel like crap. It kills culture, but that's how this goes down. That's how this happens. I think it's important to see that because as you start to experience that bullying behavior from somebody in that kind of role, you can recognize, "Oh, this isn't actually about me. This is about their own insecurities." The heart of every bully is somebody who's very insecure, a hundred percent. I don't care if we're talking about a client that's a bully or we're talking about leadership, that's a bully, or we're talking about our coworkers. What defines a bully is really their own insecurity. It is their own insecurity that has them lashing out and behaving and manipulating and intimidating other people. They are trying to control the other things so they can feel better. When we start to see it from that perspective, then we don't have to blame ourselves for what ends up happening when we've been bullied. A lot of us start to turn that in and believe what the people who are bullying us are saying and doing. Thinking that we are less than, and that's the reason why people treat us the way that they do. A hundred percent of the time, guys, the reason that people treat you the way that they do is based on their own belief systems - what they believe about. That doesn't mean that what they believe about you is true. It just means they're interacting with you through what they believe about you and what they believe about themselves. Mostly what they believe about themselves. Either way, both of those are creating emotions, which are driving their actions.

Let's bring this now to leadership in a private hospital because there's plenty of bullying that goes on from practice managers and owners, and veterinarians to technicians, and technicians to assistants. I mean, across the whole scheme of all of it. So anybody in a leadership role has that potential to be a bully and it comes back to a lot of the same principles. As leaders, there are things that we want our organizations to achieve. We want to be able to serve clients and treat patients. We want to make money. We do want clients to be happy. We want to get good reviews. In our attempt to control that as we start to see areas where those things that we want aren't actual reality, we start to look for places to blame for it. Oftentimes we end up blaming the humans, the other people who work there for the outcomes, and that's not legit. That's not a good way to go about this. But the reason, we look at the motive, is because underneath it is usually fear. Again, insecurity, especially from owners and managers. I think fear is one of the greatest drivers of bullying in veterinary medicine. Fear of what might happen if people don't do things perfectly, right? Fear of the potential of losing money if clients figure out that we don't know what we're doing. I'm not saying we don't know what we're doing, but what I'm saying is that in the leaders who bully, there is great insecurity there which is based on a whole lot of fear. Their own fears about what other people are going to do. In order to try to control the third party which is often the client, they first try to control the people who work there. If they don't do it in a healthy way, through policies and procedures and employee manuals and open communication and communication of expectations and team-building type environment and culture, the default becomes bullying. As they become more stressed, as they become more insecure, they blame. They manipulate. They intimidate to try to get the people in the hospital who

work for them to perform differently because they're believing if they perform differently that the clients are going to behave differently. They're going to have a different outcome, whether that's more revenue or fewer negative reviews or more positive reviews, whatever it is. The person getting bullied actually tends to be one removed from the goal of the bullying, from what is driving the bullying. I'm not saying this is good. This is absolutely not okay. But I want you to see that because it's not about the person who's getting bullied. It's about the person who is doing the bullying.

Now, if we go all the way back to the beginning where we were talking about what defines a bully, like what is bullying? It's somebody who seeks to intimidate another person who they perceive as vulnerable. So automatically when there's a leadership hierarchy, the people who are lower on the totem pole can be perceived as more vulnerable. I'm not saying that you are. I absolutely a hundred percent believe the opposite. I believe you are not, but in a hierarchy of different levels of leadership that ego can come into play - I am the boss. Do what I say because I'm the boss. Don't question it because I'm the boss - and what I want you guys to recognize is that's never a good answer. That's never an answer that you should be satisfied with. That's not the kind of organization that we want to work in, "Do it because I said so!" No, the day of that is gone. That does have no place for us here in veterinary medicine particularly when we're looking at a healthcare team where it takes all of us doing our jobs to be able to provide the best service to our clients and our patients. So that's not okay. That type of culture is not okay. That kind of message comes from somebody who is very insecure in their own roles and has a whole lot of fear around them. So I want you just to be aware of that.

The third kind of bullying is peer bullying, coworker bullying. So veterinarian to veterinarian; veterinarian to the technician; technician to the veterinarian; technician to technician; technician to the assistant, literally anywhere. This is why I said bullying really encompasses everybody. There's a lot of that that goes on as well. If we have doctors who are very controlling, who go to shaming their support staff, recognize that has nothing to do with their support staff and has everything to do with the security of the doctor. Doctors who are secure in their own skills. Doctors who are secure in who they are. Doctors who accept the responsibility that is theirs and let go of the hyper responsibility for everything that isn't which means they start to let go of outcomes - patients who get better or the way the patient responds to treatment is independent of the patient and the physiology has nothing to do with the people who work with you. So what do we do? We educate. We prescribe. We diagnose. We send them to their homes with medications and some instructions, and we all have to wait to see how the pet responds. When the patient doesn't respond, if you've got a doctor who takes that very personally, they often lash out at everybody around them and they start to point fingers and blame and make excuses. That's just kind of evidence of hyper responsibility. You're taking on more than you were ever supposed to be responsible for. You're taking on components of this veterinary client-patient relationship that were never yours to control, and many of them not even the owners to control. So it's just evidence of that. Just notice that. So that insecurity that we

feel when our patients don't get better or when a client is angry. So when a client is behaving badly, if we take that on and we start to internalize that as if there's something that we could have done differently to prevent that client from behaving the way that they do, that's just more evidence of our own insecurity, and if we don't recognize that for what it is, oftentimes we lash out.

When we judge other people, it's always a mirror of our own insecurities. So we want to see that in ourselves. We're not perfect humans. Like this is a human experience. We're never going to be perfect. We're never going to not sometimes say things that we regret, but when that becomes our norm, when we're constantly lashing out and try to manipulate and intimidate people just to make ourselves feel better, most of us don't realize that's the reason that we're doing it, but we can start to pay attention to our own behavior and see, "Am I actually being a bully here?" If so, why? "What am I afraid of? What were my insecurities here? What can I do to become more secure in myself, to increase my own self-confidence and my own self-worth?" Because that's where it all really comes down to whether it's at the highest leadership levels, whether it is a client or whether it is in a coworker, anybody that's bullying those levels. It all boils down to at the very heart of it is a person who's got their own insecurities and who doesn't have a solid foundation of their own self-worth and their own self-value. When you have those things; when you strongly believe in who you are; when your value is not something that you ever questioned; when your worth is something that you don't ever question, then what the other people believe about you doesn't actually matter, and the way that they actually interact with you starts to matter less as well because you don't internalize it. Where this becomes such a big problem for us is that when humans behave badly, whether it's the clients being bullies or it's somebody that we work with being bullies, if we don't already have that strong foundation of who we are - our own self-confidence, our own self-worth - then their words start to get inside us. We start to believe them a little bit. Those words kind of reflect back to us.

Some of our greatest fears that we already had about ourselves, particularly when it comes to things like imposter syndrome or feeling like our skills aren't as good as we think they should be. So we've already got those insecurities there and then somebody speaks those words in a very manipulating and blameful kind of way, which is bullying, we may not even recognize it as bullying, we just recognize it as truth. We take it in as truth, and it's not true. It's not true at all. This is what has really led to the degradation of culture in veterinary medicine is because we've got a high-pressure situation. When we're interacting all the time with clients and with coworkers and with different levels of leadership and we add onto it. Now, this whole age of social media, where anybody can just say anything at any time, and if we don't have a strong foundation of who we are, if our own self-confidence isn't there, if we don't have a really solid foundation of self-worth, then all of this external stimulus really starts to get under our skin and it starts to play with our minds a little bit, we start to see it as evidence of that being true and none of that stuff is ever true. None of it's ever true at all.

Behind most bullying in veterinary medicine is money. I'll say that again: behind most bullying in

veterinary medicine is money. At some level, it's a fear around money. I'm just going to go back to what I said, that the heart of most bullying in veterinary medicine comes down to something related to money.

Let's look at that in the scope of the three different types of bullies. If we think about clients who are trying to manipulate, who we're trying to intimidate to get something, when do they do that? They're either doing that when they want to get in for an appointment and there isn't one. So there could be some of their own fear about their wellbeing of their pet. That can be part of it and we know that they do that. Some of the most significant bullyings though are the type of bullying they do at the front desk - the shaming, the comments they make about, "We don't care about animals. We're only in it for the money" - those kinds of comments. It comes back to their own concerns and beliefs about money, what they have the ability to pay for, and their own shame around that. They care about their animal. We know this to be true because they're at your veterinary hospital. If they didn't care about their animal, they wouldn't even be there. So we can just start to remind ourselves of that. Then when they decline our services, they either decline it simply because they don't want to and people who don't want to don't typically make up a long, drawn-out story about the money part of it, or if they do, they don't typically include in that blaming and intimidation, but the people who come across very aggressively about the money and really in that blaming and intimidating around all the stuff related to the cost of veterinary care, those people feel very insecure about their own financial resources they have available to put into their own pets. That is their own drama. They're projecting their drama on us because that's what people do. When people feel backed against the wall, they're going to kind of lash out and attack. I'm not saying that it's okay. It's absolutely not okay. But understanding that all the comments about money don't have anything to do with you. Most likely, if you'll listen to their words, they're talking about themselves because when we judge and we attack, it's usually a mirror effect of something that we are actually experiencing ourselves. This is how money often plays into bullying when it comes to clients.

When it comes to leadership, how does money play in? Well, we have to go all the way back to control. Ultimately, the biggest bullies in any kind of leadership position are really trying to control by whatever means they can the people who work underneath them by intimidating them, by shaming them, by threatening them. Why? Why do they need you to behave differently than you are? Because they believe your behavior is contributing to a financial outcome, either real or perceived. So financial outcome being, if you don't do, you know, 17 dentals, then we're going to be even further behind in our numbers for the year. Or the outcome of if you don't figure out how to squeeze them in, we're going to lose out on money from those patients. We're already behind on, where we should be for the month and if we don't get that money coming in for the month, then that is going to put us further behind and we're just on a downward spiral. So their whole money story that they bring into this. They're making individual people responsible for the entire financial outcome. They often pick up people that they want to blame for it. They don't work the problem. They make excuses for their

problem. Then they try to use intimidation and blame and threatening to fix the problem. It doesn't work. At the heart of all that is just fear about money. What sucks about it though, is that, if asked about it, they're going to say, "It's the people." Because that's what bullies do. Bullies seek to intimidate the most vulnerable. They're afraid of the financial consequences of whatever's happening and so they blame and intimidate. I'm not saying there's not an opportunity for people to do their jobs better, but if we're truly leading in a hospital situation, that's what our policies, procedures, and employee manuals are for. The communication upfront, those regular reviews, and those conversations don't have to be emotional and they never need to be intimidating or threatening at all. It's just, "This is what's expected. This is what your performance is. This is the consequence. This is your opportunity to improve. If you don't improve, this is the second consequence." It's like that. Literally, it can be that calm, that neutral of a conversation. When we make it very personal; when we bring in our own fears about the finances and about how somebody's performance is impacting us personally; when we make it personal and it's usually personal because of the money, then the bully really just explode - the intimidating, the shaming, the threatening.

From a coworker to coworker perspective, how does money play into that one? Well, it plays into that one from a lot of different perspectives. If somebody is feeling insecure in their own role and their own skills, then oftentimes they want to point out the flaws in other people because they think that gives them job security. Now I'm not saying that they overtly and consciously recognize that they're doing this, but if they will take a step back and start asking themselves, "Why am I attacking them all the time? Why am I always pointing out their flaws?" It's because there's a very binary belief there - either you or me - rather than that collaborative belief, which is, "Hey, you're better at this than me. Show me how to do it. Here's the opportunity. This person can nail catheters the tiniest kitten and I can't. I can learn from this person. Let me learn what they know", as opposed to, "They're better than me" and then making up a whole story about how they think they're better than me because they can place catheters better than me and therefore if push comes to shove, I'm probably going to get fired, and so I have to make sure that people know that I'm good at other stuff even though I'm not good at catheters. It becomes a big drama kind of thing and within that drama often becomes a lot of intimidation, blaming, and threatening. That's not okay either. None of it is okay. I spend a lot of time kind of explaining why this all happens, but I want to be really, really clear. None of this is okay. The reason that it's perpetuated comes back to the people who are susceptible to it. Bullies pick on people they perceive as vulnerable. You've got to stand up for yourself. The bottom line, bullies pick on the weak. I wish there was a better way to say this, but if a bully pushes you; if somebody threatens you, somebody intimidates you and you don't step up and say, "Hey, this is not okay. We're here to work together. We're here to serve clients and treat patients and I'm more than happy to work with you in that realm, but don't make this personal, and don't attack me." If we don't stand up for ourselves then this behavior continues. The reason we don't stand up for ourselves is because we believe them on some level, which comes back to that self-confidence and self-worth, and self-value. So there's your opportunity.

If you're not standing up for yourself when a bully comes at you, I want you to really think about what do you believe about yourself? What do you believe that you're capable of? What do you believe about your self-worth and your value and your lovability and just your overall capability? Because there's your opportunity, let's grow that so that you can stay stand up for yourself when you come against these people because these people are always going to exist in the world. They're not even just in veterinary medicine. You already know this. They are in every realm of life. Being able to step up and speak up in those moments is really important. The reason that we don't is because we are insecure. Isn't that interesting? Bullies bully because they're insecure and victims don't stand up for themselves because they're also insecure. It's a vicious cycle of just a lot of insecure people, which is just the human experience, which we could actually have a whole lot of compassion for each other if we could get past the way that we feel about all of it.

The other reason and this is a really big one that we put up with bullying especially in a job environment comes back to money. So again, isn't that interesting? Money drives a lot of bullying behavior and money also drives a lot of the acceptance of the bullying behavior. We're worried about what happens if we lose a job. You can be very clear that you're in an environment where people are bullying, where people are intimidating, people are threatening, that it's not a healthy environment to be in, but if your money story is stronger than your belief that what you're experiencing is wrong, then you will stay there. By your money story, what I mean is if you fear over what happens if you didn't have this job; if you left this job. That gets tied into all kinds of things. It could be tied into your own fears about never getting another job. I've been at this job so long nobody's going to ever hire me. My skills have gotten rusty. So whatever that story is. Or it took me a long time to find this job, it's going to take me a long time to find another one. So you don't even look, you just the behavior. The fear of getting fired. So there's the threatening part, right? Because a lot of bullies flat out threatened, "Do this or you're going to get fired!", and so you cave, but it's not okay. That's not how it's supposed to work. So just start to recognize where maybe you put up with behavior that you wouldn't otherwise tolerate if there wasn't a money component.

One of the ways that you can really kind of tighten this up for yourself and get some real clarity around that is just to answer this question: If you win a million dollars tomorrow, would you go back to work? Now I know we can look at that question from a lot of different perspectives, but I want you to think about it from a perspective of bullying. Would you go back to that job tomorrow if you win a million dollars today? If the answer is no, then I want you to ask yourself why. What's so intolerable about that job? If it comes down to the way that you're treated in that job, then I want you to really look at that because it is this combination of insecurity and fear, personal insecurities, fears around money that drive bullying behavior and also perpetuate the acceptance of bullying behavior. If we don't develop our own self-confidence, our own self-worth, our own self-value, and have our strength and foundation as humans in that, then we will just continue to accept this. And in veterinary medicine, it's gone off the rails. It absolutely a hundred percent contributes to the burnout that we

have; to the anxiety; to the depression; to the high rate of suicide. It contributes to all of that. We like to point the fingers at the clients and they do a fair share of bullying. I am not going to even argue that point, but it is crazy for us to think that they are the only problem that we have when it comes to bullying in veterinary medicine.

There is only one piece of the problem. Only one. There's so much that we have to take care of for ourselves, but if we never stopped the cycle, if we continue to work in environments where this kind of behavior is accepted as the norm, then it's just never going to change. It's going to take us one by one, standing up and saying, "I'm not willing to work in an environment where I feel intimidated and where I am threatened. I'm willing to go work somewhere else." and to leave these environments that do that.

Two things happen when we stand up for ourselves and we have these conversations and I recommend just standing up and have the conversation. First, if you are not being treated in a way that is respectful because there could be respectful conversations as they even give you feedback on performance. You don't have to be doing your job perfectly to be engaged in respectful conversation with the people above you and with your peers. I want to say that again. You don't have to be doing your job perfectly in order to get respectful communication between your peers and the people that you work for.

First of all, perfection is not something we can define. Let's just be real honest. There's no such thing as perfect guys. We can't define it. We can't measure it. We would not all agree that one thing is perfect or not perfect. So perfection doesn't exist. So let's just start there. But even let's just say doing your job, right, meeting all of the expectations of your job. You don't have to meet all of those expectations 100% to be treated respectfully, to be treated with dignity, to be working in an environment where you don't feel threatened or intimidated. If you're not meeting the expectations of your job, a well-managed practice has policies and procedures and an employee manual in place that can show you in a very neutral conversation. Here are the areas where you're not meeting expectations. Here are the opportunities to improve that. Here are the consequences if you don't. Nobody has to be personally offended. Nobody has to feel attacked in that kind of conversation. But if that kind of conversation comes with threats, comes with intimidation, doesn't come with any kind of counseling or opportunity to improve, that's a problem. That's a lot of the culture that we have here. As we continue to work in these jobs, accepting that culture, it doesn't ever change. I want to tell you something. When we have a situation where we've got a tyrant, that's leading a hospital, and I know you guys have been in those situations before, just like I have, when you are in a situation where somebody is so aggressive and such a bully and very intimidating and blaming and just scary and people are terrified of them, but nobody speaks up and nobody leaves, nothing changes. But if everybody speaks up and if people start to leave, when things don't change, then the problem becomes made aware to everybody. Now I'm not going to say it's going to fix the hospital. Some it

will. Some will be a wake-up call and the bully will be like, "Holy crap! I'm doing this stuff. What can I do to manage myself so that I don't interact with other humans that way?" because I don't really think people want to be mean personally. I don't think that anybody really sets out to make other people miserable. That's a story we often tell ourselves. I don't think that's what's happening. But I think people don't realize just how difficult they are and how intimidating they are to other people when they're so caught up in their own suffering. So sometimes it takes these conversations or these like mass exodus events for things to change. Sometimes there are those events and things never change. That's the other side of it. We're never going to control the other humans, but you always get to control yourself. So whatever story you're telling yourself about who's going to suffer if you leave, meanwhile you are also suffering and being bullied and being intimidated and being threatened, I want you to just recognize that you're prioritizing other people over yourself. I'm not saying that you need to be selfish, but I'm saying you have to take care of yourself, first. You have to. If you're not willing to, let's look at your self-confidence; let's look at your self-esteem; Let's look at your value and your self-worth. Let's figure out what it is that you believe about yourself that you believe that this is okay for people to treat you that way because it's not. It's never okay. It's never okay.

Veterinary medicine just tends to be a catalyst for this because it is such an emotional environment. The bullying really just kind of runs off the rails and we so easily blame the bullying on the clients which are absolutely part of it but it starts in the house for many, many, many of us. It's not just the clients. We try to control the clients. We think if they were different then we'd be happier, but if it's already a culture of intimidation within the organization itself, and it doesn't matter how good the clients behave, it's not going to fix it. It could only start one person at a time. So if you are that person, if you're the one who really feels like everybody's attacking you; if you're the one who you are feeling intimidated at work; if you're feeling threatened at work, then you owe it to yourself to have a conversation about that. That conversation says, "Hey, I'm here to serve clients and treat patients just like you are. We're all here on the same page. But oftentimes I really feel like you're threatening me and trying to intimidate me. I'd like to understand that better because that kind of interaction is really not acceptable." That conversation is going to be terrifying to have for sure. But when you have it, two things happen. Number one, your self-confidence goes up because you've had a high-value conversation in an uncomfortable situation which will increase your self-confidence because you're going to live through it and you're going to be like, "Dang, I did that!" The second thing that's going to do, it's going to shine some light on the person that is behaving in that bullying fashion. It's going to show them, "I'm aware of what you're doing and I'm not okay with that." Sometimes that alone is the wake-up call that the bully needs to kind of reel themselves back in and say, 'Okay, I'm starting to make my own crap out on everybody else. I got to figure this out for myself. "If somebody doesn't go first, it never changes and the culture just gets worse. I think that we're at a time in the world where we can no longer just keep accepting this. The whole world is at a point where they're just kind of extra on the emotions.

Think-Feel-Act, it all boils down to that, guys. Every behavior comes from an emotional experience, whatever you're feeling emotionally drives that action, a hundred percent of the time. Emotions come from what we believe about a situation. We have to start becoming more reflective on what's driving our own actions and what's creating our own emotional experiences because we can't control the world. It's never been more obvious than it is now. But one piece at a time you always get to decide for yourself. You always get to make those choices for yourself and that's where your power is. That's where your future lies. You figure out what's important for you; what you're going to be willing to tolerate and what you're not, and finding that confidence to speak up for yourself when you're in those situations that you are in harm, either physical harm, absolutely a hundred percent, and otherwise mental harm being intimidated; being bullied; being threatened. It's never okay. I said this I think seven times already: it's never okay to feel threatened at work, to be threatened at work. It's never okay to be intimidated.

True conversations about performance and consequences are not threatening conversations. They are not scary conversations. They are neutral conversations. If that's not how you're getting feedback, then there's an opportunity for that to change. There's an opportunity for you to step up and say, "Hey, I'm willing to hear the feedback, but I'm going to need for you to speak to me in a respectable way." and just watch what happens. I'm not going to say that they're going to be real and be respectful, but you're going to learn a lot about the people that you work with, in the way that they then respond to you. If they get defensive, if they get angry, just know that's not you. It's their emotional state that's driving that. So their own insecurities are driving that. They're probably feeling external pressure. We're just having them put pressure on you. Shit rolls downhill. It's not okay, but it's happening. I want you to see that it's happening because if you don't recognize that this is what's happening, many of us internalize all of this. We turn it on ourselves. We think that we are the reason, we are the cause and that negative self-talk just starts to build and build and build. Our self-esteem goes down. Our self-confidence goes down. We then don't make any changes because we become fearful, " Oh my gosh, I'm terrible at my job. If I lose this job, I never got to get another one." It just becomes this whole other story that's not true at all. It's not true at all. So just start to watch what's happening and take yourself out of the picture. Try not to make it personal. Try to be curious about what's happening with the other people and then just decide when you're not okay with the way that you're being treated, is this a situation where you can step up and you can just own it. Say, "Look, I'm not okay with you talking to me like that. I'm more than happy to hear your feedback, but let's talk as two rational adults."

Two final thoughts on this. Number one, when this client behavior like this, these are the clients that need to get fired. Just to be honest. Have the conversation. Set the expectation of their behavior. If they continue to behave in this intimidating threatening manner, they don't need to be your clients. There's not enough money in the world that makes them worth banned in your environment. So get over your money drama and fire the clients. If you need more information on that, that's what we're

doing this month in [Vet Life Academy](#). So, you know, I'm always happy to have you join us there because that is our focus topic for this month.

The second thing, these concepts are new to you. If this whole idea of Think-Feel-Act, of the different stressors in vet med. four categories of veterinary anxiety - things that cause us the most stress in veterinary medicine - to want to learn more about that and how that plays a part in your own experience, I have a free course for that. [Joyfuldvm.com/freecourse](https://joyfuldvm.com/freecourse) to take the truth about vet med course. So it's a free course. The total runtime is just a little under two hours and I shed light on all of this. So if you're brand new to veterinary medicine or you've been in a while and you've been struggling, this will help you so much to understand what's actually happening as far as the interactions with the humans and really to define what you are responsible for and what you're not responsible for. So check out that free course. I would love for you guys just to check that out. I think you'll find it super helpful. The people who've gone through it have given me really good feedback on just the awareness that they get. The more that we can become aware of what's really happening from a human perspective, the more we can stop judging and blaming ourselves and also judging and blaming others and we can get busy creating them - the jobs, the environments, the experiences that we want to have - and actually enjoy this job that we worked so hard to do.

Alright, my friends, that's going to wrap it up for this week. I hope you have a great rest of the week and I'll see you next time. Bye for now.

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We can change what's possible in Vet Med together.