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in Health Professional Education

You Belong Here: Combating The Imposter Phenomenon in Health Professional Education

EDITORIAL

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ABSTRACT

Our Co-Editor-in-Chief shares her perspective on the discourse surrounding the imposter phenomenon in health professional education.

"You are just not good enough."

These are treacherous words I (and my peers) often internalise, leading to the development of the imposter phenomenon, a psychological experience in which an individual may question their ability or achievements as fraudulent despite contrary evidence. (1)

With increasing numbers of medical graduates and mounting competition for specialty training posts, (2) it is tempting to view our colleagues as competitors rather than collaborators in our professional journey. Therefore, it is no surprise that the imposter phenomenon has become a widespread and pressing issue within the health professional community. (3)

I have struggled with this phenomenon and continue to do so. Yet, I have often questioned whether this feeling is truly innate, shaped by our environment, or perhaps a complex blend of both? From the field of psychology, one may define the imposter phenomenon as the notion that individuals feel they have attained their position due to chance rather than their own competencies. (4) But how does the imposter phenomenon manifest, and how can you feel like an "imposter" in your roles? I turned to the psychology literature, exploring how the imposter phenomenon emerges across different high-performance settings, from elite athletes to healthcare professionals.

In this editorial, I hope to share and reflect on my experiences navigating the role of Co-Editor-in-Chief of *The British Student Doctor Journal* (BSDJ), offering an insight behind the editorial curtain. I will explore how applying three techniques from the psychology literature helped me re-frame the imposter phenomenon as a source of strength and self-improvement, and tools that may be applied to your contexts.

1. ESTABLISHING YOUR PERSONAL AND ACADEMIC SUPPORT NETWORK - SHARING EXPERIENCES OF THE IMPOSTER PHENOMENON WITH LIKE-MINDED INDIVIDUALS (5)

My first distinct memory of experiencing this phenomenon was when I was deliberating on whether to accept my position as Co-Editor-in-Chief of the BSDJ. As with any occupation, being a journal editor can be demanding due to the breadth of responsibilities, from processing manuscripts to supporting our journal community of authors and reviewers. (6) However, as the BSDJ is a medical journal managed by medical students and resident doctors, I had reservations about how I could fulfil this role as a medical student.

Fortunately, reaching out to my personal and academic support networks allowed me to express my concerns in a non-judgemental environment. I recall a conversation with my close friend, Anaïs Deere, about identifying

practical solutions together to minimise this feeling, such as providing constructive feedback on our professional roles. Through sharing our experiences, I developed strategies to enhance my skill set while maintaining confidence in the goals I wished to achieve.

Speaking with experienced and trusted mentors who shared the same values and goals for my career validated my feelings of the imposter phenomenon and encouraged me to think critically about long-term approaches that I would need to incorporate into my academic career. Luckily, I struck gold when I discovered that Kevin Eva (Editor-in-Chief of *Medical Education*) was the "human ChatGPT of journal management." By listening to and learning from his experiences, I was able to make informed decisions when prioritising initiatives at the BSDJ, which in turn strengthened my confidence in navigating complex editorial challenges.

Nonetheless, talking openly about feelings of the imposter phenomenon can be exceptionally difficult; however, having a psychologically safe support network helped me reduce these feelings and reframe my vulnerabilities. Therefore, I encourage the development of collaborative spaces where students, clinicians and educators can express vulnerability to promote authenticity, a powerful force in strengthening our community during times of uncertainty. (7, 8)

2. COGNITIVE RE-FRAMING - THE CONCEPT OF RE-FRAMING YOUR PERCEPTION OF AN EVENT FROM NEGATIVE TO POSITIVE (9)

At an international editorial board meeting for the journal, *Medical Education*, Kevin Eva introduced me as "Co-Editor-in-Chief of *The British Student Doctor Journal*". My reflexive response was to place my hands in front of my face in embarrassment when I looked at all the distinguished academics in the Zoom meeting. I recall the adrenaline rushing through me and thinking, "They probably think I am a student performing in role-play".

However, upon reflection, I realised that the editorial board members recognised that students were important stakeholders in these meetings and had advocated for student representation within the journal. Therefore, re-framing this scenario into a professional development opportunity enabled me to focus my efforts on accumulating the acumen and skills of these experienced scholars.

As a result, I became opportunistic and inquisitive when learning about journals' infrastructure and its subsequent priorities in our student representative meetings. I observed during board meetings that editors utilised their operational and strategic management skills when making high-stakes decisions, therefore I actively tried

to improve these skills. This became advantageous in my editorial role when determining how to build the BSDJ's profile through a sustainable approach.

3. ADOPTING A GROWTH MINDSET RATHER THAN A FIXED MINDSET (10)

Throughout my role, I have been (positively) encouraged to try things out of my comfort zone. Whether delivering workshops, mentoring colleagues or even convincing our Copyeditor, Stella Goeschl, that she is a graphic design wizard, I recognise that I had to train my mind to shift from a fixed mindset to a growth mindset so that intelligence can be learnt and polished. By adopting a growth mindset, I began to prioritise and develop my interpersonal and editorial skills in tandem – both essential for my current editorial role and my future academic career. However, this journey is far from linear; it demands consistent effort, resilience, and a willingness to learn from failures and setbacks. As such, it requires both introspective and retrospective reflection.

CONCLUSION

In summary, the imposter phenomenon can be challenging for many of us to navigate; especially with the increasing demands of the NHS workforce, we have reached a crisis in our health professional community. Research suggests 1/5 of UK medical students consider dropping out with mental health-related issues being the primary driver. (11) This editorial serves as a reminder to look, support and encourage our peers to openly discuss our feelings about the imposter phenomenon and how this can be a source of empowerment and self-improvement.

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