

# Conversations for Kindness

If we're going to talk about kindness, we also need to talk about... shame?

May 2025

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## About the movement

**Conversations for Kindness** is a monthly virtual meeting that was set up in the summer of 2020 by eight colleagues and friends working in healthcare across Sweden, the UK and the USA: Bob Klaber, Dominique Allwood, Maureen Bisognano, Goran Henriks, Suzie Bailey, Anette Nilsson, Gabby Matthews and James Mountford. The purpose of the meeting was to have some time together to continue some initial conversations around kindness, and its role at the 'business end' of healthcare, and to plan interactive workshops on this topic.

## Conversations for Kindness

- Monthly MS Teams call on the third Thursday of every month (6-7pm UK time)
- A focus on listening, learning, thinking differently and mobilising for action
- An open culture of sharing of resources, energy and ideas

If you would like to join the conversation for kindness, please complete this **[contact form](#)**

# Joining the Conversation from across the world

More than **50** Kindness in Healthcare community members came together from all over the world for this Conversation for Kindness. Once again, we had new faces join us for the first time!

Where were  
our  
participants?



British Columbia,  
Canada



North Carolina,  
United States



Copenhagen,  
Denmark

# Who did we hear from? Will Bynum MD PhD

Will is an Associate Professor of Family Medicine and practicing physician and medical educator at Duke University in Durham, NC.

He is the author of over 30 peer-reviewed publications and has given over 150 workshops and presentations about shame to top hospitals, conferences, and organizations such as Massachusetts General Hospital, Children's Hospital of Pennsylvania, and the American Hospital Association.

He is part of [The Shame Space Consortium](#) is an international network of professionals who use creative storytelling and research to advance shame awareness, shame resilience, and shame-sensitive practice in healthcare, with the overarching goal of creating more connected, authentic, and safe healthcare systems for all.

He is also Co-Founder and Co-Director of [The Shame Lab](#).



This insights pack summarises the session, but you can also [watch the Youtube video](#)

# What did we hear? Introducing shame

Will started off by sharing a definition of shame:

**“Feeling negatively judged by others and assessing oneself to be globally flawed, deficient, and/or unworthy”**

- He shared that often shame is outside of the experiences that we measure and talk about, particularly in a healthcare context where emotion can be seen as weakness.
- Repressing these fundamentally human experiences dehumanises us.

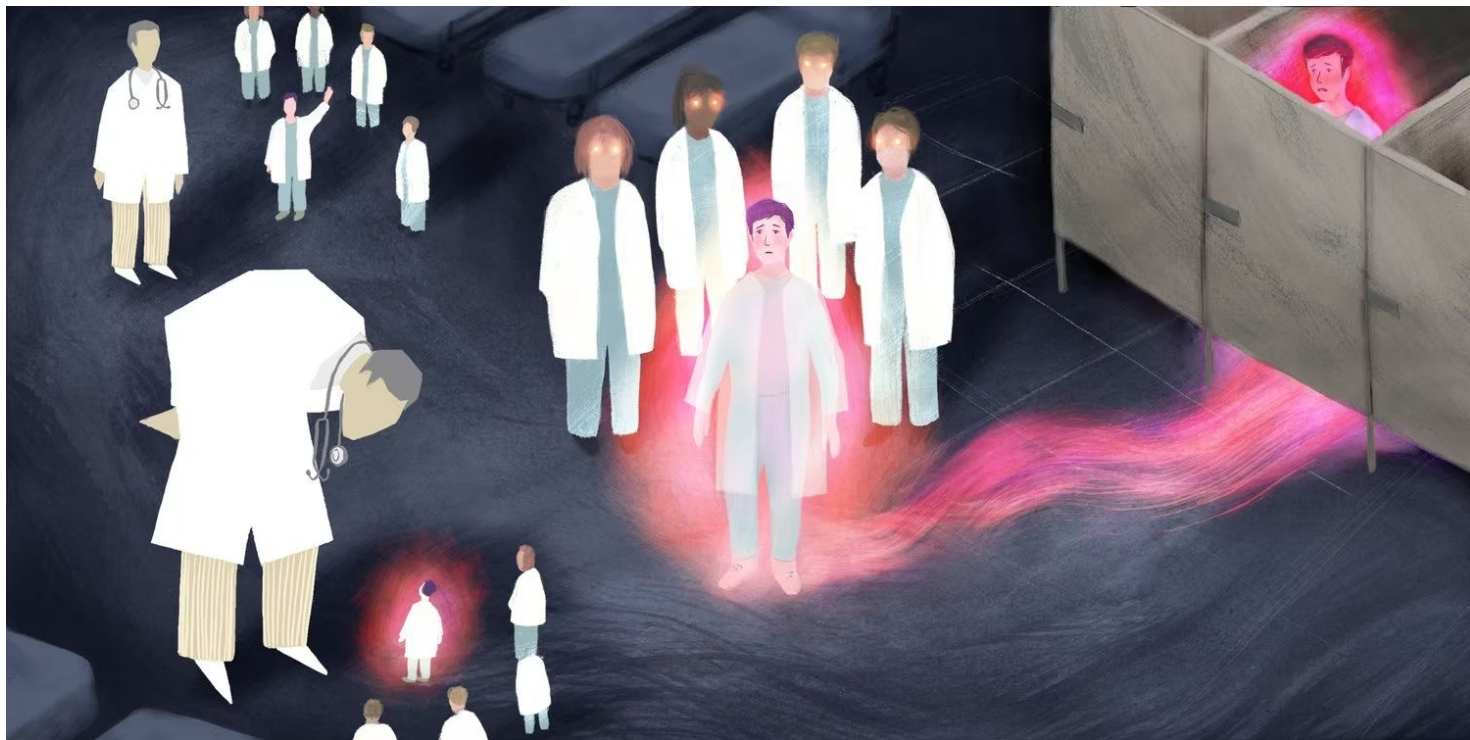
Will shared a series of illustrations by [Hannah Mumby](#), which brought to life qualitative data from a study on shame in medical students, which he used to share some key reflections on the images and the findings of his research.

He invited us to reflect on the role or the absence of kindness in these depictions.

# What did we hear? The shame spiral

Illustration by  
[Hannah Mumby](#)

We heard that once shame is triggered, there is an emotional reaction which begins building. It brings with it intensity, distress, anxiety, and fear.





# What did we hear? The shame spiral

Illustration by  
[Hannah Mumby](#)

After the immediate emotional reaction, there is an opportunity for self-evaluation. This often happens in a place of relative or actual isolation - “the theatre of our minds.”





# What did we hear? The shame spiral

Illustration by  
[Hannah Mumby](#)

We heard that if left unchecked or if the trigger is potent enough, this process can catalyse and feed upon itself. Here shame becomes the dominant voice.

Shame is often marked by a set of cognitive distortions. The predominant reality through which a person sees themselves in one rooted in negative self-judgement.

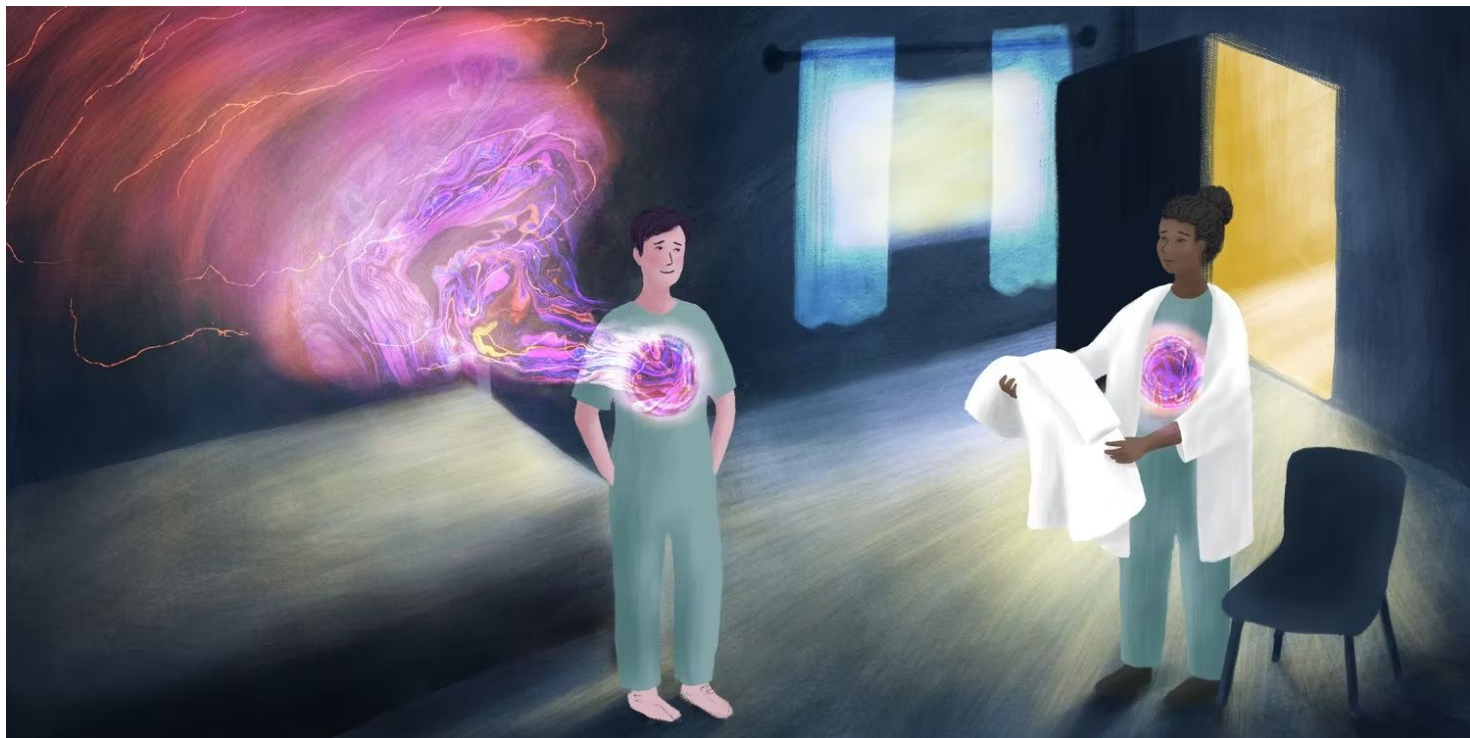


# What did we hear? The shame spiral

Illustration by  
[Hannah Mumby](#)

Will described this image not as a resolution, but as a processing or engagement of and with shame.

He asked how understanding the depth and various levels of shame can expand our conception of kindness and deepen the connections we form with others.



# Group discussion

The provocation for our breakout discussion was:

- **What is the role of kindness in healthy engagement with shame?**
- **What does it mean to use kindness in providing empathic support and in avoiding inducing shame?**
- **What is the role of self-kindness in processing shame?**

**Bimbi**

We spoke about how “kindness is the light to the darkness of shame.”

**Luna**

We talked about how shame, judgement and negativity can be embedded in the ordinary language that is used to talk about medical conditions or behaviours in medicine e.g. heart failure, incompetent cervix.

**Sandy**

My particular interest is around younger doctors who are forming what we call a ‘professional medical identity’. Shame plays a huge part in that identity formation.

# Acknowledgements

This insights pack has been co-produced by  
**Nicki Macklin** and the team at **Kaleidoscope Health and Care**

For all enquiries please contact us [via the Kindness in Healthcare website](#) or email  
[bob.klaber@nhs.net](mailto:bob.klaber@nhs.net)

See you next month for another great Conversation.

[Check out resources from our previous sessions on our website](#)

Thank you for joining, thank you for reading.

We'll see you next month!