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On the Symbolism of the White Coat

David A. Nash, D.M.D., M.S., Ed.D.

Abstract: The white coat ceremony has become an academic ritual in the health professions: a ceremony that signals a transformation of status from ordinary student to that of one studying to become a health professional. While donning the white coat is a sign of a changed role, the white coat is also a powerful symbol of transformation. White is a symbol of purity, and the white coat symbolizes the purity of purpose being affirmed in becoming a health professional. Dentistry is afforded the status of a learned profession as a result of the power dentists possess over patients seeking care; this power is based in sophisticated knowledge. Patients must trust that the dentist’s knowledge and skills will be used in their best interest—always to benefit, never to exploit. The white coat symbolizes an affirmation on the part of aspiring dentists that their purpose will be pure and that they can be trusted to honor the tradition of the learned professions in placing the interest of patients above self. Absent an emphasis on the symbolic nature of the white coat ceremony, it can simply become an opportunity to publicly congratulate individuals for their success in gaining entrance to the study of dentistry. By understanding its significance, however, the white coat ceremony can serve as a powerful, meaningful ritual emphasizing the transformation occurring within an individual who is entering the profession of dentistry.

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The white coat ceremony has become an academic ritual in the health professions: a ceremony to signal a transformation of status from ordinary student to that of one studying to become a health professional. The white coat ceremony reflects and extends the long and honored tradition of the academic convocation, with its history of colleges and universities marking the beginning of a new academic year, a time for reaffirming and celebrating the life and values of the academy.

The first white coat ceremony was held at Columbia University College of Physicians and Surgeons in 1993, initiated by the Arnold P. Gold Foundation. Dr. Gold believed it important for future health professionals to affirm the centrality of compassion and empathy for patients as the heart of health care, symbolized by the white coat they put on for the first time in a ceremony. The example he established at Columbia has led to the adoption of this rite of transformation in health professions programs across the nation and internationally. Many dental schools have adopted the white coat ceremony as a means of acknowledging students’ entry to the profession of dentistry, with the white coat as a symbol of their changed status. The ceremony can and should serve as a meaningful ritual emphasizing the transformation occurring when entering the profession of dentistry. However, absent an emphasis on the symbolic nature and meaning of the ceremony, it can simply become an opportunity to publicly congratulate individuals for their success in gaining entrance to the study of dentistry.

Valuable understandings can be gained by examining the symbolism of the white coat, which has led to the widespread adoption of the ceremony in such a short period of time. To understand the symbolism, it is first necessary to trace the origin and nature of the concept of a profession. We use the word “professional” in at least two connotations. In one sense, what philosophers would call the “thin” sense of the word, it refers to anyone who is “not an amateur.” Thus, we have professional basketball players, professional actors, professional musicians, and the like. However, in its “thicker” and more relevant sense, it refers to the classical learned professions of law, medicine, and the clergy.

These classical learned professionals emerged in the late Middle Ages when the overwhelming majority of people were illiterate. In that society, there arose groups of individuals who could read and write and thus able to provide needed services for those who could not. Three such groups were attorneys, physicians, and the clergy. Attorneys were able to draft contracts for the legal exchange of goods and
property; physicians were able to read and study, thus learning of medicaments and procedures to palliate or cure disease; and members of the clergy were able to study and interpret scriptures.

These groups of individuals had access to knowledge that the average human being lacked. As a result, they possessed special power, since knowledge is power. Barristers or attorneys had power over property; physicians had power over physical well-being; and the clergy had power over divine providence. Because of this power based in knowledge, lay people had to trust that these three groups of individuals would use their knowledge in the public’s best interest. As a consequence, attorneys, physicians, and members of the clergy professed that they would always use their knowledge, and its associated power, to further not their own interest, but rather the best interests of their clients, patients, and parishioners. The word “profess” means to promise or to vow. The foundational notion of a professional is one who has taken a vow or made a promise. Thus, the concept of the professions and learned professionals emerged in human society: learned professionals are individuals with sophisticated but practical knowledge, who are able to assist members of society in pursuing significant and important goals in life and, as importantly, individuals who are committed to using their knowledge and skills in the best interest of members of society seeking their assistance.

Abraham Flexner, a public intellectual and major reformer of medical education in the early part of the twentieth century, identified the characteristics of learned professionals. His identifying characteristics have endured until today: the work of professionals is primarily intellectual; their work is based in science and learning; their work is also practical; their work can be taught and learned through education beyond the usual level; they organize into democratic collegial units; and they exist to achieve societally defined goals, rather than the self-interest of their members. The power that professionals have over others requires that those who seek their help are able to trust that these individuals will do what is in the individual’s best interest—always to benefit, never to exploit. Professionals place their client/patient’s welfare above their own, as the knowledge they possess could be used both for and against the individual.

The profession of dentistry has been granted significant respect by society, earned by their predecessors in the profession as a result of their purity of purpose; this tradition of service is reflected in moral integrity. Society developed respect for dentistry as the profession gave preeminence of purpose to preventing oral disease, not just treating it. Dentistry led all of medicine in focusing on preventive health. For instance, the profession advocated strongly, and continues to do so, for fluoridating community water supplies, which

primary purpose. Dentistry as a profession serves the end of human well-being: oral health for individual patients and for the larger society. While, as professionals, dentists derive financial gain from their life’s work, it is truly derivative, a byproduct of fulfilling the promise or vow made in becoming a professional. A profession is a way of life, a vocation, not only or simply a way of making a living.

Is the white coat simply a sign of changed status from ordinary student to one now engaged in professional education to become a health professional, or is it a symbol of a more profound transformation? German-American theologian and philosopher Paul Tillich wrote persuasively of the power of symbolism, emphasizing the need to differentiate between a sign and a symbol. For Tillich, a symbol participates in the power of that which it symbolizes. A symbol expresses a deep and profound truth, in contrast to a sign, which simply identifies. For example, one of the first images immigrants to the United States from Europe in the nineteenth century saw on arrival was the Statue of Liberty. While the Statue of Liberty could be understood as simply a sign they had arrived in New York harbor, it expressed, and continues to express, a far deeper and more powerful meaning: that America is a land of liberty, of freedom, of opportunity. When students wear a white coat in the halls and clinics of academia, it is a sign of being a health professions student; however, this sign function does not fully convey its power or its meaning. Rather, the white coat is best understood as a symbol and a powerful one at that. But a symbol of what?

The coat worn by health professionals is white because white is a symbol of purity. The white coat that entering student dentists don is a symbol of the purity of purpose being affirmed as a health professional: their commitment to the oral health of individual patients and society. While dentists possess power over patients seeking their care, the profession’s purity of purpose requires that dentists’ knowledge always be employed in promoting the best interest of patients.

Dentists are afforded significant respect by society, earned by their predecessors in the profession as a result of their purity of purpose; this tradition of service is reflected in moral integrity. Society developed respect for dentistry as the profession gave preeminence of purpose to preventing oral disease, not just treating it. Dentistry led all of medicine in focusing on preventive health. For instance, the profession advocated strongly, and continues to do so, for fluoridating community water supplies, which
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when introduced in the 1940s and ‘50s resulted in dramatic reductions in the prevalence of dental caries. Dentists continue to encourage patients to adopt multiple preventive strategies to prevent disease. Society has expressed admiration for a profession that has worked so diligently to reduce the diseases it treats to its own potential financial detriment. Dentistry’s history as a profession is one of purity of purpose, working to ensure that the oral health of patients is a priority. Another way of expressing it is that dentists have traditionally understood their patients as ends in themselves, not only or simply a means to the ends of the dentist. This understanding comports with Immanuel Kant’s moral imperative: “Act in such a way that you always treat humanity, whether in your own person or in the person of any other, never simply as a means, but always at the same time an end.”

Jewish theologian Martin Buber spoke of the “I-Thou” relationship between individuals and distinguished it from an “I-It” one. According to Buber, human beings may adopt two attitudes toward others. In an I-Thou relationship, one fully engages one’s whole self with the other person as a unique human being deserving of respect, to be related to as an end in itself not as a means to one’s own ends. It is a relationship of reciprocity and mutuality, one of subject to subject in which there is a meaningful experiencing of the other. In contrast, an I-It relationship is one in which the other is treated as a thing, a what, not a who. Buber speaks of “thingifying” others: treating another as a thing to be used as a means to achieve one’s own ends or purposes, in a relationship of separateness and detachment, of subject to object. As things, people—in dentistry’s context, patients—are viewed as objects of action rather than subjects. Patients must be understood and acknowledged as ends in themselves, not simply means to the dentist’s personal ends.

In his book Social Intelligence, Daniel Goleman, the well-known author of Emotional Intelligence, discusses the significance and importance of Buber’s understandings. He says that the I-It relationship implies the most superficial of relationships. The emotional indifference and remoteness of an I-It relationship implies the most superficial of relationships. The emotional indifference and remoteness of an I-It relationship is one in which the other is treated as a thing, a what, not a who. Buber speaks of “thingifying” others: treating another as a thing to be used as a means to achieve one’s own ends or purposes, in a relationship of separateness and detachment, of subject to object. As things, people—in dentistry’s context, patients—are viewed as objects of action rather than subjects. Patients must be understood and acknowledged as ends in themselves, not simply means to the dentist’s personal ends.

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A meaningful, purposeful existence is something cherished. It has been said that life is for learning, loving, and leaving a legacy. Dentists spend an extraordinarily large portion of their days and hours focused on professional work. Continually learning from the expanding scientific base that supports has a sense of feeling felt. It is notable that Arnold Gold, in establishing the first white coat ceremony, wanted the ritual to give tangible expression to the importance of empathy in the doctor-patient relationship. He understood a powerful truth: that empathy is the quality of the health professional that ensures a humanistic approach to care.

Dentists are called to care for patients—not in the sense of managing or handling something, as in “you take care of that,” but rather in the sense of being genuinely concerned for the welfare of patients. There is increasing discussion in the health professions literature regarding the importance of empathy as a critical quality of a health professional. Empathy is an imperative for an ethics of caring. By contrast, a practitioner who uses and manipulates patients, who values patients and their oral health only because it enables the dentist to achieve his or her financial ends/goals, who adopts an I-It relationship with patients rather than an I-Thou one, dehumanizes the professional relationship. The distinguished physician and medical educator Dr. Francis Peabody, in a classic article published in 1927, cautioned that while “the treatment of a disease may be entirely impersonal, the care of a patient must be completely personal.” He went on to say, “One of the essential qualities of the clinician is interest in humanity—for the secret of the care of the patient is in caring for the patient.”

We are all concerned with purposeful existence—of living a life filled with meaning and purpose. In his internationally bestselling classic Man’s Search for Meaning, Austrian psychotherapist Viktor Frankl documents the trauma of his years in Nazi concentration camps. This trauma led him to a pivotal understanding of human existence, which provided the foundation for his work in psychotherapy for the remainder of his life. The foundation of his therapeutic approach, which he called “logotherapy” or “meaning therapy,” is the imperative for humans to create a deep and abiding sense of meaning for their lives, since humans “concern about a meaning of life is the truest expression of the state of being human.” Humans need a reason to live, a meaning for life, a purpose. Nietzsche expressed this idea as “He who has a why to live can bear with most any how.”

A meaningful, purposeful existence is something cherished. It has been said that life is for learning, loving, and leaving a legacy. Dentists spend an extraordinarily large portion of their days and hours focused on professional work. Continually learning from the expanding scientific base that supports
clinical endeavors in order to provide the highest quality care possible, and loving patients and society by empathically caring for their oral health, will permit reflecting on their lives in such a manner as to acknowledge that life has been lived with a sense of purpose—and a personal legacy that has been left.

Student dentists should come to understand that accepting the mantle of the white coat is not just a sign that they are students of this health profession, but an enduring symbol of their profession’s purity of purpose—placing the interests of patients first and foremost, above self-interest. In joining the profession of dentistry, students make the vow that has been made by all true learned professionals for centuries: “I promise to always treat those who seek my care as ends in themselves, placing their interests and welfare above my own; and I promise never to treat them simply as a means to my personal ends or goals.” In doing so, patients will come to know and understand that dentists can be trusted with their well-being. The power conveyed by knowledge makes trust the quintessential quality of a learned professional.

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