



KM Seedat lecture 2025

Voluntary Vulnerability

Julia Blitz



CMSA

The Colleges of Medicine of South Africa

In Memoriam

KASSIM MOHAMED SEEDAT

L.M.S.S.A. (LOND.), M.R.C.S. (ENG.), L.R.C.P. (LOND.)

Dr H. N. Desai, of Durban, writes:

Dr K. M. Seedat died in Durban, on 10 August 1976, at the age of 79 years.

Kassim Mohamed was born in Newcastle on 20 February 1897 and was first educated at Newcastle Primary Convent School and later at a secondary school in Surat, India. After matriculation he attended the Grant Medical College, Bombay, India, where he graduated in medicine in 1920. He practised in India from 1920 to 1927 and then proceeded to London where he attended Charing Cross Hospital and obtained his L.R.C.P. and M.R.C.S. in 1930. He worked in various hospitals in England for 3 years. He returned to South Africa in 1930 and entered general practice in Durban. He was one of the first Indian doctors in South Africa and thus opened the way for others.

K.M., as he was popularly known to the Indian community, rendered invaluable service for 44 years. During a malaria epidemic in Natal he worked almost 24 hours a day at times, together with a band of volunteers and nurses. He obtained money from the Sorabjee Rustomjee Trust and donated free medical supplies in Tongaat, Stanger and other outlying areas. This endeared him to the Indian community.

From then onwards, he always took an active interest in the education and welfare of the Indians in South Africa. He helped in establishing the St Aidan's Hospital Trust and,



together with the Revd. Satchell, collected £50 000 from the Indian community. This must be seen against a background of the economic hardships of the Indians and the poor health care system provided by the authorities in those early days. Today, this hospital plays a leading role in the health of not only the Indians, but also of the Blacks in Durban.

He was also associated with various non-medical organisations. He contributed generously to various educational and religious organisations such as Sastri College, the Orient Islamic Institute, M. L. Sultan Technical College and the Indian Centenary Fund — institutions which have played a leading role in uplifting the Indians in South Africa. He served on the Advisory Council of the University of Durban-Westville from 1966 until it was dissolved recently.

He retired from active practice a few years before his death. He created the K. M. Seedat Charitable Trust and left a substantial sum of money for furthering education. He particularly requested that the money should be used for the purpose of granting bursaries to South Africans of all races and creeds intending to pursue medical studies either at under- or post-graduate level.

K.M. was a warm, kind-hearted man whose outstanding attribute was his concern for his fellow men. He is survived by his wife and two sons who are specialists in medicine in Durban and a daughter who is practising law in Natal.



**Pledge by Diplomates, Fellows, and Certificants
to be admitted as a member of
The Colleges of Medicine of South Africa**

The Colleges of Medicine of South Africa is dedicated to promoting the highest degree of skill and efficiency in medical and dental practice, and to cultivating the highest ethical standards and professional conduct for the betterment of humanity.

- I shall always advance and uphold the core ethical values of social justice and health equity.
- I shall always act in the best interests of my patients and respect their autonomy and rights and treat them with care and compassion.
- I shall never allow considerations of financial reward, career advancement, or reputation to compromise my judgement or care to my patients.
- I shall continue to advance my knowledge and skills to offer my patients the best care.
- I shall continue to learn and teach for the benefit of my patients, my trainees, my community, and my country.
- I shall respect my mentors and colleagues, and readily offer them assistance and support.
- I undertake to support the mission of the Colleges of Medicine of South Africa and to abide by its code of conduct.

I shall continue to learn and
teach for the **benefit** of my
patients, my **trainees**, my
community, and my country.

40 years ago (1985) – the first programme for **vocational training in Family Medicine**

The academic curriculum was the MEDUNSA M Fam Med



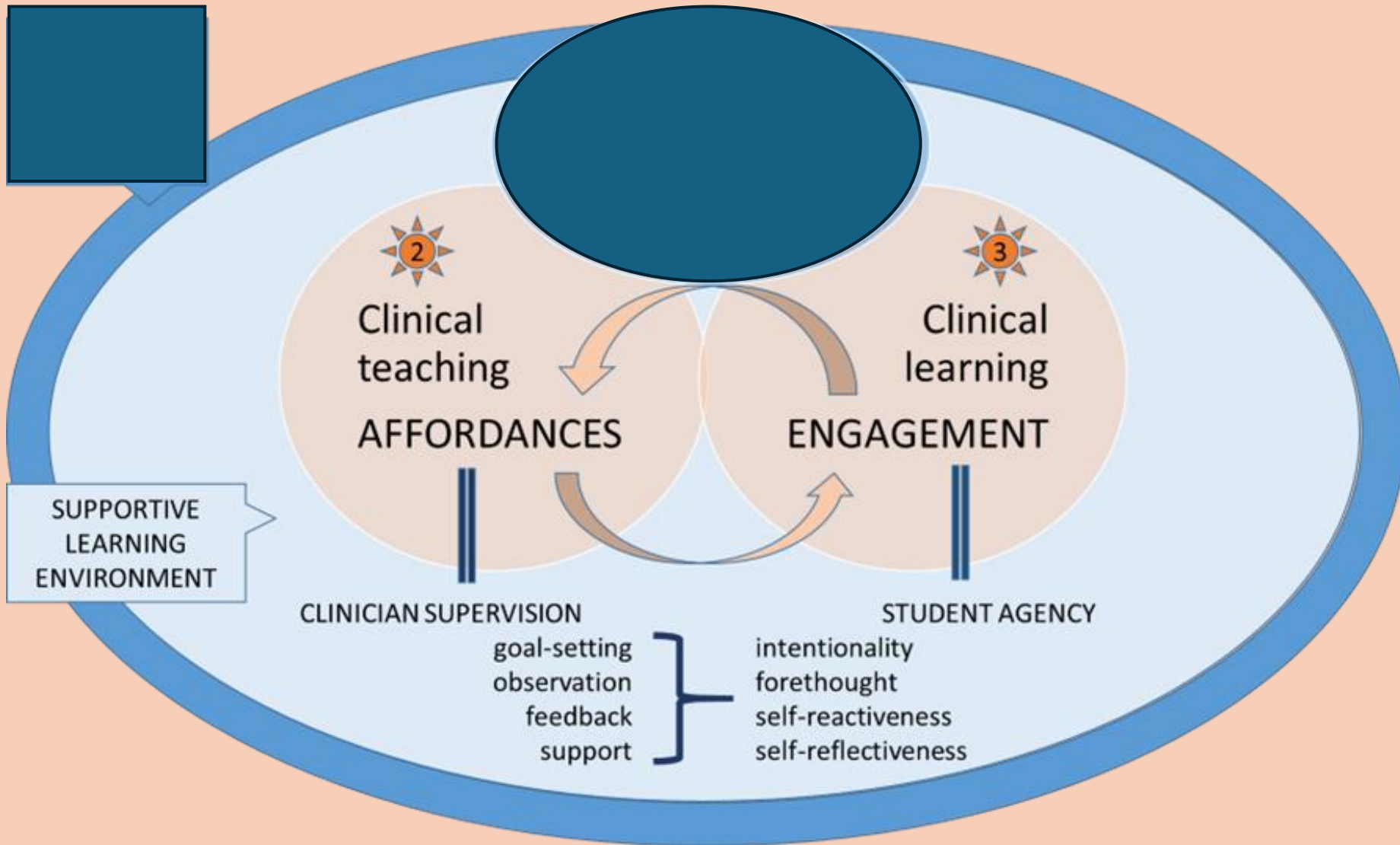
MEDICAL UNIVERSITY
OF SOUTHERN AFRICA



MEDUNSA

27 years ago (1998) we launched FaMEC (**inter-university collaboration on educational matters**)





Two metaphors for learning (Sfard)

Acquisition

- individual construction of knowledge, independent of context, which may then be used and shared

Participation

- learning happens in a particular context in which there is a mutuality of the student, other students and the teacher(s)

Affordances

Clinical supervision:

- Goal setting
- Observation
- Feedback
- Support

Engagement

Student agency

- Intention
- Forethought
- Self-reactiveness
- Self-reflectiveness

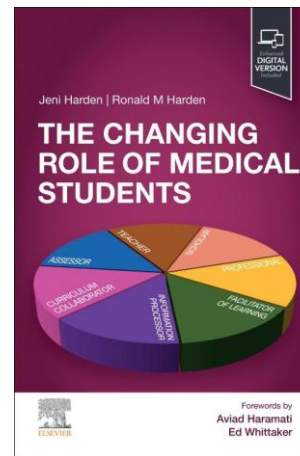
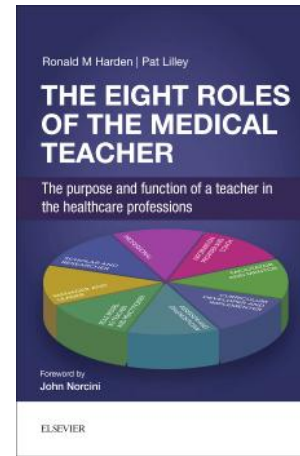


Proxy

Collective

Roles of the **teacher**

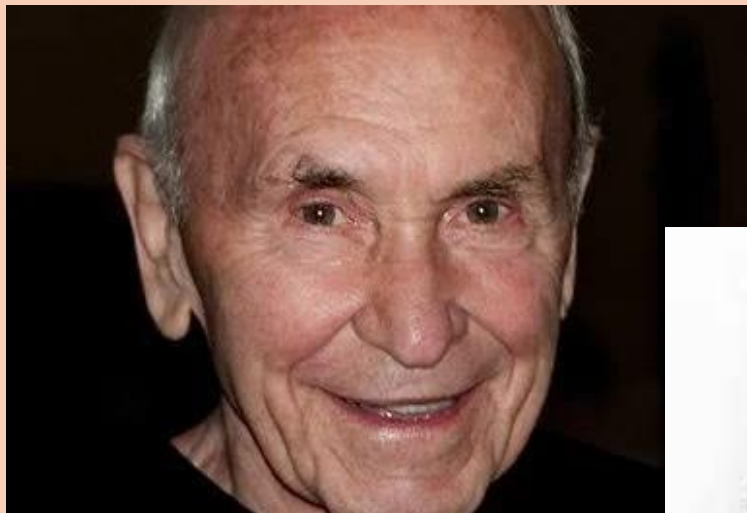
- Professional
- Facilitator and mentor
- Information provider and coach
- Assessor and diagnostician
- Scholar and researcher
- Role model as teacher and practitioner
- Curriculum developer and implementer
- *Manager and leader*



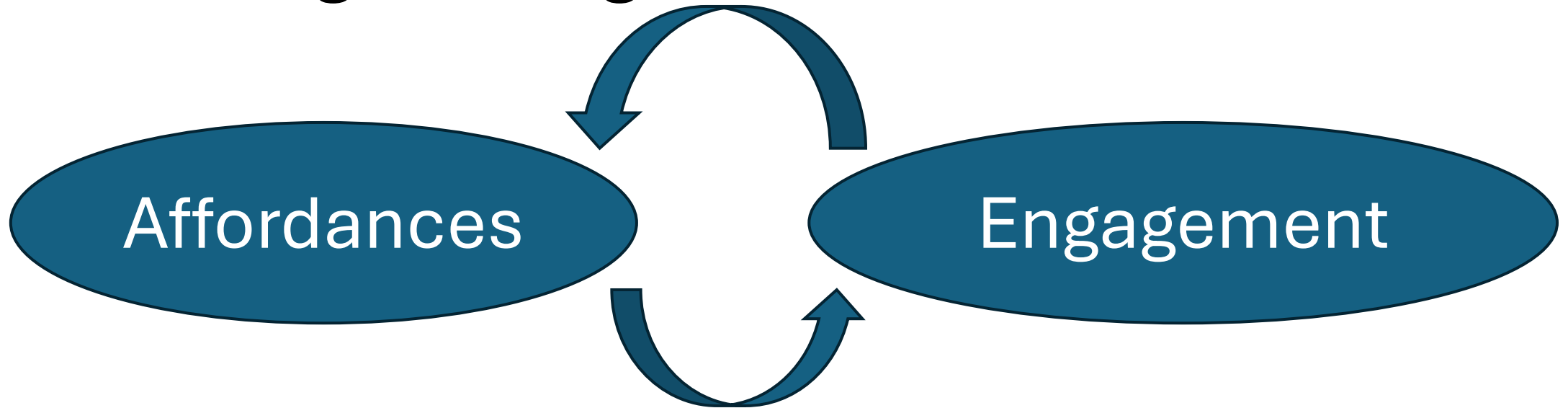
Roles of the **student**

- Professional
- Facilitator of their learning
- Information processor
- Assessor
- Scholar
- Teacher
- Curriculum collaborator

Learning



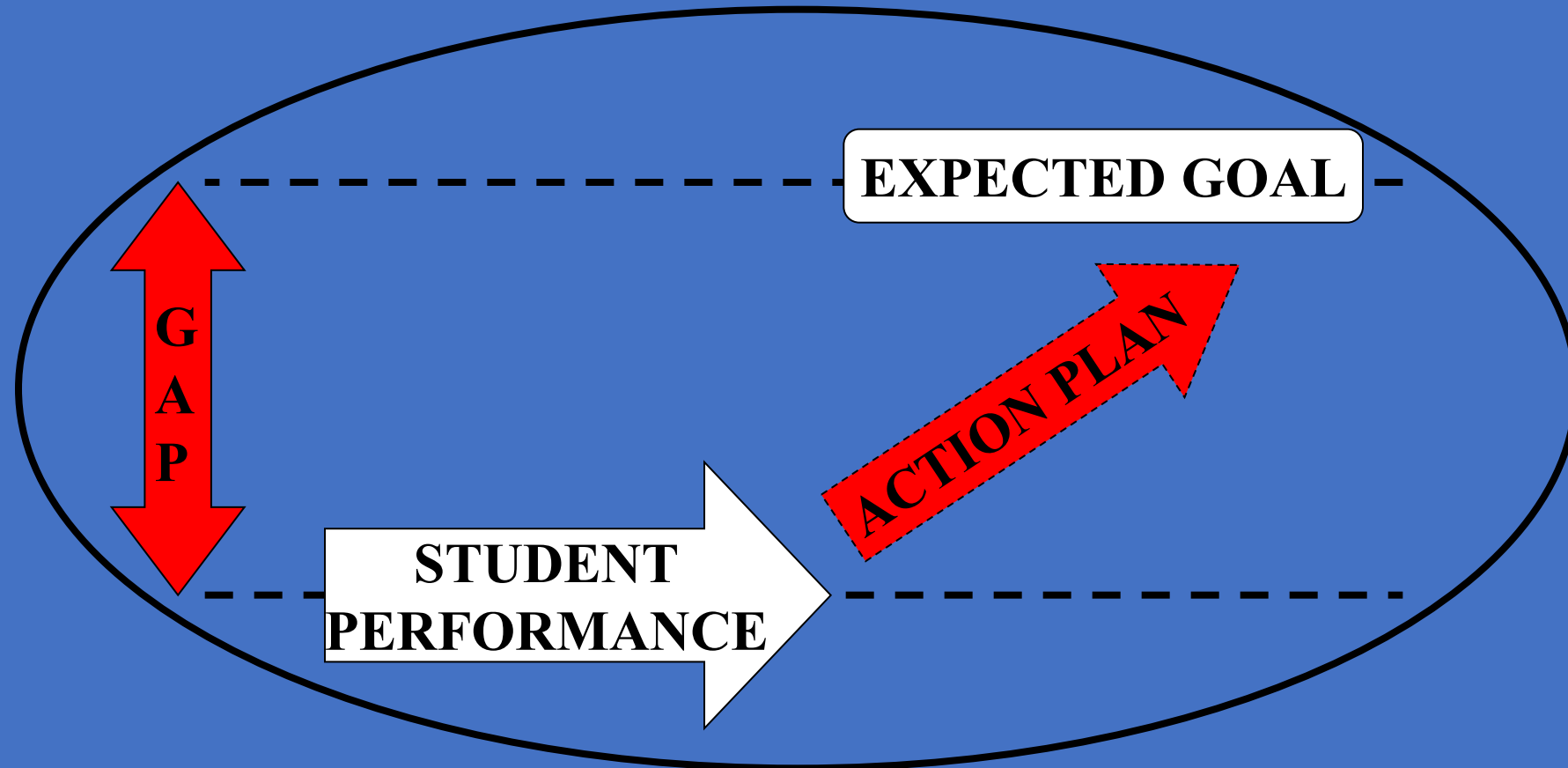
Facilitating learning



“Feedback is often an emotional endeavor, because it is bound up with appraisals, evaluations, grades, and, sometimes, failure.”

Carless

OBSERVATION IN CONTEXT



FEEDBACK:

Identification of gap AND Development of action plan

Self-assessment

Feedback has the potential to be a process where our own goals and self-judgements direct our next moves.

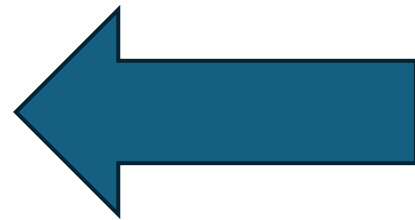
However, our self-assessment is not always reliable, and so external sources help us to calibrate.

The necessity for assessment and judgement in learning seems to evoke a potential for vulnerability in feedback conversations

Observations

Reflections

Assessments



Requisite
vulnerability

Vulnerability's close cousin is shame

Shame = when an individual assesses themselves to be deficient, incompetent and/or unworthy

Shame **triggers** were the specific events that sparked shame reactions, including interpersonal interactions (eg, receiving mistreatment) and learning (eg, low test scores).

Shame **promoters** were the factors and characteristics that fuelled shame reactions, including those related to the individual,
institutional environment
person-environment interaction (eg, comparison with others)

But, vulnerability's other close cousin is courage

Despite perceived risks or vulnerabilities:

- professional (e.g., lost job or opportunity for advancement),
- social (e.g., damaged reputation or relationships),
- psychological (e.g., shattered confidence)

Those who display vulnerability are seen as **courageous**:

- those who move toward negative feedback or problems that their role would have allowed them to easily avoid,
- asking for and accepting help,
- admitting they don't know it all,
- apologizing publicly,
- showing emotions like sadness or fear.

Vulnerability is courage in you, but shame in me

We see other people's honesty about their flaws as positive, but we consider admitting our own failures much more exposing.

We understand other people's experiences abstractly, but see our own very concretely and feel them intimately and physically.

We all understand in theory that bad things can happen. But we also feel really bad when they happen to us, and condemn ourselves.

Growth mindset



Can we create **voluntary** vulnerability

... make a *conscious, mindful* choice to be vulnerable?

What might help?

INTELLECTUAL CANDOR

SUMMARY

Intellectual candor, sometimes called “intellectual streaking” in the general education literature, refers to the verbalization of thinking, extemporaneously, about a genuinely complex problem or situation.

When undertaken by an instructor, this **improvisational** activity can be **evocative**, promote **dialogues** with learners, and role model effective thinking.

However, given its improvisational nature, intellectual and other kinds of candor involve **vulnerability** and the **risk of losing credibility**.

These features **give candor the power to build connection** and create better learning environments; however, given the associated risks, candor should typically be a strategy that instructors use **purposefully**.

KEY IDEA



Credibility refers to a state in which one individual “believes” another. While in many cases it is related to competence, it is a distinct construct, since it can only be conferred on us by others and can both be conferred in the absence of competence or not conferred even when competence is present.

Intellectual candor is a dance at the inflection point between vulnerability and credibility. It involves purposefully balancing the need for credibility with the strength found in vulnerably presenting one’s reasoning in complex situations. This concept can also be extended to domains beyond intellectual disclosures.

Vulnerability, broadly, refers to the state of being open or exposed in a way that absorbs risk of loss or harm. While required for deep connection, for learning (e.g., gap exposure), and for trust, the over-exposure of imperfections and uncertainties can hinder others from conferring credibility on us.

@MedEdModels

Relationship

Safety

Consistency

Trust

Capability

Agency



Mattering

Mattering

Adding value

Being valued

Building self-regulation

~~Involuntary
vulnerability~~

Trust

Courage

Growth

Productive
struggle

Voluntary
vulnerability

*We believe that in the long run the special contribution to the world by Africa will be in **this field of human relationship**. ... the great gift still has to come from Africa – giving the world a more human face*

(Steve Biko, I write what I like, 1978:46)

Africanise our clinical training

Give the necessary struggle of the learning journey a more human face

