

MEDICAL, ACADEMIC, OR HONOURARY: A CRITICAL ANALYSIS OF THE RIGHT TO THE 'DR.' TITLE

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Abstract

The title “Dr.” carries profound social prestige and professional authority, yet its use is marked by complexity and controversy across medical, academic and honorary contexts. This paper critically examines the historical evolution, legal frameworks, ethical considerations, and cultural perceptions surrounding entitlement to the “Dr.” title. The paper also highlights how the conflation of medical and academic credentials often leads to public confusion and debates over legitimacy while honorary doctorates introduce symbolic recognition that further complicates the landscape. Through a multidisciplinary lens, this study explores how transparency, ethical stewardship and regulatory clarity can reconcile these tensions and uphold the integrity of the title. Ultimately, the paper argues that respecting diverse global practices while fostering clear communication about qualifications is essential to maintaining public trust and honouring the rightful achievements embodied by the “Dr.” designation.

Keywords: Medical, Academic, Honorary, Right, 'Dr.' Title, Global Perspectives, Cross-Cultural Practices, Legal Considerations, Misrepresentation

Introduction

The title “Dr.” is one of the most universally recognized professional titles and carries with it a sense of authority, credibility and expertise. Its historical origin can be traced to the Latin word *docere*, meaning “to teach,” and was first conferred in medieval universities on scholars in theology, philosophy and law (Kremer, 2019). Over time, the title was adopted by medical practitioners, creating a dual heritage of the designation in both academic and clinical contexts. This duality has persisted into the modern era, but with it has come increased ambiguity and contestation over who is entitled to bear the title.

In contemporary society, the use of “Dr.” is most commonly associated with medical doctors. The general public often assumes that the title refers to someone with clinical training capable of diagnosing and treating illness. This perception is reinforced by media portrayals and the vital social role played by healthcare professionals (Nguyen, 2020). However, individuals who earn doctoral degrees through academic research such as the Doctor of Philosophy (PhD), Doctor of Education (EdD), or Doctor of Science DSc also have the legal and institutional right to use the title. Despite this, non-medical holders of the title often face social confusion and diminished recognition outside academic settings (Walker, 2010). The Doctor of Philosophy covers a wider range of academic fields, the EdD covers

Education, leadership and policy while DSc covers Advanced scientific disciplines.

Further complicating the discourse is the widespread conferment of honorary doctorates by universities and other institutions on individuals who are neither medical practitioners nor earned the title by academic qualification. These are awarded to individuals for their contributions to public service, philanthropy, or the arts. Although some honorary doctorate recipients choose to use the title “Dr.” and it has been argued that this practice is contentious, as it may be perceived as equating honorary recognition with earned academic or professional qualifications (Smith & Johnson, 2018). The lack of uniform guidelines on honorary title usage contributes to the dilution and potential misuse of the title. Evans (2017) perceived that legal and ethical framework regarding the use of “Dr.” vary across jurisdictions. In some countries, the title is protected and reserved for those with verified doctoral qualifications. In contrast, countries such as Nigeria have seen widespread informal use of the title, sometimes by individuals lacking legitimate credentials, raising concerns about academic integrity and professional transparency (Obasi, 2022). Smith and Johnson (2018) posited that misrepresentation of credentials, especially in clinical or academic contexts can have serious implications for public trust and safety. Given these complexities, the use of the title “Dr.” warrants critical examination. The blurred boundaries between professional, academic and honorary claims to the title have created confusion and controversy that affect professional identity, social trust, and institutional credibility. A robust investigation into the history, legitimacy, and ethical considerations surrounding the use of “Dr.” is essential for clarifying its rightful use and maintaining its value as a symbol of earned distinction.

Theoretical Framework

The study is hinged on the 1972 Social Identity Theory (SIT) of Henri Tajfel. Social Identity Theory offers a framework for understanding how individuals define themselves in relation to their group memberships. This theory explores how a person’s self-concept is deeply tied to their affiliation with social groups. These memberships provide individuals with a sense of belonging and significantly influence their self-esteem and behaviors by fostering a positive identity within the broader social structure. The theory posits that people strive to enhance or maintain their social standing by elevating the status of their own group while potentially devaluing others. This dynamic explains intergroup competition, stereotyping, and bias, as individuals and groups continually assess their comparative positions. Tajfel’s idea of social creativity highlights how groups reinterpret disadvantages into unique strengths, enabling them to sustain pride and identity without direct confrontation.

Henri Tajfel posited that individuals derive a significant portion of their self-concept and social value from the groups to which they belong. Titles serve not merely as professional identifiers, but as symbols of social status, expertise,

and group membership. This theory is particularly relevant in analyzing how individuals who hold medical, academic, or honorary doctorates identify with their respective communities and how they are perceived by the public. In the context of this study, the “Dr.” title functions as a mark of identity that can confer social privilege and legitimacy. Medical doctors often derive their professional authority from the trust placed in their expertise, while academic PhDs gain status within scholarly communities.

Honorary doctorate recipients may also associate with the prestige of academia despite the symbolic (rather than earned) nature of their title. The competition or confusion over who “deserves” the title reflects a struggle for social recognition and the maintenance of group boundaries. Moreover, Social Identity Theory explains why misuse or ambiguous use of the “Dr.” title can lead to tension, as it threatens the distinctiveness and credibility of each identity group. When honorary title holders or professionals in unrelated fields adopt the title without clarification, it can provoke resistance from those who have undergone rigorous training, viewing it as a form of identity infringement. This tension underscores the need for clear norms, institutional guidelines, and public awareness.

Historical Evolution of the ‘Dr.’ Title

The title “Doctor” originates from the Latin word *docere*, meaning “to teach,” and was first used in the academic domain during the Middle Ages. According to Kremer (2019), the earliest use of the title was in European universities such as Bologna, Paris, and Oxford, where it was conferred upon scholars who attained the highest level of learning in theology, law and philosophy. These early doctorates were not linked to any practical profession but served to recognize the authority and expertise of learned individuals capable of teaching and advancing knowledge. Over time, the use of the title expanded to include the field of medicine. By the Renaissance period, university-trained physicians began to adopt the title “Dr.” to distinguish themselves from other practitioners like barbers or herbalists (Porter, 1997). This marked a significant transition as medicine gradually became more institutionalized and science-based. The medical profession’s adoption of the title helped consolidate its status as a learned and respectable field, especially as formalized training and licensing became the norm in Europe and North America during the 18th and 19th centuries.

The modern academic doctorate, particularly the Doctor of Philosophy (PhD), was standardized in the 19th-century in Germany and later adopted by Anglo-American universities. As Walker (2010) noted, the PhD was modeled after the German *Doktor der Philosophie* and emphasized original research and critical inquiry. Its expansion across disciplines signaled a return to the original scholarly purpose of the “Dr.” title. Despite this, the growing dominance of medical professions in the public eye led to a reorientation of the title’s popular meaning, often privileging clinical over academic associations. In recent decades, new types of doctorates including professional and honorary degrees have further diversified

the use of the title. McClaren (2021) pointed out that the introduction of applied doctorates like the Doctor of Education (EdD) and Doctor of Business Administration (DBA) reflects a practical turn in doctoral education. Meanwhile, honorary doctorates, typically awarded for non-academic achievements, have raised concerns about the dilution of the title's scholarly value (Smith & Johnson, 2018). These developments underscore the complexity and evolving nature of the "Dr." title, which continues to straddle the line between academic distinction, professional authority and ceremonial honor.

Medical Practitioners and the 'Dr.' Title

The association between the title "Dr." and medical practitioners is arguably the most recognized and entrenched in modern society. This widespread association is rooted in the professionalization and institutionalization of medicine in the 18th and 19th centuries. During this period, university-based training and licensing became essential to medical practice, helping to distinguish academically trained physicians from traditional healers and unlicensed practitioners. According to Porter (1997), the adoption of the "Dr." title by physicians was part of a broader strategy to legitimize medicine as a scientific discipline and to elevate its social standing. In many countries, medical degrees such as the Doctor of Medicine (MD), Bachelor of Medicine and Bachelor of Surgery (MBBS), and Doctor of Osteopathic Medicine (DO) confer the legal and professional right to use the title "Dr.". While the MD is often a postgraduate research degree in countries like the UK, in the United States and many Commonwealth nations, it is primarily a professional degree awarded upon completion of medical school (Pusey, 2020). Despite this variation, both routes grant the authority to practice medicine and the accompanying right to use the title, reinforcing its public identification with healthcare professionals.

The use of the "Dr." title by medical practitioners is further reinforced by cultural and media representations. Television, film, and literature consistently portray doctors as the archetypal bearers of the title, often neglecting academic or other professional doctors (Nguyen, 2020). This representation contributes to a societal perception that equates "Dr." almost exclusively with clinical competence and medical authority. While this strengthens the public trust in physicians, it also creates confusion when individuals from other disciplines use the same title. Despite their prominence, medical doctors are not the only professionals who earn doctorates or deserve the title. However, some in the medical field have resisted the broader use of the title by non-physicians, particularly in healthcare environments where patients might assume clinical qualifications. For example, nurse practitioners or psychologists with doctoral degrees may face criticism or legal restrictions for using the title "Dr." in clinical settings, even when their credentials are legitimate (Caldwell, 2019).

Such restrictions are usually intended to protect patients from misrepresentation, but they also reveal underlying tensions about professional hierarchies and the

meaning of the title. Ultimately, the use of “Dr.” by medical practitioners is both a marker of qualification and a symbol of public trust. While the title is rightly earned through years of rigorous training, its use in clinical contexts must be balanced with ethical clarity and legal transparency. As Evans (2017) notes, regulatory frameworks play a crucial role in maintaining the integrity of the title within medicine, ensuring that it reflects genuine competence and fosters responsible communication with patients and the public.

Academic Entitlement to 'Dr.' Title

The title “Doctor” has its earliest roots in the academy, long before its widespread association with medicine. Originating from medieval European universities, the title was first conferred upon scholars in theology, law, and philosophy who had attained the highest levels of study and were deemed qualified to teach at the university level (Kremer, 2019). In this context, the title “Dr.” was a formal recognition of scholarly authority and intellectual accomplishment. Academic doctorates were designed to reflect rigorous training in research and pedagogy, grounded in critical inquiry and the advancement of knowledge. In the modern era, the Doctor of Philosophy (Ph.D) and other research doctorates (e.g., EdD, DSc, ThD) remain the highest academic qualifications awarded by universities globally. According to Walker (2010), recipients of academic doctorates earn the right to be called “Dr.” upon successful defense of a dissertation that makes an original contribution to knowledge. This entitlement is not symbolic but is rooted in established academic norms that recognize the intellectual labor and expertise involved in doctoral research. It is also reinforced by university statutes and international academic protocols. Despite this formal recognition, academic doctors often face ambiguity outside educational and research institutions, especially in cultures where the title “Dr.” is assumed to denote a medical qualification. As Obasi (2022) notes in the Nigerian context, PhD holders are sometimes required to explain or justify their use of the title, particularly in professional or social spaces where the medical meaning dominates public understanding. This misunderstanding can contribute to the devaluation of academic titles and marginalize the scholarly community’s contributions to societal development.

Furthermore, there is a growing tension between academic entitlement and professional perception. Some critics argue that the PhD does not have the same direct public utility as a medical degree, and therefore, its bearers should avoid using “Dr.” in non-academic settings to prevent confusion (McClaren, 2021). However, this view fails to acknowledge the original and ongoing legitimacy of academic doctorates. It also overlooks the societal importance of research, critical thinking, and intellectual leadership hallmarks of doctoral training that impact policy, education, science, and technology.

The academic entitlement to the title “Dr.” is therefore not only historically grounded but also functionally justified. Universities, as the institutions conferring

these titles, uphold rigorous standards that ensure recipients have demonstrated exceptional expertise in their fields. To undermine this entitlement is to ignore the foundational role of scholarship in shaping human advancement. As Suchman (2016) asserts, the Ph.D title represents not just personal achievement, but also a public commitment to truth-seeking, ethical inquiry, and lifelong learning.

Honorary Doctorates and Symbolic Recognition

Honorary doctorates are academic degrees awarded to individuals in recognition of their outstanding contributions to society, rather than through the completion of formal coursework or academic research. These degrees often designated as *honoris causa* (for the sake of honor) are conferred by universities to acknowledge achievements in fields such as public service, the arts, philanthropy, business and humanitarian work (Smith & Johnson, 2018). While they carry the same ceremonial title as earned doctorates, they do not reflect scholarly attainment in the traditional academic sense and are generally not considered equivalent in professional or academic settings. The practice of awarding honorary doctorates dates back to the 15th century, with the University of Oxford reputedly conferring the first such degree. Over time, this tradition has become a powerful way for universities to align themselves with notable figures and to highlight societal values such as innovation, leadership and service (McClaren, 2021). According to Brennan and Pritchard (2020), honorary degrees serve both symbolic and strategic functions: they celebrate distinguished individuals and also enhance the prestige of the granting institution by associating it with excellence.

Despite their celebratory purpose, honorary doctorates have generated considerable debate regarding the legitimacy of their titleholders' use of "Dr." Critics argue that since honorary degree recipients have not fulfilled the rigorous academic requirements of a doctoral program, they should refrain from using the title to avoid misleading the public (Evans, 2017). In some cases, recipients who use the "Dr." prefix without clearly indicating the honorary nature of their degree face public backlash or accusations of pretension, especially in academic and professional circles. In response to these concerns, some universities and professional bodies issue explicit guidelines on the use of honorary titles. For instance, it is often recommended that recipients write "Honorary Doctorate" or use post-nominals such as "Hon. D.Litt." rather than adopting the "Dr." prefix in formal communications (Adeyemi, 2019). These recommendations are aimed at preserving the integrity of earned doctorates and preventing title inflation or confusion. However, not all institutions enforce such policies, leading to inconsistencies in the perception and use of honorary doctorates globally.

Nonetheless, honorary degrees continue to play a valuable role in society as they offer institutions a mechanism for celebrating individuals who embody values worth emulating and provide inspiration to graduates and the public. As Suchman (2016) argues, the symbolic power of honorary doctorates lies not in the

academic achievement they represent, but in the ideals they honor commitment to excellence, societal impact, and visionary leadership. When used transparently, honorary degrees can coexist with earned doctorates without undermining academic rigor.

Legal Considerations and Misrepresentation

The use of the title “Dr.” is not only a matter of professional convention but also of legal significance especially where misrepresentation can lead to public harm or confusion. In many jurisdictions, the unauthorized or deceptive use of the title “Dr.” may constitute a violation of consumer protection laws, professional licensing regulations, or fraud statutes. According to Evans (2017), legal frameworks in several countries, including the United States and the United Kingdom, have established boundaries for who may legally use the title in specific contexts, especially in healthcare, where patient trust and safety are paramount. One of the main legal concerns arises when individuals with non-medical doctorates use the title “Dr.” in clinical or health-related settings, potentially misleading the public into believing they are licensed medical practitioners. In some U.S. states, it is a misdemeanor for someone with a PhD in psychology or nursing to introduce themselves as “Dr.” without clearly indicating their specific qualifications (Caldwell, 2019). Such laws aim to protect patients from misdiagnosis, improper treatment, or overestimation of a person’s medical authority, even when the individual holds a legitimate doctoral degree in a non-medical field.

In academic and non-clinical contexts, however, legal restrictions on the use of “Dr.” are rare, and the title is generally regarded as a professional courtesy or academic entitlement. Nonetheless, honorary doctorate recipients using the title without clarification can stir public controversy and, in some cases, trigger legal or institutional scrutiny. According to Smith and Johnson (2018), some universities explicitly discourage honorary degree holders from using the “Dr.” prefix to avoid allegations of academic dishonesty or credential inflation, although enforcement mechanisms vary widely between institutions and countries. Ultimately, the legal implications surrounding the use of the title “Dr.” underscore the need for transparency and context. While holding a doctoral degree whether academic, medical, or honorary confers certain rights and recognition, using the title responsibly is essential to maintaining public trust. Legal systems tend to focus not on the possession of the title per se, but on its potential to deceive or cause harm if used ambiguously or misleadingly (Adeyemi, 2019). Thus, clearly specifying one’s field and qualifications remains a best practice, both ethically and legally.

Ethical Implications and Public Perception

The ethical considerations surrounding the use of the title “Dr.” centers primarily on honesty, transparency and respect for public trust. Ethically, individuals who bear the title have a responsibility to ensure that their use of it does not mislead others about their qualifications or expertise (Caldwell, 2019).

Misrepresentation whether intentional or unintentional can erode trust not only in the individual but also in the professions and institutions associated with the title. As such, ethical use requires clarity about the nature of one's doctorate, whether medical, academic, or honorary, especially in public and professional contexts. Public perception of the "Dr." title is often shaped by cultural norms and media portrayals that predominantly associate it with medical practitioners. Nguyen (2020) explained that this narrow association can lead to confusion or skepticism when academic or honorary doctorate holders use the title, particularly in non-academic or healthcare settings. This confusion can undermine the legitimacy of academic achievements and diminish public understanding of the diversity of doctoral education. Furthermore, public misunderstanding may fuel skepticism or cynicism about the value of academic credentials, impacting the broader trust in expert knowledge.

The ethical dilemma becomes even more pronounced in professions where the misuse of the "Dr." title can directly affect vulnerable populations, such as patients or clients. However, if a non-medical doctorate holder uses the title in a healthcare environment without adequate explanation, patients might mistakenly believe they are receiving care from a licensed physician, which could have serious consequences (Evans, 2017). Therefore, ethical guidelines often emphasize the importance of context, urging professionals to specify their qualifications to prevent any form of deception or misunderstanding. Ultimately, the ethical use of the "Dr." title hinges on balancing rightful entitlement with social responsibility. Transparency and clear communication about one's qualifications can mitigate misperceptions and reinforce public trust. As Suchman (2016) argues, the integrity of the title depends not only on legal rights or academic achievement but also on ethical stewardship, which respects the public's right to accurate information and honors the broader purpose of scholarly and professional distinction.

Global Perspectives and Cross-Cultural Practices

The use and perception of the title "Dr." vary significantly across different countries and cultures, reflecting distinct educational traditions, legal frameworks and social values. In many Western countries such as the United States, Canada and the United Kingdom, the title is commonly associated with both medical doctors and holders of academic doctorates like the PhD, though its use may be context-dependent (Walker, 2010). In the United States, medical doctors (MDs and DOs) routinely use "Dr." in clinical and social settings, whereas PhD holders typically use the title in academic or research contexts. This dual usage, while accepted, sometimes leads to public confusion.

In continental Europe, the tradition around doctoral titles is often more formalized and legally regulated. Countries like Germany and Austria attach great importance to doctoral titles, which are considered academic degrees of high prestige and are used formally in almost all aspects of life (Kremer, 2019). Here, the "Dr." title is granted strictly following rigorous academic standards while its misuse can be met

with legal consequences. In some cultures, the title carries significant social cachet and the precise form of address, including the specification of the field (e.g., Dr. rer. nat. for natural sciences), reflects the highly stratified nature of academic recognition. In contrast, many developing countries, including Nigeria and India, exhibit more fluid or contested practices regarding the “Dr.” title. Obasi (2022) highlights that in Nigeria, the title is widely used by both medical doctors and PhD holders, but public understanding often heavily favors the medical association, leading to frequent confusion and debates about entitlement. Honorary doctorates and other professional doctorates further complicate this landscape, sometimes causing tensions between academic institutions, professionals, and regulatory bodies. These diverse practices illustrate how the meaning of “Dr.” is socially constructed and continually negotiated within specific cultural and institutional contexts.

Despite these differences, there is a growing global conversation about standardizing the ethical use of the “Dr.” title to prevent misrepresentation and preserve its integrity. International bodies and academic consortia increasingly advocate for transparent communication about qualifications and caution against ambiguous usage, especially in cross-border professional exchanges (Smith & Johnson, 2018). Such efforts reflect the broader challenges of globalization, where titles and credentials must be understood across diverse legal systems and cultural expectations, emphasizing respect for local traditions while promoting clarity and trust.

Conclusion

The title “Dr.” embodies a complex intersection of history, professional legitimacy, cultural perception and ethical responsibility. While its origins lie in the academic sphere as a mark of scholarly achievement, its widespread adoption by medical practitioners has shaped public understanding, often leading to conflation of different forms of doctorate. Honorary doctorates further complicate the landscape by offering symbolic recognition without the rigorous academic or professional requirements traditionally associated with the title. Legal frameworks around the use of “Dr.” aim to prevent misrepresentation, particularly in clinical settings where public safety is paramount, but enforcement and cultural acceptance vary globally. Ethically, transparency and clear communication about one’s qualifications are essential to maintaining the trust that underpins the title’s value. In an increasingly interconnected world, recognizing the nuances and respecting the diverse contexts in which “Dr.” is used will help preserve its integrity while honoring the rightful achievements of all its bearers.

Suggestions

Flowing from the above discussion, the following suggestions are presented:

1. Universities and professional bodies should establish and enforce clear policies regarding the use of the title “Dr.” by academic, medical, and

honorary doctorate holders. These guidelines should specify when and how the title can be used, including recommendations on disclosing the nature of the doctorate to prevent public confusion.

2. Governments, educational institutions, and professional associations should promote public education campaigns to raise awareness about the different types of doctorates and the meaning of the “Dr.” title. This can help reduce misunderstandings and increase respect for academic and honorary achievements alongside medical qualifications.
3. Policymakers should review and strengthen legal frameworks to address misuse of the “Dr.” title, especially in health and professional services, to protect the public from misrepresentation. This includes penalties for deceptive practices while ensuring legitimate holders of academic and honorary titles are not unfairly restricted.
4. Institutions should provide ethics training and resources to doctorate recipients, emphasizing the social responsibility that comes with the title “Dr.” This training should cover the importance of transparency about qualifications and the potential impacts of misuse on public trust and professional integrity.

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