Physician parenting through the pandemic with Jill O. Jin, MD, MPH

AMA's Moving Medicine video series amplifies physician voices and highlights developments and achievements throughout medicine.

Featured topic and speakers

In today’s episode of Moving Medicine, AMA Chief Experience Officer Todd Unger discusses balancing work and family life as a physician with Jill Jin, MD, MPH, an internist at Northwestern Medicine and clinical assistant professor at Northwestern University's Feinberg School of Medicine in Chicago. Dr. Jin is a panelist in the AMA's upcoming webinar: "Parenting as a physician: It takes a lot of patience" next Tuesday, June 21.

Register for the June 21 webinar.

Speaker

- Jill Jin, MD, MPH, internist, Northwestern Medicine; clinical assistant professor, Northwestern University’s Feinberg School of Medicine

Transcript

Unger: Hello, this is the American Medical Association's Moving Medicine video and podcast. Today we're going to talk about balancing work and family life as a physician. It's a tall order. Our guest today is Dr. Jill Jin, an internist at Northwestern Medicine and clinical assistant professor at Northwestern University's Feinberg School of Medicine here in Chicago, and she is going to share some of her experience and tips. Dr. Jin's also a panelist on an upcoming AMA webinar on this very topic, next Tuesday, June 21, called "Parenting As A Physician: It Takes A Lot of Patience." There we go. I'm Todd Unger, AMA's chief experience officer here in Chicago, too. Dr. Jin, thanks so much for joining us. Longtime problem of physician burnout has got to be at an all-time high right now coming out two
and a half years of this pandemic. For many physicians, not only do they have additional stressors at hospitals or offices, but also at their home as well. Tell me a little bit about pandemic life for you and your family.

**Dr. Jin:** Well, I would say the biggest challenge by far was at the beginning, the first few weeks of the pandemic, when everything suddenly shut down, daycare's closed. Both of our ... both of my kids have been in full-time daycare since they were six months old and that was a constant up until the beginning of the pandemic. And both my husband and I are physicians, so at that time he was still going into the hospital every day. I transitioned over to telehealth pretty quickly at the beginning, since I see patients in an outpatient setting. But we were busy. It was crazier than ever before. And our kids were home. We had no help. It was nuts at the beginning. And I would say at the beginning, that's what separated us, I think, as a two-physician family from other families with parents who are not in health care because at the beginning, I think things slowed down for them and they were able to take some time off.

Kind of people were still figuring out how to do work from home and they had a little bit more time and a little bit more flexibility and schedule. So for pandemic life, as a physician, I would say it was the lack of flexibility and the busyness and the volume, that was all the biggest challenge for us, which has since in the past few years, of course, gotten much better, and especially as schools and daycares reopened and telehealth became more standard and the workflows became more set.

**Unger:** There's a lot to learn in two years.

**Dr. Jin:** It's been a lot. Yeah.

**Unger:** And I think in, particularly in your case, two physician family, that's double the problem there but especially when one of those folks is working in a hospital or health care setting, you had to worry about that issue of potentially exposing your families to COVID upon return. And even now, while we hope it changes soon, you still have ... One of your children's too young to be eligible for COVID vaccine. Talk a little bit about how you navigated your concerns kind of early in this process and now, how are you dealing with the risks associated with doing your job?

**Dr. Jin:** Yeah, a great question. So early in the pandemic, I feel like it's hard to remember now but it was so different because the original versions of COVID were not affecting kids as much. So if you recall, at the beginning, kids were really not being infected and the ones who were, were by and large asymptomatic. And I think at that time when we did not know very much about COVID at all, that was the only thing that was keeping my sanity in check, is just knowing that all the data and the facts at the beginning were showing that kids were not really getting it. It wasn't really, until Delta came along, that kids started becoming infected more frequently. And of course, with Omicron and BA.2 and all those sub-variants, kids are getting it a lot. But by and large, they are still getting very mild disease and the risk of hospitalization and death, of course, very, very low.
So I think that has been for me, just knowing the statistics of that has really kept me grounded. And as we've progressed in the course of the pandemic, of course, the risks of exposure and now we know more about how exposure and transmission works, I feel like I personally have become a little bit desensitized to the fear itself of exposure just by being at work and seeing so many patients. So that has also somewhat been helpful through the course of this and helping me. As kids became more infected, we are also learning more and we're also getting more or we're getting better at dealing with exposure. So that timeline has worked out well for me.

So in terms of vaccination, so my son who's six is vaccinated and my daughter who's four is not. And while that was exciting for him to get the vaccine and it was great and we are all very supportive of that, that actually hasn't really changed how I treat them on a day-to-day basis. So they both still go to school, they both do the same activities for the most part. I haven't used that as a huge differentiating factor just because of our personal situation. And everyone's personal calculus is different based on whether they have immunocompromised people in their families or certain personal situations, which we do not.

But I think the biggest challenge with the under fives and that group that can't get vaccinated is just the logistical nightmare of what happens when there is an exposure at preschool or at daycare or at school, just because the guidelines in Illinois, and it may differ by state but in Illinois those who are not vaccinated and have an exposure that counts as a close contact, those who are vaccinated and have an exposure, it does not count as a close contact and the paths really diverge of how to handle those.

So just with my daughter, every time there's an exposure, which is pretty much every week from, I would say, December until now there's been a case at her school, they have to do test to stay, which is every other day testing. If they can't do test to stay, she has to stay home and quarantine. There's just a whole bunch of stuff and logistical mental burden that comes with that that I don't face with my son. So currently that's the biggest difference. And so I certainly do hope the vaccine is approved very soon for those under fives. But I would say, I guess, in terms of the fear of severe illness or complications, it's thankfully for our personal family situation, not a huge concern.

**Unger:** I'm sure your comments are resonating with all those folks out there that have young kids and dealing with what you and your spouse are. Obviously beyond the children part of this, what are your secrets to have made it through this big period of time, being a good partner to your husband and kind of juggling that with being a good physician?

**Dr. Jin:** Yeah, well, I have no secrets. It's hard. It is very hard. And especially with both of us being physicians and having little flexibility, it's all about the give and take and a balance, and recognizing that some weeks you're going to be doing most of everything and then other weeks it'll swap and it just ... It's a moving target and you just got to be okay with that, I think.
Unger: Obviously, we're not out of the woods yet here and we continue to have levels of COVID that are not normal but some sense of normalcy back at it. I guess we'll call it the regular old balancing, the demands of your job and home life. Hopefully, we'll just aspire to that part. But did the pandemic itself teach you any lessons that have now come through into this kind of new period about the way that you approach work-life balance?

Dr. Jin: I think it's taught me to advocate for myself and my family and my home life more. I think that it's taught me that I really have to prioritize it and make ... sometimes my kids and my family have to be the priority. And before, whereas I think many physicians are trained not to speak up about that kind of stuff or just kind of put your head down and work harder or grin and bear. I think that the pandemic really taught me personally to put a pause on some of that work ethic that's so drilled into us and advocate for the family and say—

Unger: Was that hard for you?

Dr. Jin: Yes. Oh yes, it was. It certainly was. And I think that for everyone, which is not ... With all the uncertainty of everything and it goes against so much. We're always trained to help others help our patients and it's really hard to not put that first sometimes but also, you can't be a good doctor, if you are not taking care of yourself and your family first, you can't treat others.

Unger: Do you think this notion of work-life balance, you see it over time, kind of go back and forth. I hear a lot of people saying it's a fallacy. Where do you come out on what that means to you and your family?

Dr. Jin: I think it's not impossible but it's not ... It's something where, as I said before, it's such a moving target where as soon as you reach what you think is a balance for one day, it's going to change the next day. Just based on where your family life is at home, how old your kids are, how busy you are at work, what projects you have. It's so fluid that I think it's impossible to realize that you have it almost while you're in it. But I think it is possible to be fulfilled in both, if you realize that it's kind of always going to be shifting. And if you embrace that uncertainty to a certain extent, I think that you can, at least ... There will be days where you can find fulfillment in both work and life and home.

Unger: So maybe not all at the same time is the issue.

Dr. Jin: Yeah. But being okay with that. Yeah.

Unger: So this issue of physician burnout, obviously something the AMA is deeply involved in addressing and through the research that we know about 80% of burnout stems from system-level issues. It's not a personal resilience issue. And we've talked a lot about the personal challenges that you've faced but let's talk a little bit about how do you see employers being better able to support physician efforts to get to that balance that makes sense and decrease burnout.
Dr. Jin: Yeah. I think that the biggest thing that employers and organizations can do is to offer flexibility in schedules and control over their own schedules for physicians. Because yeah, as parents, especially as parents of young children, you just never know when you're going to be called up early, you are going to pick your kid up from school or something's going to come up and just having control over your own schedule or the ability to switch to telehealth if needed and work early on some days and make it up later another day.

I think giving physicians the ability to control their own schedules and having faith that they're going to be working and they're not micromanaging and just giving them the benefit of the doubt, giving them the trust and the faith, I think that's something that is key in preventing burnout. That, and this is kind of a small point, but not doing things like scheduling meetings during school drop off hours that are for the whole group. And if you don't go, then you feel like you're kind of missing out. And so things like that can also help.

Unger: It is a certain level of fluidity between work and life that I think it does make things go a little bit more smoothly. I'm looking forward to what you and the panels have to say at this upcoming webinar next Tuesday, June 21, that I mentioned before, "Parenting As A Physician: It Takes A Lot Of Patience." I know that's true. You and several other physician parents are going to be talking in depth about many of the issues that we just touched on very briefly today. I'm curious, why was it so important for you to participate in this particular webinar?

Dr. Jin: Just to help others speak up and break the silence. And as I talked about before, it's so hard to find your voice sometimes to advocate for yourself and for other parents. And I just wanted to help people do that. Sometimes it just requires finding that inspiration and others who've done the same.

Unger: Well, Dr. Jin, thank you so much for being here today. Again, we'll look forward to the webinar on Tuesday, June 21. It's at noon, Central time. Again, "Parenting As A Physician: It Takes A Lot of Patience," and you can find the registration link at the bottom of this particular episode and more information on the AMA's website. That's it for today's Moving Medicine video and podcast. We'll be back soon with another but don't miss any episode. You can check out all our videos and podcasts at ama-assn.org/podcasts. Thanks for joining us today. Please take care.

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