The link between childcare stress and physician burnout with Elizabeth Harry, MD [Podcast]

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In today’s AMA Update, Elizabeth Harry, MD, senior medical director of well-being at UCHealth in Aurora, Colorado, joins to discuss the connection between high childcare stress and burnout among health care workers during the pandemic. AMA Chief Experience Officer Todd Unger hosts.

Learn how the AMA is #FightingForDocs and access resources from the AMA Recovery Plan for America’s Physicians.

Speaker

Elizabeth Harry, MD, senior medical director of well-being, UCHealth

Transcript

Unger: Hello and welcome to the AMA Update video and podcast. Today we’re discussing the connection between high childcare stress and burnout among health care workers during the pandemic. I'm joined by Dr. Elizabeth Harry, senior medical director of well-being at UCHealth in Aurora, Colorado. I'm Todd Unger, AMA's chief experience officer in Chicago. Dr. Harry, welcome. Thanks for coming today.

Dr. Harry: Thanks, Todd. It's so nice to be here with you.

Unger: So I'm going to guess, because there's been a theme when we talk about things that were problems during the pandemic, that there were likely problems before the pandemic and then they got worse. So I'm going to put that in my crystal ball as we get started. Why don't we just kick this off by talking about what was it like regarding childcare before the pandemic?
Dr. Harry: Yeah, that's a really good point. And childcare stress is certainly something that's been present for health care workers in general and physicians, in particular, for quite some time. And one of the key things I think there is that the hours that we work are so different than your standard childcare hours. And so it's often difficult to find a facility or a childcare worker that is able to work those hours.

And I think the other piece that's been an issue for a long time is the cost of childcare, particularly in some of our high-cost-of-living areas and particularly for trainees. So as we have more trainees joining the field at later stages in their life and they've already started families, a lot of them have a difficult time moving into those high-cost-of-living areas and paying for childcare.

Unger: So the pandemic happens and what happens to this problem that was already an issue?

Dr. Harry: Yeah, it's a really interesting phenomenon because we had this sort of unstable infrastructure supporting health care workers' ability to go to work. And I think we realized how unstable it was because when that collapsed, when the childcare opportunities shut down or schools shut down, it became very clear that this infrastructure that was allowing everybody to go to work was not as strong as we thought it was and critical to our ability to be able to go and do our jobs.

Unger: So let's talk now about that connection to burnout. You may know and folks out there know, that reducing physician burnout is a high priority area for the AMA. It's one of the key parts of our Recovery Plan for America's Physicians. The AMA was recently part of a group that did a study on physician burnout and what it found was that it has reached an all-time high two years into the pandemic. You performed the first national study during the pandemic to link high childcare stress to burnout and other issues among health care workers. Let's start and talk a little bit about your findings.

Dr. Harry: Yeah, so not surprisingly, we found that a lot of our health care workers were experiencing high childcare stress. And I think what's interesting about that is that we didn't actually specify whether people had children or not. And so the rate of childcare stress is probably higher than we actually measured because we were asking for all comers what percent of childcare stress was there. So I think, first, just realizing that 21% of the population that responded, children are not—were experiencing high childcare stress is important.

And then we found that it varied by demographic. And so our nonwhite responders had a higher childcare stress rate than our white responders. Our women had higher childcare stress than men. And nonbinary responders had higher childcare stress than women and men as well. And then we saw that it varied by role type. So our MAs had the highest childcare stress, followed by our nursing assistants. Speech therapists had a very high childcare stress as well by about a third having high childcare stress.
And then we looked at, what was the relationship between having high childcare stress and reporting either burnout or anxiety and depression or intent to leave and reduce hours. And we found that if people were experiencing high childcare stress, they were actually 115% more likely to report anxiety and depression, which is really impressive. They had an 80% higher odds of reporting burnout, a 91% higher odds in intending to reduce their hours in the next two years, which is very important when we think about our health care worker shortages and then about a 28% increased odds in leaving health care altogether in the next two years.

Unger: So, Dr. Harry, beyond the obvious and detrimental distress to physicians themselves, what are some of the practical and financial implications of physician burnout that health care leaders need to be aware of when they're addressing issues like childcare?

Dr. Harry: Yeah, it's such a good question, Todd. We know that physicians that are more burned out are more likely to create errors. They're more likely to leave. And it's very expensive to replace a physician through recruitment and training and all of that. But we also know that they're more likely to reduce their hours. And while on face value that may not seem as problematic, it is. Because if they reduce their hours and you have two physicians working half time, you're paying more for those two people with benefits and everything than you would have for one person working full time.

So there's a lot of implications when people don't feel they can do a full-time job because they need to take over responsibility for their childcare situation or because they're so stressed because of that that they want to reduce their hours or leave altogether.

Unger: When you look at different approaches, which ones have you seen that work best to address the kind of childcare stress that we're talking about with physicians?

Dr. Harry: Yeah, I've seen a lot of really interesting things. I'll say here in Colorado, on the Anschutz Medical Campus, we actually have a campus-based school, which is very interesting. And that school is open to anyone who works in any of the health care facilities on the campus. Which is a really neat way to have your kids close, to have them interacting with the children of your colleagues and all the health care workers in the area around.

I've seen a lot of workplaces do partnerships with childcare companies that help you find childcare and that sort of thing. And many of them will help with back-up childcare, which I think is very important. I think ultimately we have an access issue around the country. So despite many organizations having childcare on site, the waiting list in most places is very long.

And so it's not necessarily something that can solve everybody's issues. And, I think, thinking about what populations within the health care system need stipends or financial support to help them be able to afford childcare, particularly in high-cost-of-living areas, is important.
Unger: Without placing the burden on individuals, what advice do you have for physicians on managing childcare needs and the accompanying stress?

Dr. Harry: Yeah, it’s a really good question and it’s a tough one because the individual themselves can’t help modify the organizational support around childcare necessarily. I think, definitely, advocacy is huge and things like this, where we can help organizations think about advocating for how they want to support childcare for the people that work for them. But the one thing that I think is so important for people to remember is their community or their tribe.

And I’ll tell you that there have been many times where I found myself in a bit of a childcare pickle and then talked to a friend later who said, you should have just told me. I would have happily helped with that. And so I think often we don’t reach out quite enough to the community around us that’s really happy to help us when we need that help.

Unger: Well, thank you so much, Dr. Harry, for being here today and for your efforts to help health care workers take care of themselves and their families. We know that is so important.

That’s it for today’s episode. You can find out more information on physician burnout and the AMA Recovery Plan for America’s Physicians on our website, ama-assn.org. We’ll be back soon with another AMA Update. You can find all our videos and podcasts at ama-assn.org/podcasts. Thanks for joining us today. Please take care.

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