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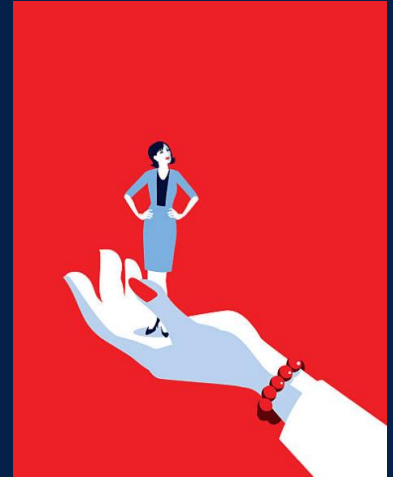
Promoting equity for caregivers in medicine

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UCSF Department of Psychiatry & Behavioral Sciences

January 27, 2022
Royal College of Psychiatrists

Disclosures

- **Funding:**
 - NIH; Doris Duke Charitable Foundation; Genentech Corporation; California Health Care Foundation; United Health Group
- **Standing on shoulders of giants (including modern-day ones):**
 - Reshma Jagsi, Hannah Valentine, Camara Jones, Joan Williams, and many others



Objectives

My journey in building research in this area

Caregivers in the medical setting

Physician mother caregivers

Policy studies

Resources to support wellbeing



Caregivers of our patients

My journey

Practice » A Patient's Journey

The missing vital sign

BMJ 2013 ; 347 doi: <https://doi.org/10.1136/bmj.f4163> (Published 05 July 2013)

Cite this as: BMJ 2013;347:f4163

Article Related content Metrics Responses

Christina Mangurian, assistant professor of clinical psychiatry, director¹, Morton J Cowan, professor of paed

Author affiliations

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Accepted 30 March 2013

The author catalogues the challenges to family, friends, and herself of man: month old son's long hospital stay as he received a transplant to cure Wisk syndrome

The paediatric bone marrow transplant team entered my 10 month old son's isolation room for morning. It was supposed to be Anderson's "day of rest" between chemotherapy and his trans knew something was wrong—busy doctors do not do rounds twice. They had returned to tell cord blood needed to cure my son of his rare condition, Wiskott-Aldrich syndrome, had been t

The doctor who had just finished his fellowship said that the only therapy would not effect a



Palliative & Supportive Care

Article contents

Abstract

Objective:

Method:

Result:

Significance of results:

INTRODUCTION

The need to support caregivers during pediatric bone marrow transplantation (BMT): A case report

Published online by Cambridge University Press: 30 January 2018

Christina Mangurian, Wendy Packman, Nicholas S. Riano and Julia Kearney

Show author details

Article Figures Metrics



Abstract


Objective:

Pediatric bone marrow transplants represent a medically stressful, potentially traumatic experience for children and caregivers, and psychological support for parental caregivers is paramount to their long-term well-being. However, many medical centers do not have protocols in place to sustain caregiver well-being during these distressing experiences.


Method:

We report on a case of a 10-month-old infant with Wiskott Aldrich Syndrome who was

Supporting Caregivers in Pediatric BMT



Journal of Allergy and Clinical Immunology
Volume 143, Issue 6, June 2019, Pages 2271-2278



Epidemiology and health care delivery

Supporting caregivers during hematopoietic cell transplantation for children with primary immunodeficiency disorders

Jennie Yoo BS ^a, Meghan C. Halley PhD, MPH ^{a, b}, E. Anne Lown DrPH ^c, Veronica Yank MD ^d, Katherine Ort MD ^a, Morton J. Cowan MD ^e, Morna J. Dorsey MD, MMSc ^e, Heather Smith ^f, Sumathi Iyengar MD ^g, Christopher Scalchunes MPA ^h, Christina Mangurian MD, MAS ^{a, g, i}

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<https://doi.org/10.1016/j.jaci.2018.10.017> [Get rights and content](#)

Background

Caregivers of children with primary immunodeficiency disorders (PIDs) experience significant psychological distress during their child's hematopoietic cell transplantation (HCT) process.

Objectives

This study aims to understand caregiver challenges and identify areas for health care system-level improvements to enhance caregiver well-being.



Psychosocial services for primary immunodeficiency disorder families during hematopoietic cell transplantation: A descriptive study

Published online by Cambridge University Press: 18 September 2018

Christina Mangurian, Christopher Scalchunes, Jennie Yoo, Brent Logan, Tiffany Henderson, Sumathi Iyengar, Heather Smith and Morton J. Cowan [Show author details](#) ▾

Palliative & Supportive Care

Article Figures Supplementary materials Metrics

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Article contents

- Abstract
- Objective
- Method
- Result
- Significance of results
- Introduction
- Methods

Abstract

Objective

Caregivers for patients undergoing hematopoietic cell transplantation (HCT) are susceptible to significant psychosocial distress. This cross-sectional study aimed to describe psychosocial support services offered and used by caregivers of pediatric primary immune deficiency (PID) during HCT at 35 hospitals across North America.

NICU settings: Target screening caregivers for depression and anxiety



Journal of
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Review Article | [Published: 10 March 2021](#)

Feasibility of universal screening for postpartum mood and anxiety disorders among caregivers of infants hospitalized in NICUs: a systematic review

[Snehal Murthy](#), [Laurel Haeusslein](#), [Stephen Bent](#), [Elizabeth Fitelson](#), [Linda S. Franck](#) & [Christina Mangurian](#)
[✉](#)

[Journal of Perinatology](#) **41**, 1811–1824 (2021) | [Cite this article](#)

523 Accesses | 3 Citations | 5 Altmetric | [Metrics](#)

Abstract

This systematic review evaluated the feasibility of implementing universal screening programs for postpartum mood and anxiety disorder (PMAD) among caregivers of infants hospitalized in the neonatal intensive care unit (NICU). Four moderate quality post-implementation cohort studies satisfied inclusion criteria ($n = 2752$ total participants). All studies included mothers; one study included fathers or partners. Screening included measures of depression and post-traumatic stress. Screening rates ranged from 48.5% to 96.2%. The incidence of depression in mothers ranged from 18% to 43.3% and was 9.5% in fathers. Common facilitators included engaging multidisciplinary staff in program development and implementation, partnering with program champions, and incorporating screening into routine clinical practice. Referral to

Physician Mother Caregivers

Informal Caregivers



- 16% of physician mothers are also informal caregivers
- These women have significantly higher rates of mood/anxiety disorders and burnout when compared to other physician mothers
- **Few policies** allow paid family leave across a woman's lifespan

Table 2. Prevalence and aRR of Challenges to Behavioral Health and Careers Among Physician Mothers Grouped According to Caregiving Responsibilities

Characteristic	Prevalence of Self-reported Characteristics Among Physician Mothers			P Value	aRR Among Physician Mothers With Additional Caregiving Responsibilities ^a	
	All Respondents, No. (%) (n = 5613)	Caregiving Subgroups			aRR (95% CI)	P Value
		Physician Mothers With Additional Responsibilities, No. (%) (n = 918)	Physician Mothers Without Additional Responsibilities, No. (%) (n = 4695)			
Behavioral health issue						
Risky drinking (in past year)	975 (17.5)	152 (16.6)	823 (17.7)	.42	0.96 (0.79 to 1.17)	.71
Substance abuse (ever) ^b	166 (3.0)	26 (2.8)	140 (3.0)	.72	0.85 (0.54 to 1.32)	.46
Mood or anxiety disorder (ever) ^c	1845 (33.4)	358 (39.3)	1487 (32.2)	<.001	1.21 (1.04 to 1.42)	.02
Challenge to careers						
Career dissatisfaction (current) ^d	435 (7.8)	87 (9.5)	348 (7.5)	.06	0.95 (0.72 to 1.24)	.71
Burnout (current)	2140 (38.6)	412 (45.2)	1728 (37.3)	<.001	1.25 (1.06 to 1.46)	.007

Abbreviation: aRR, adjusted relative risk.

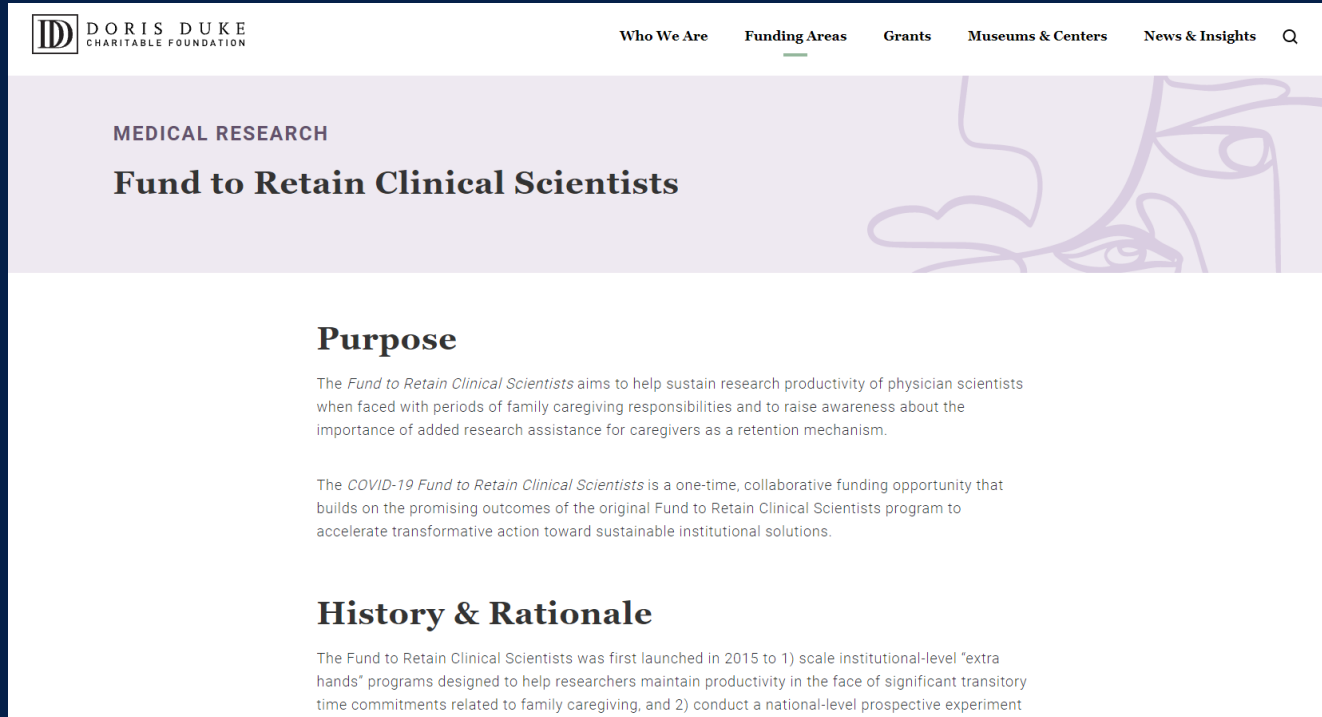
^a Models identified aRRs of behavioral health and career characteristics among physician mothers with additional caregiving responsibilities compared with those without such responsibilities while adjusting for other characteristics reported in Table 1: age, race/ethnicity, marital status, practice type, specialty, and self-perceived medical mistake (ever).

^b Response options: never, once or twice, monthly, weekly, and daily or almost daily. A response of monthly, weekly, or daily or almost daily to any question indicated a positive assessment.

^c Response options: yes or no. A response of yes indicated a positive assessment.

^d Response options: always, almost always, usually, rarely, or never. A response of rarely or never satisfied indicated a positive assessment (career dissatisfaction).

DDCF Fund to Retain Clinician Scientists



The screenshot shows the top navigation bar of the DDCF website with links for 'Who We Are', 'Funding Areas', 'Grants', 'Museums & Centers', and 'News & Insights'. Below the navigation is a header section with the text 'MEDICAL RESEARCH' and 'Fund to Retain Clinical Scientists'. The main content area features a 'Purpose' section with two paragraphs and a 'History & Rationale' section with one paragraph. A faint line-art illustration of a human face is visible in the background of the header.

DD DORIS DUKE
CHARITABLE FOUNDATION

Who We Are Funding Areas Grants Museums & Centers News & Insights Q

MEDICAL RESEARCH

Fund to Retain Clinical Scientists

Purpose

The *Fund to Retain Clinical Scientists* aims to help sustain research productivity of physician scientists when faced with periods of family caregiving responsibilities and to raise awareness about the importance of added research assistance for caregivers as a retention mechanism.

The *COVID-19 Fund to Retain Clinical Scientists* is a one-time, collaborative funding opportunity that builds on the promising outcomes of the original Fund to Retain Clinical Scientists program to accelerate transformative action toward sustainable institutional solutions.

History & Rationale

The Fund to Retain Clinical Scientists was first launched in 2015 to 1) scale institutional-level "extra hands" programs designed to help researchers maintain productivity in the face of significant transitory time commitments related to family caregiving, and 2) conduct a national-level prospective experiment

Early Evidence of Impact of COVID-19 upon Caregivers

Who are most vulnerable for psychological sequelae during pandemics?

- Women (and caregivers)★
- Younger populations
- Lower socioeconomic status
- Front-line providers (esp nurses)
- High risk of contracting COVID-19★
- Social Isolation★



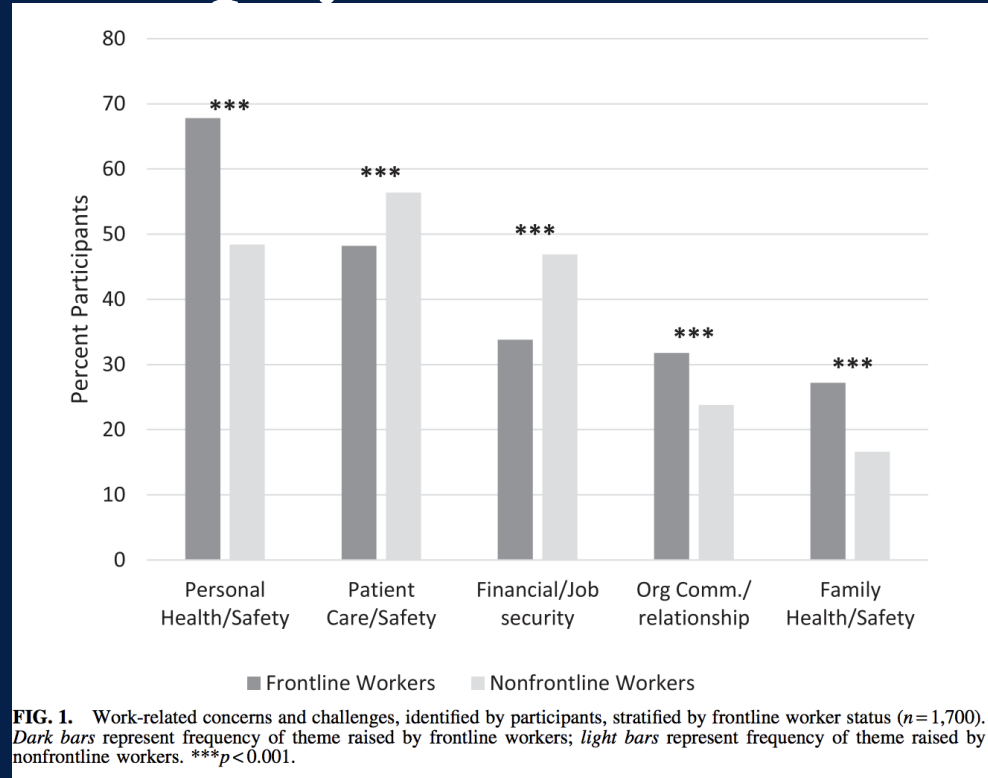
[https://www.bmj.com/content/369/bmj.m1642;](https://www.bmj.com/content/369/bmj.m1642)

<https://pubmed.ncbi.nlm.nih.gov/32799105/>

<https://www.ncbi.nlm.nih.gov/research/coronavirus/publication/32563745>

Impact of COVID-19 on physician mothers

- Mixed methods study
- Recruited from Facebook Physician Moms Group April 2020
- **Over 40% of physician mothers had symptoms consistent with anxiety during COVID-19, compared to 19% of the adult population before COVID-19.**
- Most at risk among physician mothers:
 - Frontline workers
 - **Informal caregivers**



Policy Research

Multiple benefits of paid family leave

- Decrease in postpartum depression & intimate partner violence
- Improved infant attachment and child development
- Decrease in infant mortality & rehospitalizations
- Increase in pediatric visit attendance & timely immunizations
- Increase in breastfeeding initiation and duration

PERSPECTIVES

The Impact of Paid Maternity Leave on the Mental and Physical Health of Mothers and Children: A Review of the Literature and Policy Implications

Van Niel, Maureen Sayres MD; Bhatia, Richa MD; Riano, Nicholas S. MAS; de Faria, Ludmila MD; Catapano-Friedman, Lisa MD; Ravven, Simha MD; Weissman, Barbara MD; Nzodom, Carine MD; Alexander, Amy MD; Budde, Kristin MD, MPH; Mangurian, Christina MD, MAS

Author Information 

Harvard Review of Psychiatry: 3/4 2020 - Volume 28 - Issue 2 - p 113-126
doi: 10.1097/HRP.0000000000000246

US Academic Medicine Family Leave Policies

- Any family leave policy
 - Faculty: 100%
 - Residents: 50%
 - Staff: 17%
- Mean length of paid leave
 - Faculty: 8.6 weeks
 - Residents: 5.7 weeks
 - Staff: 6wks staff

Research Letter

FREE

February 13, 2018

Paid Family and Childbearing Leave Policies at Top US Medical Schools

Nicholas S. Riano, MAS¹; Eleni Linos, MD, DrPH²; Erin C. Accurso, PhD¹; [et al](#)

[> Author Affiliations](#) | [Article Information](#)

JAMA. 2018;319(6):611-614. doi:10.1001/jama.2017.19519

Research Letter

December 11, 2018

Childbearing and Family Leave Policies for Resident Physicians at Top Training Institutions

Kirti Magudia, MD, PhD¹; Alexander Bick, MD, PhD²; Jeffrey Cohen, MD³; [et al](#)

[> Author Affiliations](#)

JAMA. 2018;320(22):2372-2374. doi:10.1001/jama.2018.14414

Research Letter | Physician Work Environment and Well-Being

FREE

January 21, 2020

Assessment of Paid Childbearing and Family Leave Policies for Administrative Staff at Top US Medical Schools

Mary C. Vance, MD, MSc¹; Nicholas S. Riano, MAS²; Reshma Jaggi, MD, DPH^{3,4}; [et al](#)

[> Author Affiliations](#) | [Article Information](#)

JAMA Intern Med. 2020;180(4):589-592. doi:10.1001/jamainternmed.2019.6653

Advocacy

- UCSF moved to 12 weeks
- ACGME/ABMS approved 6weeks
- Caregivers as essential members of the workforce
- Next target: informal caregiver leave

POINTS OF VIEW

Caring for the Caregivers — Covid-19 Vaccination for Essential Members of the Health Care Team

Meghan C. Halley, Ph.D., M.P.H., and Christina Mangurian, M.D., M.A.S.

Article Metrics

March 4, 2021
N Engl J Med 2021; 384:e33
DOI: 10.1056/NEJMp2101339

5 References 5 Citing Articles 2 Comments

AS U.S. STATES HAVE DEVELOPED GUIDELINES FOR COVID-19 VACCINATION, SOME have moved to include “paid or unpaid caregivers (including parents or foster parents) of medically fragile children or adults who live at home” in Phase 1 vaccine allocation.^{1,2} This policy decision is stunning in its long-overdue recognition of the millions of caregivers throughout the United States on whom medical and social service providers depend to provide day-to-day care for chronically ill community members. Though this policy should not replace efforts to directly vaccinate eligible people with chronic disease or disability, prioritizing vaccination of caregivers of medically fragile people has wide-ranging benefits.

NEJM CareerCenter

PHYSICIAN JOBS JANUARY 21, 2022

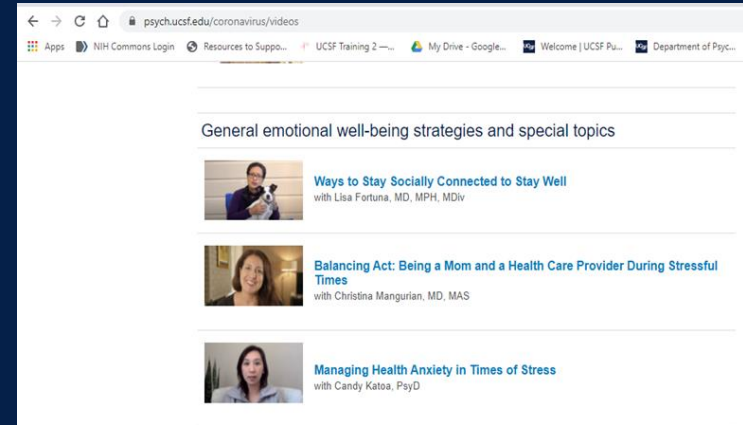
Infectious Disease New York
NORTHWELL HEALTH - INFECTIOUS DISEASE, LONG ISLAND

Resources to Support Well-being

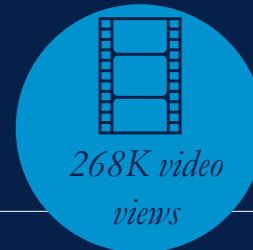
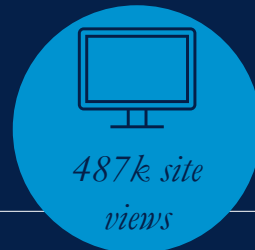
UCSF Cope: Web-based Resources



- The Department of Psychiatry has created a website (<https://psych.ucsf.edu/copingresources>) with resources to support well-being.
 - Wide array of written content
 - Curated free mental health apps
 - Resources for caring for children/elderly
 - Webinars from experts on stress reduction
 - Self-help videos (<https://psych.ucsf.edu/coronavirus/videos>)
 - Tips for Managers



Data as of November 2021



Conclusions

Informal caregivers experience psychological distress

The medical establishment is poor at addressing this stress among our patients' caregivers, and our staff

Policies should be put in place to screen caregivers of our patients or depression and anxiety

Policies should be in place to allow flexible leave for physician caregivers



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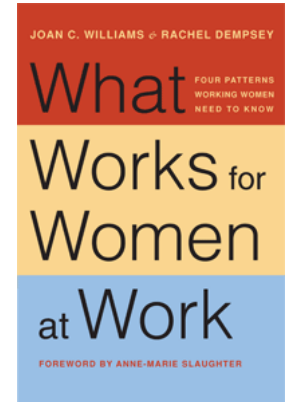


Thank you!

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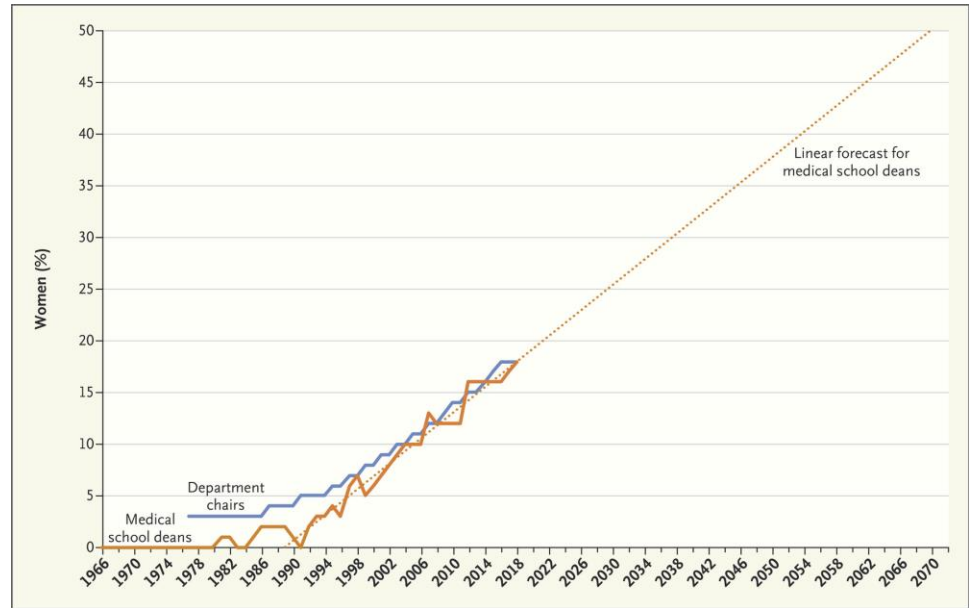


Maternal Wall



Gender equity in US academic medicine leadership

- Less than 20% of department chairs in academic medicine are women
- It will take 50 years to achieve gender equity in leadership if we don't do anything different



Perspective

Unplugging the Pipeline — A Call for Term Limits in Academic Medicine

Whitney H. Beeler, M.D., Christina Mangurian, M.D., M.A.S., and Reshma Jagsi, M.D., D.Phil.

Balancing Act: Put your Oxygen Mask on



- Self-care and other wellness activities
 - Exercise
 - Good diet
 - Good sleep
 - Socializing (at a distance)
 - Meditation, grateful practice
- Psychotherapy & Psychopharmacology
- If you have means, hire people to help (grocery, cleaning home, helping with kids)

Balancing Act: Make Time Serve Double



- Plan out some wellbeing activities during workday and every day off.
- Intentionally combine wellbeing activities with each other and (if possible) during work activities. For example:
 - With family: Grateful during dinner, meditate, time outdoors & exercise
 - With Friends: Talk to friends while commuting or going to grocery store
 - During work: Walk outside during conference call
- Good article on Habits:
<https://www.nytimes.com/2020/07/02/at-home/coronavirus-keep-good-habits.html>

How do I help support my children?

- The UCSF website has lots of information for families
(<https://psych.ucsf.edu/coronavirus/families>)
including how to talk to kids about COVID-19
and helping them cope.
- Key Pearls
 - Routine, routine, routine
 - Validate feelings
 - Sometimes “I don’t know” is OK
 - Limit media exposure
 - Exercise and Socialize

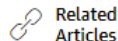
October 14, 2019

Implementation of Federal Dependent Care Policies for Physician-Scientists at Leading US Medical Schools

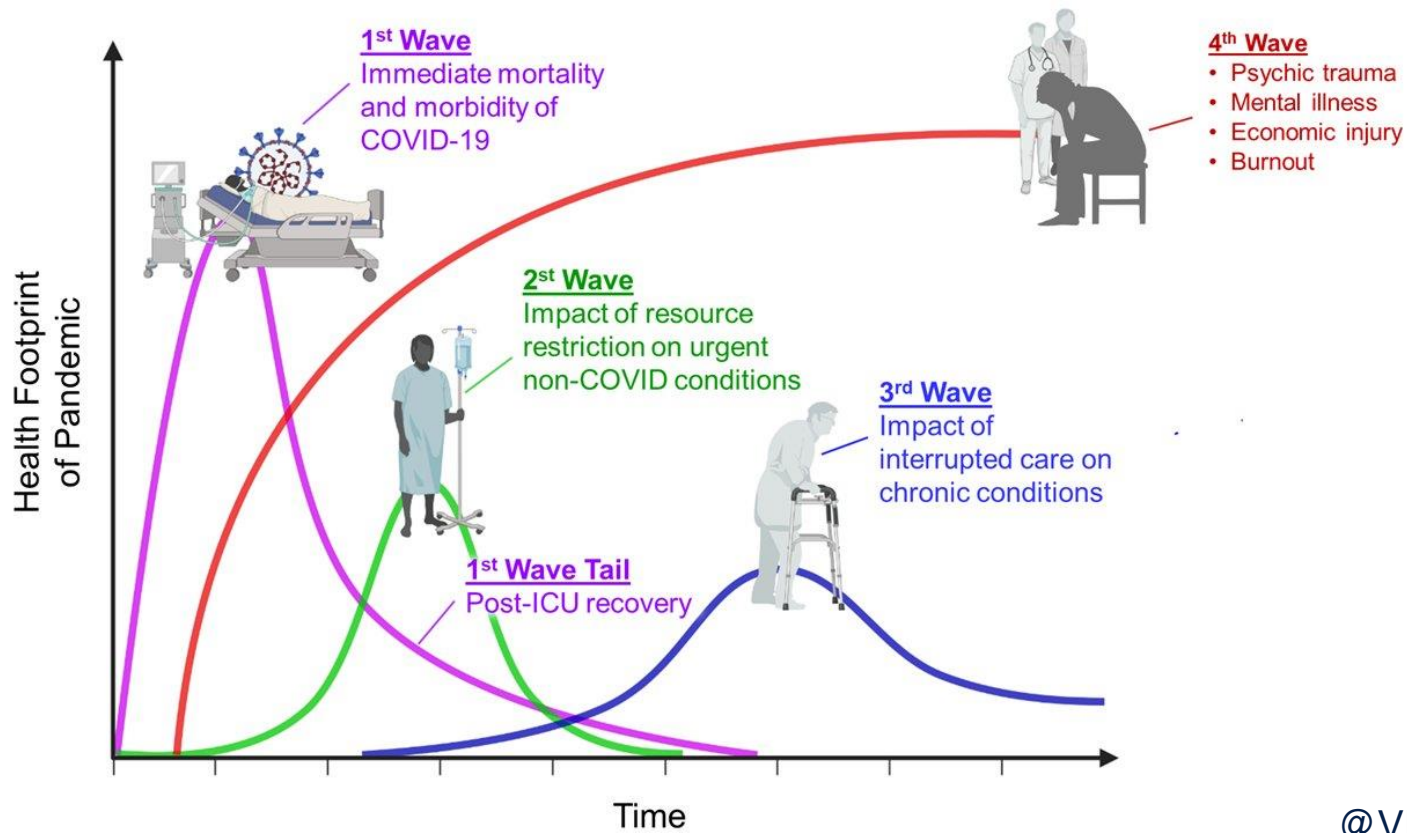
Cora H. Ormseth, BA¹; Christina Mangurian, MD, MAS²; Reshma Jaggi, MD, DPhil³; Esther K. Choo, MD, MPH⁴; Daniel H. Lowenstein, MD⁵; Renee Y. Hsia, MD, MSc⁶

» [Author Affiliations](#) | [Article Information](#)

JAMA Intern Med. 2020;180(1):153-157. doi:10.1001/jamainternmed.2019.4611



Travel support for dependents of physician-scientists at medical schools (children or other dependent family members), including care for dependents left at home while the researcher travels and care for dependents who accompany the researcher for travel, has been recommended as an important step to achieve gender equity in academic science.¹ In December 2014, the US government issued regulation in 45 CFR §75.474, allowing temporary dependent care travel costs to be expensed to federal grants.² We surveyed leading US medical schools to investigate whether institutional policies allow for implementation of this clause.



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