

# Tips for Balancing Parenthood and Medicine

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## With limits and support, it can be done.

**B**eing a parent is a blessing and a great responsibility. Parents are tasked with modeling life skills, values, resiliency, and grit (among other things) for their children. Although mother figures continue to bear the majority of child care,<sup>1</sup> parenting roles are evolving and it truly does take a village to raise children now.

Physician parents are more likely to experience work-life imbalance because of our workloads,<sup>2</sup> and this can potentially affect a child's formative years. To achieve balance, physicians must develop and refine personalized practices. We have personally found the following techniques to be helpful.

**1. Set boundaries.** We make it a goal to finish all notes and answer all messages before concluding the workday, so we aren't routinely taking work home. Specific EHR documentation and inbox strategies can help with this,<sup>3</sup> but sometimes we have to sacrifice our lunch hour or book an extra "appointment" in our schedule to complete paperwork and charting. Although parenting may bleed into the workday (e.g., returning calls from day care, checking in with a child's teacher, or coordinating transportation

to after-school activities), we try not to let work infiltrate our home. When we are home, we try to be fully present with our families, limiting any work distractions.

**2. Let go of the guilt.** It's normal to wonder, "Am I a good doctor and a good parent?" We need to recognize that although we may not be perfect in our roles as physicians or parents, we are doing our best. We should focus on what we are grateful for and all of our accomplishments; we need to stop comparing ourselves to other parents. The guilt stemming from comparison can be pervasive. If we recognize the portrayal of perfect parenting is unrealistic and focus on doing our best as parents and physicians, we will find ourselves more content and prouder of our many accomplishments.

**3. Create "me time."** It is in our nature to sacrifice for our patients and family, potentially putting our own needs second and leading to a loss of personal identity. Preserving our own identity outside our careers and parenting is important because these traits, goals, and hobbies can energize us and make us more effective in our other roles. We find that simple pleasures such as having lunch with friends, conversing in the hallways with colleagues, hitting a bucket of golf balls, or simply treating ourselves to a milkshake on the way home from work are fundamental to our well-being.

**4. Learn to say "no."** In our training as medical professionals, we are taught to always give 110%, and that often means saying "yes" to every request. This sets the stage for burnout and work-life imbalance. Often, physicians view saying

"no" as a sign of failure, but we can actually find peace and power in "no." Instead of making a "to-do" list, try making a "to-don't" list.

**5. Stay organized.** We have found that careful planning allays some of our stress and makes us more successful, efficient, and effective as physicians and parents. Here are some examples:

- Have weekly meetings to plan family meals,
- Have a nightly routine in which children help choose their clothes and breakfast for the next morning,
- After dinner, pack lunches and bags while discussing drop-off duty,
- Use a shared family calendar to keep track of activities and to schedule time for self-care and fun.<sup>4</sup>

Our years of rigorous medical training have given us the physical and mental stamina, organizational skills, and eye for efficiency that are key to being successful physicians. With the tips in this article, we hope you will have some new tools to be even more successful parents and achieve work-life balance. **FPM**

1. Schueller-Weidekamm C, Kautzky-Willer A. Challenges of work-life balance for women physicians/mothers working in leadership positions. *Gend Med.* 2012;9(4):244-250.

2. Ryan L. Maternity, motherhood, and medicine. *The Hospitalist.* 2011;4.

3. Reddy S, Rippey PC, Cuenca AE, et al. Seven habits for reducing work after clinic. *Fam Pract Manag.* 2019;26(3):10-16.

4. Drummond D. Four tools for reducing burnout by finding work-life balance. *Fam Pract Manag.* 2016;23(1):28-33.

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