Physician Moms Group: the support network that’s needed more than ever during the covid-19 pandemic

It started as a Facebook group. It’s now a major support network for doctors all over the world—especially during the coronavirus pandemic. Chris Stokel-Walker reports

Chris Stokel-Walker freelance journalist
Newcastle upon Tyne, UK

Hala Sabry was pregnant with twins—her second and third children in 18 months—and was trying to balance parenting with a job in medicine. “Normally, even without a job, that would be stressful,” she told The BMJ. “I knew I needed some mentors to guide me through it.”

The problem was that she wasn’t working with any women of her age who had children. So the Californian emergency medicine doctor set up the Physician Moms Group (PMG) on Facebook in November 2014, inviting fellow “doctor-moms” to join and contribute to the discussion about how to juggle work and life.

Five and a half years on, it’s a community of 71 000 medical professionals that spans the globe, providing support and advice for working doctors with families. It’s not just about how to manage negotiations around pay and progression at work, it’s also a place for professionals to share best practice.

One early success story of the group started with a post about a child on the east coast of the United States with a rare eye condition, asking for help treating the illness. A group member married to a neuro-ophthalmologist helped advise on the condition and ended up flying the patient to another hospital better equipped to treat it. “That was the first time I realised the power the group could have beyond answering normal motherhood questions,” said Sabry via Zoom, occasionally interrupted by her toddlers preparing for school.

When she created the group, she didn’t expect more than 20 people to join. Now there are multiple groups across Facebook, including a UK branch set up around 2017 helmed by Nazia Askari Haider, a consultant radiologist in Essex.

Haider found herself in a similar situation to Sabry; with two young children and a husband who was a consultant anaesthetist, she worried about being able to juggle her career and family life. “I needed help,” she says. “I needed to be with some like-minded women who can support me.” She set up the PMG UK Facebook group one evening, and within two months had 8000 members. Now the group is at 20 000 and is still growing.

“We call ourselves the hive,” said Haider, telling the story of one member working in Glasgow whose grandmother in Cambridge was diagnosed as having cancer. They asked the hive for help, and within hours someone visited the member’s grandmother with a cup of tea and some flowers.

Support in the time of coronavirus

PMG groups have become even more important with the increasing pressures of the covid-19 pandemic.

“It’s a safe space to be a human and to be all the different roles you fulfil,” said Caroline Walker, a psychiatrist and member of the UK group. People forget, especially in a global health crisis, that doctors are not just doctors but also mothers, children, partners, friends, bandmates, people. “It’s an absolute lifeline for so many doctors out there and is coming into its own now.”

“What I’m seeing across all groups is that they’re a container for the emotional upheaval we’re experiencing at the minute,” she says. Walker has seen a rise in the number of posts on PMG UK expressing stress, anxiety, and anger at the uncertainty.

Posts have shifted from a roughly equal balance of personal and professional topics to a spike in requests for advice on the emotional toll of the pandemic.

Collaboration without borders

Offshoot groups have sprung up to deal specifically with the coronavirus. When the original PMG group set up a covid group, it gained thousands of new members within a week. These groups have abandoned the rule that members need to be women. “It’s been really neat to just see the collaboration of physicians across many countries,” said Sabry.

“The most important thing these groups have been doing is rapidly establishing group norms of treatment under these circumstances,” said Elizabeth Loder, chief of the division of headache and pain at Brigham and Women’s Faulkner Hospital in Boston, Massachusetts and head of research at The BMJ.

One of Loder’s Massachusetts groups has put together documents about treatment options during the pandemic,
webcasts about how to do telemedicine, and a group meeting for members to discuss anxieties, chaired by a psychologist member of the group.

Facebook discussions have helped shape treatment norms, though the groups always remind members to be wary of sharing information on Facebook that is too personal and could be used to identify individual people. “Patients across the country are getting treatment that is much more standardised than would have been the case before these groups existed,” Loder told The BMJ.

A similar covid-19 breakout group, also without the gender barrier, has been formed in the UK. “We’re sharing knowledge and information and supporting each other,” said Haider. In its first three weeks, 11 000 members, verified against General Medical Council records, were approved. When we spoke, another 3000 were still waiting to be approved. In all, 110 000 engagements had been recorded in the covid-19 group.

“The members are supporting each other, helping each other—some of them are even helping each other with PPE [personal protective equipment] supplies, which people are getting from non-medical companies,” said Haider. “We’re discussing day-to-day issues. It’s peer support, educational stuff, getting up to date with guidelines.”

The dangers of Facebook

Between managing the views and opinions of thousands of people and keeping discussions on topic, Facebook groups can quickly spread into unforeseen areas—and with such high stakes, it’s important to ensure that personal pleas for help aren’t missed in the torrent of posts.

Walker has set up a separate support group for those running the PMG UK group. “It’s very hard at the best of times running a big Facebook group, but at the moment it’s very difficult,” she said.

Loder saw some groups put too much credence on reports out of France about the deleterious effects of ibuprofen in patients with covid-19. In part, that’s a natural response to the changing situation, trying to establish a coherent response to a new disease about which little concrete information exists. But there is a risk of groupthink, she warned. “Social media, in addition to being really helpful, can be a hindrance. Some of these ideas get a lot of play and publicity in many venues.”

Still, the physicians that The BMJ spoke to were in no doubt that PMG groups are a major help in an extraordinary time for medical workers. “Many of us haven’t treated in [respiratory medicine] in a long time,” said Sabry. “It’s only natural to want a refresher, especially since hospitals are now asking for help that are traditionally not in the [intensive care] setting.”

The thing that makes these groups work so well—shared experience—is really coming into its own. “I don’t think there’s been a situation like this where all of us have the same problem,” said Loder. “Before it would be posts about having problems with promotion. Now everybody has this experience in common, and people—because they’re isolated at home and not seeing as many colleagues at work—value these groups for social reasons as well as professional reasons. I think they’ve become much more important.”

Provenance and peer view: Commissioned; not externally peer reviewed.
Competing interests: I have read and understood BMJ policy on declaration of interests and have no relevant interests to declare.
Published by the BMJ Publishing Group Limited. For permission to use (where not already granted under a licence) please go to http://group.bmj.com/group/rights-licensing/permissions