Dear Colleagues,

Does our current life sometimes feel like *Groundhog Day* or *Waiting for Godot*? or perhaps both? The monotony of routine and eternal waiting — is there a destination and will we ever reach it? The good news is that this too shall pass? step by step, together with patience, compassion, empathy, and resilience.

One of those things that will soon come to pass, thank goodness, is the 2020 election. While we may not know the final tally in the days immediately following, it?s election eve, and if you did not vote early, now is the time. This video, ?I Have a Right to Vote [1],? will provide additional inspiration about how critical it is to participate. As UC President Michael Drake wrote us this morning, ?If you are eligible to vote but haven?t done so yet, it?s not too late!? You can learn about same-day voter registration, find your polling place, and get information online about what?s on your ballot [2]. **After tomorrow, you will no longer have a chance to cast your vote.** Emotions and anxiety levels are running high, and whatever the outcome, we must support one another. If you manage a team, please review the excellent Suggestions for Leaders to Support their Teams during the 2020 U.S. Election in the Context of COVID-19 and Other Ongoing Stressors [3], created by the UCSF Cope Wellbeing Subcommittee in the Department of Psychiatry.

Need something to get you through election day? How about listening to *Saturday Night Stories* [4]? It?s a new, limited-run podcast that will bring you deeply personal stories behind breakthroughs that happen at UCSF. In the first episode, you?ll hear separately from Christina Mangurian, Max Krummel, and Tejal Desai — who refused to take ?no? for an answer.

Now, on to this month?s *Expresso*. I shine a spotlight on colleagues who strive to help us and others find peace within themselves and, for some, at the end of their lives. I?ll also share my thoughts on the State of the University address that Chancellor Hawgood delivered last week.

- COVID-19 ?The Great Accelerator?: Reflections
- Empathy and Resilience: Getting through tough times together
- Palliative Care and COVID-19: Thoughts from the front line

One striking and unsurprising theme is the overarching impact of racism. The strength it takes to be resilient when confronted by pervasive racism on a personal and institutional level is immense. It is absolutely vital to ensure that choices are presented to all, rather than only to some because of long-held and practiced inequities.

Is there someone you?d like to highlight at UCSF? Please let me know at ExecutiveViceChancellor@ucsf.edu [5].
To your health and well-being,
Dan

P.S. Unfortunately, my Tip from September 2019 [8] recommended the Mueller Vegetable Chopper which has just been recalled. More details, including determination if a purchase is impacted and what should be done next, can be found here [7].

COVID-19 ?The Great Accelerator?: Reflections

What impact did Chancellor Sam Hawgood?s recent State of the University address, aptly titled ?Resolve and Resilience,? have on you?

For me, his address framed our multifaceted and tortuous situation within the context of our dynamic UCSF community and the excellence of its members, while also recognizing the need to prioritize our inward-facing work.

The one constant in our lives now is change, and more of it is in store for us. As we have experienced over the past eight months, change comes from every aspect of life. There was a time when it seemed like change happened in one area or another ? a natural disaster, political landscape, social unrest ? and in one part of the country or another. Now, we are in the throes of at least five that are washing over both the nation and the world.

Chancellor Hawgood called COVID-19 ?the Great Accelerator.? Indeed, while the pandemic did not create all the change we?re experiencing, it has accelerated many pre-existing trends: the closure of conventional stores, increased profit of online commerce, shift to telework and telehealth, further economic divide, greater health disparity, and demonstrated inequity around caring for dependents ? among others.

In a one-hour address, and the three videos that debuted in the program, this State of the University conveyed the immense pride and sobering responsibility felt by the chancellor and his leadership team. Watch the full recording [8] ? you won?t regret it.

***

Research

There?s no question that our research mission has made a strong impact on our battle against the pandemic. Here?s a quick recap:

- The COVID Host Genomics Consortium [9] is focused on better understanding the genetic basis of disease risks and protections and integrating this knowledge into better patient care.
- COMET Study [10] researchers are mapping out features of the immune system related to COVID-19 susceptibility and severity, with an eye toward more effective therapies.
- The Quantitative Biosciences Institute?s Coronavirus Research Group [11] has assembled a global network of top scientists to unveil the key proteins in our cells that are hijacked by the SARS-CoV-2 virus during infection and is using this information to identify dozens of drug candidates, including already approved compounds, with the
potential to stop the virus in its tracks.

On the other side of the coin, I send my gratitude to the researchers and their learners who continue to work remotely and my appreciation for their eagerness to return to campus when it is safe to do so.

**Partnerships**

In line with our Anchor Institution initiative [12], UCSF has furthered its community partnerships, including strong participation in a coordinated public health response led by municipal and state leaders, including Mayor London Breed and Governor Gavin Newsom.

Indeed, multiple UCSF teams have kicked into high gear and collaborated to address this public health emergency, providing COVID-19 testing for underserved communities and ensuring that those who need care receive it. Neighborhoods include Bayview, Sunnydale, Visitation Valley, the Mission District, and Oakland?s Fruitvale, and populations include the unhoused. This important focus reflects our longstanding commitment to health equity and is one way that UCSF strives to ensure that the most vulnerable among us don?t slip through the social safety net. UCSF took immediate action in many areas of the organization.

**Financial resiliency**

This past June and August, *Expresso* contained stories about ?Tightening our collective fiscal belts [13]? and ?Tightening the Belts Another Notch [14].? The situation hasn?t changed, and as Chancellor Hawgood said, ?we need to balance responsible short-term responses with the imperative to continue investing strategically in our future.?

I realize that our financial landscape can be perplexing and encourage you to explore the UCSF Finance Secure [15] portal (login required). You?ll find the latest Finance-related secure reports and information.

**Institutional racism**

As this issue of *Expresso* was being developed, I saw that the three stories intersected on the issue of institutional racism.

We at UCSF have heard the anguished outcry to condemn and abolish anti-Blackness and institutional racism. The attention and action that we have taken to examine our own institutional culture and practices show that to advance health worldwide means that UCSF must look carefully at its own health and the well-being of its community members.

As explained in the State of the University address, the Anti-racism Initiative, led by Vice Chancellor Renee Navarro and launched this past summer, supports and extends the important work that UCSF advocates have been advancing since the civil rights movement began some 60 years ago. Like our research efforts, many teams must be involved, and the UCSF Black Caucus, the Chicanx Latinx Campus Association, the Diversity Matters program at the School of Medicine, and many others are building on this legacy at a critical time in the country?s history.

The troubling events of this year have given us greater urgency in our work to address practices that explicitly, unconsciously, or systemically disadvantage people of color in our
community.

I have heard from several leaders of UCSF resources and programs, which help us cope with the instability in our lives, that they have reached maximum capacity, and reports indicate that the trauma from navigating and calling out systemic racism and white supremacy is affecting our UCSF community, particularly Black members.

We all must confront the evils of structural racism and its impact on our colleagues who are Black, Indigenous, and people of color. Those of us with privilege need to double down on our empathy. UCSF must respond to the incredible challenges of racial inequity with a fundamentally deeper dive to understand and clearly communicate with all people, enabling decisions not limited by what an inequitable system dictates, but that create choices and opportunities for all.

***

The ?Great Accelerator? that is COVID-19 has heightened disparities between the haves and have-nots, to be sure, but as clinicians, researchers, educators, learners, and support staff, we are seizing the chance to overcome the virus, provide care to vulnerable populations, and educate the public.

This is a global pandemic ? the virus does not discriminate. We have had no greater illustration of our common humanity and must appreciate that we all matter to each other. If we?re going to manage this crisis, we must do it together.

back to top

**Empathy and Resilience: Getting through tough times together**

Our colleague Maga Jackson-Triche, Department of Psychiatry, tells a story that encapsulates much of what?s happening in 2020: One of our clinicians, working at home due to the pandemic, is seeing patients via telemedicine while simultaneously homeschooling two young children. Wildfires engulf tens of thousands of acres, consuming communities, and the clinician?s elderly parents ? one with cognitive challenges ? are evacuated at 2 a.m. and move in with the family. Add to this a powerful movement to finally confront anti-Black bias and abolish institutional racism, in the midst of one of the nation?s most contentious presidential elections.

?That?s the height of stress,? Maga says.

At UCSF we strive to uphold our reputation for excellence, and many of us are driven to be the best we can, but we are human, and we can only deal with so much stress coming at us.
Resiliency is critical to survival, but like endurance, it takes work and a little help goes a long way. Sometimes, we simply need a hand to make it through the challenges. That’s where Maga and her team come onto the scene with their program, felicitously named Cope: the UCSF Employee Coping and Resiliency Program [16]. (I know, it’s not really an acronym, but the name is perfect.)

Together they took swift action when the pandemic hit and built Cope with help from Human Resources and our Center for Digital Innovation. It has a chatbot that asks a few simple questions to assess your mental health and steer you to the right place for help, typically within 48 hours. Thanks to an anonymous donor, it also has after-hours telehealth clinics and a lot of valuable online information for self-care. To date, the system has had more than 25,000 visits, a huge indication of its impact. And another generous donor included funds so that the program, in addition to helping UCSF employees and trainees, can modify the digital chatbot tool to be used with patients.

Being resilient is part of self-preservation, but then there’s also the value of empathy. Most of the time, we instinctively show and are shown empathy. But sometimes it is difficult to do so when individual stressors take over, and tepid conflicts seem to boil over at the slightest provocation.

Maga adds: ‘Most people don’t wake up in the morning thinking they’re going to be rude to somebody, but it can happen in the heat of a moment. It’s okay to take a little timeout if you’re in danger of behaving in ways you wouldn’t want anyone to behave with you.’ Her advice: ‘Relax. Take a deep breath before you talk or act on something.’

Shannon Weber, director of our PleasePrEPMe program (which promotes pre-exposure prophylaxis that’s been crucial to stop the spread of HIV), and the author of Show Up Hard: A Road Map for Helpers in Crisis, has many useful ideas for boosting both your resilience and your empathy. (Check out her website [17] for more information on her books and her beautiful messages of love.)

’Unfortunately, empathy gets thought of as a soft skill, but it takes a lot of bravery and courage,’ Shannon says. ’One of the hardest things I do each day is making the choice to show up with empathy. Our empathy muscle can get fatigued. What’s the answer? Work that empathy muscle! One way to strengthen it, Shannon says, is to go on an empathy adventure? read a novel or watch a film outside of your ordinary. Volunteer.

To be successful in both empathy and resilience takes cross training. This has become harder in the pandemic, but it’s possible by leveling and setting realistic expectations for yourself and your interactions. Shannon calls it becoming a boundary ninja, unabashedly tending to your self-care. Another way of approaching it: in case of a loss in air pressure, put on your own oxygen mask before assisting others.

As this pandemic continues to prove its own endurance and show no sign of fatigue, I urge us all to be creative in finding ways to restore ourselves and others that are time- and cost-effective. Shannon keeps a hula hoop near her desk. Go for a short walk. Make a cup of tea. Sing your favorite song at full volume. Write in a journal. Take a weekend offline. Host a virtual friends’ get-together. Visit with loved ones or volunteer for strangers (with appropriate COVID precautions, of course).
Palliative Care and COVID-19: Thoughts from the front line

The last seven months of COVID-19 have done more to raise the visibility of palliative care than the last 25 years. That’s how long Mike Rabow, UCSF Helen Diller Family Chair in Palliative Care, says that people in his field have been trying to bring palliative care to the world.

While hospice care emerged as a movement in the 1960s, palliative care gained prominence in the 1990s, when AIDS still represented a near-certain death. Doctors saw people dying under less-than-compassionate conditions—without their wishes being known, without their symptoms being controlled. While it started as “end-of-life care,” it evolved to include care for people dealing with serious illness. And, while medicine has worked for years to prolong people’s lives—to boost the quantity of life—palliative care preaches the gospel of improving the quality of life during whatever time one has.

Palliative care deals with distress and the effort to relieve suffering, placing a focus on what matters greatly to people: what their wishes are if they develop a serious illness and if they come to the end of their life. COVID-19 has abruptly underscored the intensity of the practice by bringing these aspects immediately together due to the experiences of death and near-death the disease has wrought on patients and their loved ones, as well as the various levels of distress it has inflicted on all of our lives. We’ve all heard the heartbreaking accounts of COVID-19 patients separated from family members, many dying connected to loved ones only by a phone or tablet, if anything at all.

The magnitude and swiftness of COVID-19 has overwhelmed the capacity of many palliative care teams. Increasingly, doctors are relying on a key team member to help them manage the sensitivities surrounding COVID patients: the chaplain.

Chaplains have been an integral part of UCSF since 1960, providing spiritual and emotional care to patients, their loved ones, staff, and providers. Services offered by Spiritual Care Services at UCSF are inclusive and provided by a diverse group of professional chaplains and trainees. Director Susan Conrad saw the medical staff at its bravest and most confident when the pandemic came to San Francisco in March. “There was a sense of, ‘We’re going to get through this together,’” she says. “We’re built for this. So many folks rose to that challenge of really providing excellent care. And as time has gone on and we’ve had multiple other crises, we are still providing excellent care, but it’s become more challenging. There’s more of a sense of feeling overwhelmed.”

Stoicism is a common trait among health care professionals, but that just doesn’t work when every day brings instability to many aspects of life. For Susan, “What works is to be able to connect through the heart to one another as colleagues and say, ‘Yeah, this is really hard?’ to make spaces where we can cry together. For me that’s been very helpful. It’s about allowing the heart to break open.”
Jun Caole, a staff chaplain at Mission Bay, uses the saying, “Shared grief is grief diminished. Forced to come face to face with our own vulnerability and confronted with the reality that as care providers we will be affected by the pandemic, we need to just let it be.” Jun and other members of the team find relief by creating a safe space where they open up about their vulnerabilities and put aside their professional identities, sharing emotions, fears, hopes, and their dreams that are being interrupted by this crisis.

The pediatric palliative care team at Mission Bay created something called Honoring Our Losses, an opportunity for staff to get together via Zoom and grieve the losses of patients through the years, particularly this past year. A poignant account stuck with Jun from one of the palliative care team rounds. A physician was so affected by the scale of the sickness around her that she let the dishes pile up in the sink and left crumbs on the floor one day. She told the team, “I’m not that kind of person, but because of COVID, I realize I cannot be perfect anymore, and just have to let myself be now and then.”

Spiritual Care Services provides many support resources, and Susan stands ready to offer ideas. She’s gathered groups for reflective exercises and for meditation. She encourages people to think of others who give them support or inspiration and to practice gratitude — not to force it, but to notice when it naturally arises, or when we can invite it in. “There is a movement toward micro-appreciation,” she says. “When so many things are breaking apart, and we don’t know what to trust, call to attention small things to be grateful for — amazing colleagues, quirky pets, special family times.” In her own gratitude practice, Susan is grateful to work at an institution where people care for others so deeply.

These and other tips and services can be accessed anytime, at two phone numbers for Spiritual Care Services that are answered 24/7, 365 days a year — at Mission Bay, 415-476-9720, and on Parnassus and at Mount Zion, 628-248-9664. For other UCSF locations and non-urgent needs, reach them at 415-353-1941.

A veil of grief hangs over our minds and hearts with over one million deaths worldwide. I encourage you to check out this beautiful post about grief [18], co-authored by BJ Miller and Mike Rabow.

back to top

**Dan’s Tip of the Month**
For Thanksgiving, my staff asked me to share a favorite holiday recipe. Immediately, two time-honored family dishes came to mind — Keto Chocolate Mousse (from my daughter) and Jeff’s Pancake (from one of my classmates in medical school). Traditionally, Thanksgiving desserts have been all about the pumpkin, but I challenge you to shake things up a bit (seems appropriate given this past year) — go chocolate and serve this amazing and surprisingly light, yet decadent dessert. Also, instead of waiting for the main meal, why not start the day with an awesome breakfast treat? Butter, cinnamon, sugar, and apples nestled in pancake batter — truly heartwarming and stomach-satisfying. Both food for comfort and thought—enjoy!