Student-Run Activities Decreasing Stigma of Mental Illness Among Medical Students

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Learning Objectives

1. Discuss need for implementing activities addressing student mental health during pre-clinical years and the benefits of student-facilitation of such activities

2. Identify opportunities to incorporate activities into the curriculum while utilizing student-faculty collaboration

3. Discuss long-term strategies for incorporating self-care into professional development
Background

Depression
- 10-25% of medical students experience moderate-severe depression

Suicidal Ideation
- 10% of medical students experience suicidal ideation compared to 6.9% of the US general population 25-34\(^3\), \(^4\)

Burnout
- Roughly 50% medical students experience burnout at some point in medical school\(^3\), \(^4\)

Distress
- Medical student distress leads to decreased empathy and interest in caring for underserved populations; poor ethical conduct and poor professionalism\(^5\)

Reported Physician Suicides:
1897: 47\(^1\)
Present: 300-400\(^2\)

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Barriers to Seeking Treatment

- Depression-associated stigma
- Confidentiality concerns
- Lack of faith in mental health services
- Feeling that stress is normal in medical school
- Fear of professional sanctions (i.e. not matching into residency)³,⁶

July 2011: American Osteopathic Association House of Delegates approved Resolution 205 which aims to increase awareness of depression among medical students and knowledge of available treatment options. ⁷

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**Stigma:** mark of disgrace or shame associated with a certain quality or circumstance

- **Self stigma:** internalization of beliefs of the stigmatized identity
  - Leads to decrease in self-efficacy and self-esteem undermining personal and professional goals as well as participation in treatment
  - Depressed medical students endorse more **stigma-associated beliefs** than those not depressed


- Seeing a counselor is **risky**
- Asking for help would mean the student's coping skills were **inadequate**
- Others would find them **unable** to handle medical school responsibilities
- Fellow medical students would **respect their opinions less**
Antidote to Stigma

- Enhances **self-esteem** and self-efficacy, improves relationships and expectations at work and social settings\(^1\)
- Improves **sense of power** over the experience of mental illness and stigma\(^1\)
- Disclosure-based anti-stigma campaigns are **3x more effective** than education (myth-busting) campaigns alone\(^2\)
- Invites critical reflection and **challenges assumptions**\(^2\)

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Strategies:

“How are we supposed to address the stigma of mental illness in the general population if we are unwilling and unable to do so within our own profession?”

“Mental Illness Among Us”—a student-led curriculum at UCSF School of Medicine

- Voluntary
- Near-Peer teaching regarding mental illness
- Peer sharing of mental health experiences
- Decrease in social distance
- Increase in willingness to interact with individuals with mental illness

Developed PCOM’s Patient Perspective

Patient Perspective: Purpose

Normalization

- Destigmatize mental health diagnoses
- Diagnoses awareness
- Safe environment for disclosure

Self-Care

- Legitimize asking for help
- Stress level awareness
- Coping mechanisms
Patient Perspective: Timeline

OMS-2 Fall (T1)  Neuroscience (T2)

Committee Formation
- Faculty Engagement
- IRB

Recruitment
- Panelists
- Break-Out Leaders

Participant Preparation
- Mock Break-Out Session
- Panelist Meet & Greet

Online Wellness Survey
- Results Analysis

Patient Perspective
- Purpose
- Results Review
- Panelist Stories
- Faculty Validation
- Break-Out
- Wrap-Up

Fall (T1) Neuroscience (T2)
Class of 2014:
- 147 respondents;
- 43 with a diagnosis = **29.25%**;
- **14%** with depression

Class of 2015:
- 140 respondents;
- 54 with a diagnosis = **38.5%**;
- **15%** with depression
Behaviors Endorsed When Stressed or Depressed

Number of respondents

- Exercise more
- Exercise less
- Do physical harm to self
- Eat more than usual
- Eat less than usual
- Study more
- Study less
- Isolate yourself
- Seek more social interaction
- Use controlled illegal substances
- Use more prescription or OTC meds
- Drink more alcohol
- None of the above
- Other
- Sleep more
- Sleep less

Class of 2014
Class of 2015
A) People with severe mental illness can recover enough to have a good quality of life.

B) The public needs to be protected from people with severe mental illness.

C) I would use the term “crazy” etc. to describe to colleagues people with mental illness that I have seen on the wards.

D) If I had a mental illness, I would not tell this to my colleagues for fear of being treated differently.

E) If my colleague told me he/she had a mental illness, I would still want to work with him/her.

F) I feel comfortable talking to a patient with a physical illness.

G) I feel comfortable talking to a patient with a mental illness.

Mean Difference in Responses, Pre-test to Post-test

Students attitudes universally shifted towards **increased acceptance** and **decreased stigma** of those with mental illness.
Student Wellness and Academic Transition Team Initiative

Structure

Message

SWATTI: Methods

Early

Often

Honest

Mental Health Committee

Voluntary

Inclusiveness
Peer Support Program

- Organized program
- Followed up with Team Leaders
- Member of Mental Health Committee
- Gathered feedback
- Created events
- Prompted Squad Captains
- Ambassadors for mental health resources
- Trained
- 1:3 ratio
SWATTI: Methods in Action

“Myth-Busting”

- People who take time for themselves do poorly in school
- 70% on an exam = 70% as a person
- No one will understand what you are going through
- People who ask for help are weak and incompetent
Changing the Culture

Policy
- Osteopathic Community
- PCOM
- Interpersonal
- Intrapersonal

- American Disabilities Act
- AOA Resolution 205
- Chief Diversity Officer
- Safe Zones
- Climate Survey
- PCOM SWATTI
- Patient Perspective
## PCOM SWATTI: Expansion

| OMS-1 | (Orientation) Peer Support Program: a dynamic student venture  
|       | (Term 1) You Are Not Alone: An Introduction to Student Wellness |
| OMS-2 | (Term 2) Neuroscience Patient Perspective  
|       | Evaluation of stigma components and effectiveness |
| OMS-3 + 4 | Reflection of professional dilemmas  
|           | Narrative medicine workshops |
“Physician, heal thyself.”

Term 1 Victory Hallway for Class of 2017
Key Players

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PCOM Class of 2014
PCOM Class of 2015

“Nobody realizes that some people expend tremendous energy merely to be normal” - Albert Camus