Abstract

The goals of the Behavioral/Mental Health interest group were to:
• Support participants' professional development
• Reinforce the importance of interprofessionalism in caring for healthcare professionals to support individuals with mental illness

Methods

The interest group met on a monthly basis via video conferencing.

• Initial meetings established the group’s goals and focus, based on group members’ interests.
• Later meetings explored broad behavioral/mental health topics, such as medication-assisted treatment, child/adolescent psychology, and eating disorders.
• Group leads prepared monthly clinical cases, featuring patients presenting with the mental illness of interest.
• Every month, guest speakers were invited to provide their expertise on the topic and describe how they would address the given patient case (See Figure 1 for example case).
• To emphasize the importance of interprofessional care and increase the scope of the discussion, experts were recruited from a variety of healthcare professions.
• For example, for the medication-assisted treatment discussion, the guest speakers’ backgrounds were:
  - Family medicine physician
  - Addiction psychiatry specialist
  - PhD LCSW
  - PharmD
• After each guest speaker presented, interest group members participated in an interactive Q&A session to further explore the topic.

Results

A Google Form survey was sent out to Behavioral Health Interest Group members to assess their involvement or satisfaction with the group. Each survey item offered the following responses:
• Strongly Agree
• Agree
• Neutral
• Disagree
• Strongly Disagree

A total of 10 out of 16 group members responded to the survey, resulting in 62.5% participation. Members were given 7 days to submit responses. The following figures and tables show detailed information on the questions and responses given.

Discussion and Future Directions

Major Takeaways:
• Interprofessionalism in mental health care is important to get multiple perspectives on how to provide optimal care to patients struggling with mental illnesses.
• Multiple opportunities for healthcare professionals to advocate for mental health and behavioral health patients, such as health-related resources and interaction with health policy, are often underutilized.
• Mental health care and treatment is complex, making it necessary to include a multidisciplinary approach to fully understand the patient's background and needs.

Positive experiences:
• Learning about proper language to use to end stigma associated with mental health language in healthcare.
• Complex patient cases reviewed by healthcare professionals was beneficial to see different input based on different professions.

Future improvements:
• Increasing more volunteer opportunities to help local patient populations and increase student involvement.
• Increased variety in meeting structure by having more involvement from student members to increase participation and take pressure off interest group leaders.
• Starting interest groups during the beginning of fall semester instead of waiting until December for increased exposure in the different areas of mental health.
• Incorporating more question-based meetings with breakout groups to encourage discussion from group members during patient cases.

Future directions:
• Our interest group monthly meetings and member feedback helps future healthcare professionals interested in behavioral health to better understand the needs and goals of future healthcare professionals.
• Future interest group leaders are welcome to take our feedback from members to cater group meetings and student engagement towards their group members.
• COVID-19 has provided our group members and interest group leaders with the challenge of virtual meetings to follow social distancing protocols. Our transition into virtual life lays a pavement for future group members with transportation issues an opportunity to conveniently be involved in behavioral health case discussions.

References


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