Effectively Instituting a Longitudinal Wellness Curriculum

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Background
Medical schools across the US are recognizing the unique stressors of medical training and many have adopted wellness programs to combat the trend of increased rates of student depression and burnout. The ideal strategies, however, for addressing deficits in the curriculum and improving student wellness have not been well established. At the University of Connecticut Schools of Medicine and Dental Medicine, students have access to a variety of wellness offerings. It has yet to be determined how effective these services are at meeting students’ needs.

This project sought to:
1. Identify the wellness resources currently available at UConn
2. Assess students’ perception of current wellness resources
3. Identify areas for improvement and development to address identified deficits
4. Publicize and promote existing and new wellness events and resources

Student Wellness Committee
The University of Connecticut Student Wellness Committee was created in 2015 following the appointment of a Director of Student Wellness by the medical school leadership. The Director position was created to collaborate with the Associate Deans to incorporate wellness throughout the curriculum and plan events to promote wellness, balance, and professional development. Medical students with an interest in wellness were recruited to assist the Director and other faculty members in achieving these goals. Since then the committee has grown to include 13 medical/dental students and three core faculty physicians.

In 2016, the committee created a formalized leadership structure and appointed student leaders for several subcommittees: curriculum development, mentoring, peer support, physical health, integrative medicine, and communications. In an effort to guide initial committee actions, a survey was designed and distributed to all medical students (107 respondents) that sought to assess students’ perception of the wellness resources already in place including “Med Families”, mental health services, and integrative medicine events and gather ideas for ways to improve these resources.

Results from this initial survey indicated:
• 30% of students rated their mental health as “poor” or “very poor” in the previous two weeks
• 32% of students sought mental health services from UConn during their time as a student

Of these, 78% listed their experience with these services as “very poor” to “average”
• 49% of students felt that Med Families met their expectations “not at all” or “less than I hoped” citing issues such as poor student attendance, scheduling difficulties, and large family size as common frustrations

Based on these results, the committee decided to focus its reform efforts on:
1. Improving accessibility and diversity of options available to students seeking mental health services
2. Making minor changes to the Med Family program to improve students’ experiences
3. Collaborating with the Integrative Medicine Interest Group to support their efforts

Wellness Curriculum

Online Resources
• Existing Resources:
  - Database of wellness resources including links to documents, audio files, and videos addressing all aspects of student wellness including mental health, stress management, nutrition, sleep, exercise, and creative expression
  - Integrative Medicine Interest Group: monthly integrative medicine newsletter and calendar of upcoming events

New Initiatives:
• In the process of creating a wellness website housed directly on medical school page that includes links to resources listed above as well as an interactive events calendar

Recommendations:
• Improve communication with student body regarding wellness offerings through e-mails, announcements, and calendars

Social Support

Existing Resources:
• Peer Support: Student-operated organization offering confidential support services to classmates
  - Med Families: Student-operated, longitudinal, formalized peer-to-peer mentorship program among medical students across all four years (participation mandatory only for MSIs)
  - Student lounge: common area in academic wing with couches, folders, TV, ping pong tables, etc. with 24-hour student access

New Initiatives:
• Developed a newsletter on the Wellness Committee leadership
  - Provided training to Peer Support members in confidentiality and therapeutic interviewing skills
  - Assigned members of Peer Support to specific Med Families to provide targeted outreach
  - Surveyed MSIs and MS2 students and placed them with students with similar interests

• Limited Med Family size by recruiting more upper classmen to serve as mentors

Recommendations:
• Continue to recruit faculty who are willing to serve as Faculty Support members to augment Peer Support Set aside time during academic hours for Med Families to meet

Physical Wellness

Existing Resources:
• Peer Tutor who provide academic support as needed
• Financial wellness lectures and workshops put on by Student Services
• Free access to SALT (web-based financial literacy courses)
• Career Development and Mentoring Program using resources from Careers in Medicine (CiM) curriculum and website
• MS’s select academic advisors for guidance with clerkship scheduling and residency applications

New Initiatives:
• None

Recommendations:
• Continue communication from administration regarding expectations and deadlines for clerkship scheduling, USMLE Step exams, and residency applications

Greater emphasis on specialty specific career advising

Emotional Wellness

Existing Resources:
• Free confidential mental health and substance abuse services available to all students through Outpatient Psychiatry and CHIPS (Confidential Help for Impaired Professional Students)
• “Mind-Body Spirit” and “Healer’s Art” electives for MS1 and MS2

Initiatives:
• Improved counseling services provided by Peer Support by training members in confidentiality and therapeutic interviewing skills

Recommendations:
• Foster a culture of openness and acceptance by encouraging all students to utilize counseling services
• Increase the number of mental health providers available to improve the diversification of providers and provide more timely care
• Offer periodic mental health screenings
• Institute suicide prevention and crisis counseling
• Provide support for spouses/partners/families (e.g. couples counseling)

Professional Support

Existing Resources:
• Peer Tutor who provide academic support as needed
• Financial wellness lectures and workshops put on by Student Services
• Free access to SALT (web-based financial literacy courses)
• Career Development and Mentoring Program using resources from Careers in Medicine (CiM) curriculum and website
• MS’s select academic advisors for guidance with clerkship scheduling and residency applications

New Initiatives:
• None

Recommendations:
• Continue communication from administration regarding expectations and deadlines for clerkship scheduling, USMLE Step exams, and residency applications

Greater emphasis on specialty specific career advising

Final Conclusions

Although individual programs and events are important components of a wellness student plan, the ultimate goal of the Wellness Committee is to foster a culture of wellness among students, faculty, and staff so that wellness becomes a central, rather than supplemental, part of the curriculum. During the first two years of medical school this may take the form of a longitudinal curriculum that provides students with concrete self-care skills including resiliency training, periodic mental health checks, opportunities for regular physical activity, and creation of a network of supportive relationships with other students, faculty, and staff. During third and fourth year, the emphasis could switch to cover a prolonged time for wellness in the midst of the stresses of clerkship rotations and residency applications. The wellness skills that the students gain through this curriculum will then readily translate to residency training to reduce burnout symptoms as they move forward in their careers.

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