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BACKGROUND

- Studies show medical students have a higher prevalence of anxiety and depression than age-matched peers and up to 11% admit to suicidal thoughts in the past year¹.
- Students also experience obstacles to seeking treatment, leaving many concerns unaddressed.
- Recent studies have shown the importance of peer engagement in addressing mental health and supporting those experiencing distress since many students turn to peers when in crisis².
- Mental Health First Aid Training (MHFAT) is a nationally available course which teaches participants how to recognize and respond to a mental health crisis, and is now offered as a 4-hour long virtual option. Although a study demonstrated improvement in confidence and knowledge in UK students, little is known about impact of MHFAT on US medical students.
- Following favorable pilot group results presented at AAMC 2020, this study aims to evaluate the longitudinal impact of MHFAT upon a large cohort of first-year medical students, and its potential to aid wider efforts to improve peer support and mental health resources.
- MHFAT covers the diagnosis of mental health disorders, how to apply an action plan in different clinical situations, and the opportunity to practice intervention strategies.

AIMS

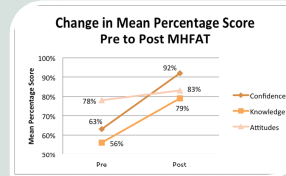
- Understand components of MHFAT and its utility as a resource to guide student response to a mental health crisis
- Evaluate the effect of MHFAT on student knowledge, confidence, and attitudes towards mental health crises
- Assess potential for MHFAT to promote wellness and improve student health outcomes by enhancing peer support

METHODS

- MHFAT was organized and scheduled over zoom to the entire class of first-year medical students as a part of orientation curriculum at Wayne State University School of Medicine (WSUSOM).
- Surveys were anonymously administered to participants (n=290) before training (94% response rate), and immediately after training (71% response rate).
- Surveys assessed students' self-reported attitudes, confidence, and knowledge about mental health problems and ways to intervene as well as how they anticipated to use the information gained from the training in the future.
- Respondents indicated their level of agreement with statements assessing each attribute (knowledge, attitudes, or confidence) on a 5-point Likert scale, with higher scores reflecting more positive outcomes. A combined mean percentage score for each attribute was calculated, and compared before and after training.
- We plan to survey students again 6 months after training (February 2020) to assess longitudinal impact of the training.

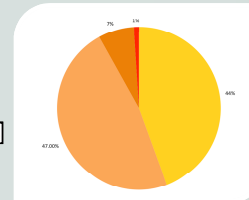
RESULTS

- Following the training, students reported: increased confidence levels coping with, knowledge regarding, and positive attitudes and beliefs towards mental health

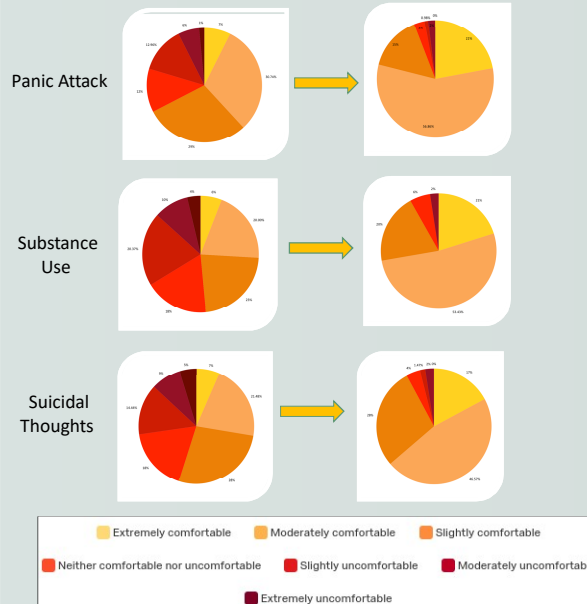


- 91% of students felt more confident assisting someone to seek professional help after MHFAT.

Strongly Agree Agree Neither agree nor disagree Disagree Strongly Disagree



- Prior to the training, only 28-76% felt comfortable helping someone in a mental health crisis, which increased to **82-94%** immediately following training. Graphs below demonstrate specific change in comfort level for panic attacks, substance use, and suicidal thoughts pre-and-post MHFAT.



Results Continued

- Following training, student comfort levels increased in addressing all surveyed mental health crises.
- Students also felt better equipped with mental health knowledge, more confident in reaching out to peers and offering appropriate assistance, and reported a further decrease in already low levels of stigmatizing attitudes and beliefs towards mental health issues.
- Immediately post-training, most students thought the training could be of use as a peer/friend, family member, and volunteer. Almost all students agreed that MHFAT should be offered to future classes.

Do you believe that MHFA training will help you in the future:

| | |
|------------------------------------|-----|
| Support a friend or family member? | 91% |
| For clinical work with patients? | 90% |
| For volunteer work with patients? | 92% |

"This was an extremely useful and important training to receive and I appreciate that we received it early on in our med school journey."

"It was incredibly helpful in giving someone like me who had no prior mental health first aid experience a road map as to how to help others struggling with mental health".

CONCLUSIONS

- This study demonstrated the initial impact of MHFAT, an established curriculum, in improving student knowledge, attitudes, and confidence in recognizing and acting when someone experiences a mental health crisis and self-reported increased knowledge of mental health disorders.
- Considering most medical students who experience mental health symptoms in training turn to a peer/colleague for support, empowering the student body to recognize peers in distress and offer help/resources may improve student health and wellbeing.
- Six-month follow up data will provide further insight into whether improvements were sustained and translated into interactions with both patients and peers. It will also address if students indeed found the training helpful during interactions both with peers and with patients.

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