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## WHEN TRAGEDY HITS MEDICAL SCHOOLS: Coping Strategies for the Learning Community

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#### **OBJECTIVES**

#### **Attendees will:**

- <sup>a</sup> Understand the prevalence of tragic events in UME
- <sup>a</sup> Recognize effective strategies that promote resiliency when learning communities experience loss

#### **Action items:**

Develop a crisis toolkit to employ in the event that a tragic event occurs

### SESSION OUTLINE

- 1. Data presentation
- 2. Panel Discussion:

  Learning communities

  that experience loss
- 3. Small group discussions

## OSR SURVEY ON TRAGEDY IN MEDICAL SCHOOLS

#### <sup>a</sup> Survey period:

<sup>a</sup> March-April 2016

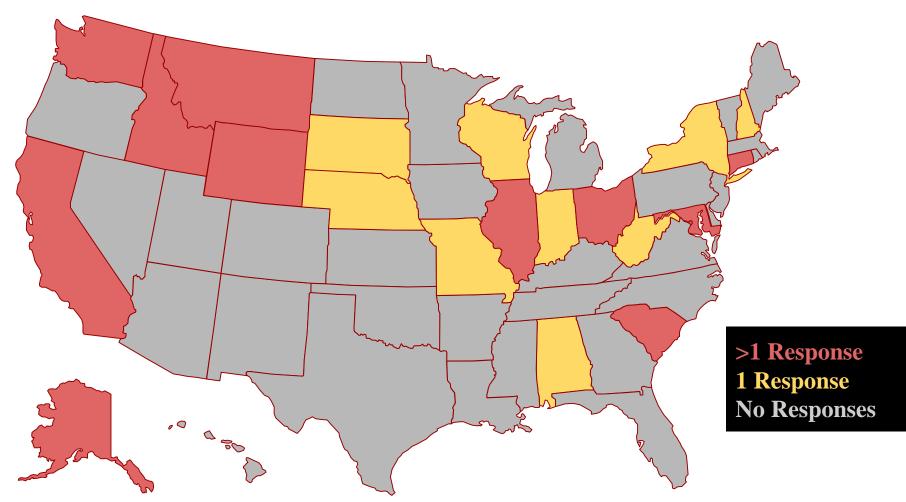
#### <sup>a</sup> Methodology:

<sup>a</sup> Elective participation; advertised via OSR email listserv

#### <sup>a</sup> Survey respondents:

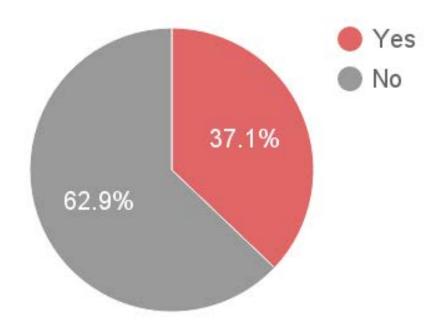
- a 97 students responded
- <sup>a</sup> OSR representatives from >20 medical schools across the country (all regions represented)

### **RESPONDENTS BY STATE**



#### **INCIDENCE OF TRAGEDY**

<sup>a</sup> Has a tragedy ever affected your medical school class since beginning medical school?



### TYPES OF TRAGEDY EXPERIENCED

Response	0/0	Count
Serious accident/illness/accidental death involving a student	31.7%	19
Suicide of a student	20.0%	12
Serious accident/illness/accidental death involving a faculty or staff member	20.0%	12
Suicide of a faculty or staff member	3.3%	2
Disappearance/kidnapping of student	1.7%	1
Disappearance/kidnaping of faculty or staff member	0.0%	0
No tragedy has directly affected my medical school class	40.0%	24
Other:	10.0%	6

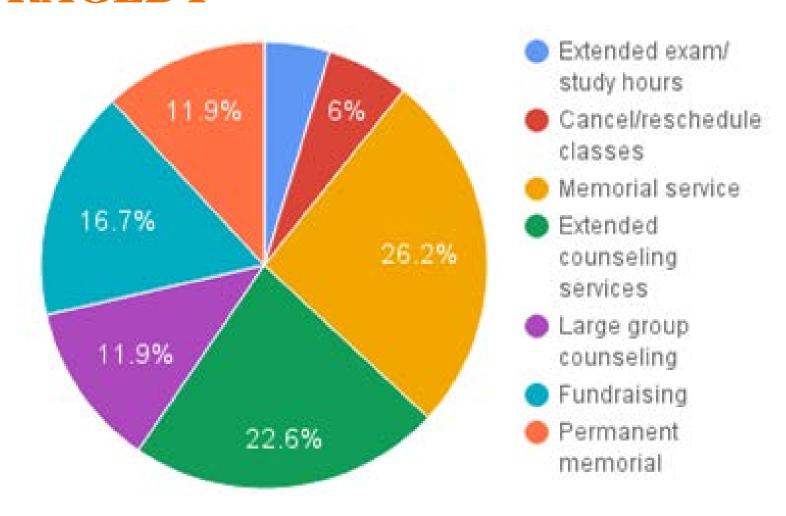
"It has radically changed my class."

"I didn't seek help because I wasn't sure whether there was an effective person to approach."

"It was very difficult for those that had to continue working while also trying to mourn."

"I think, as a whole, the medical education community is still being more reactive instead of proactive about these tragedies. Our school and others are working on this, but there are not widespread effective guidelines that we can look to on these issues. Until then, too many will suffer in silence, and it's hard to imagine that this would not affect current and future patient care."

## INSTITUTIONAL RESPONSES TO TRAGEDY



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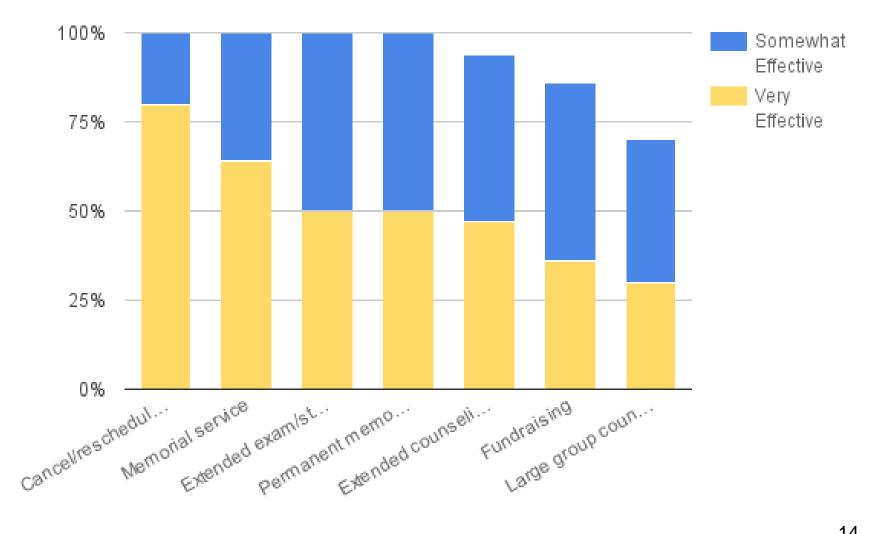
#### Most common

- 1. Memorial service
- 2. Extended counseling hours
- 3. Fundraising for victim's family or an important cause
- 4. Permanent memorial
- 5. Large group counseling session

#### Most Effective

- 1. Cancel/reschedule classes
- 2. Memorial service
- 3. Permanent memorial
- 4. Extended exam/study hours

### EFFECTIVENESS OF RESPONSES **FOLLOWING TRAGEDY**



## OTHER STRATEGIES TO PROMOTE COPING

Small, informal memorial service open only to class members "It was a time for us to support each other and be vulnerable together"

Obituary emailed to all of institution

Timely

Compassionate

Informative: memorials, counseling, details surrounding tragedy

Recognition during large group sessions

#### **OUR PANELISTS**

- <sup>a</sup> Dr. Donna Elliott :: Keck School of Medicine of USC
  - <sup>a</sup> Senior Associate Dean for Student and Educational Affairs
- <sup>a</sup> Dr. Carolyn Kelly :: UCSD School of Medicine
  - <sup>a</sup> Associate Dean for Admissions and Student Affairs
- <sup>a</sup> Dr. Charlie Pohl :: Sidney Kimmel Medical College
  - <sup>a</sup> Senior Associate Dean, Student Affairs & Career Counseling Associate Provost for Student Affairs
- <sup>a</sup> Kate Carroll :: UCSD School of Medicine
  - <sup>a</sup> Fourth Year Medical Student

# Tell us about when your institution experienced a tragedy and how your school responded.

What elements of your school's response worked well? What was not effective?

## Was there any framework in place that made crisis management easier?

What do you wish you had in place before tragedy struck that might have improved your school's response?

## What barriers prevented your institution from mounting the most effective coping response?

## What can be done to prevent medical students from committing suicide?

## QUESTION & ANSWER

Ask our panelists!

## Small group discussions

## Identify a strategy to take back to your institution

What resources will you need to execute this plan?

What are some barriers that might prevent your learning community from coping with tragedy?

## THANK YOU!

Your feedback on our session will be greatly appreciated.