

Developing a Wellness Curriculum for Medical Students: What to Include and How to Deliver

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for the

COSA Working Group on Medical Student Wellbeing
WGEA Spring 2022

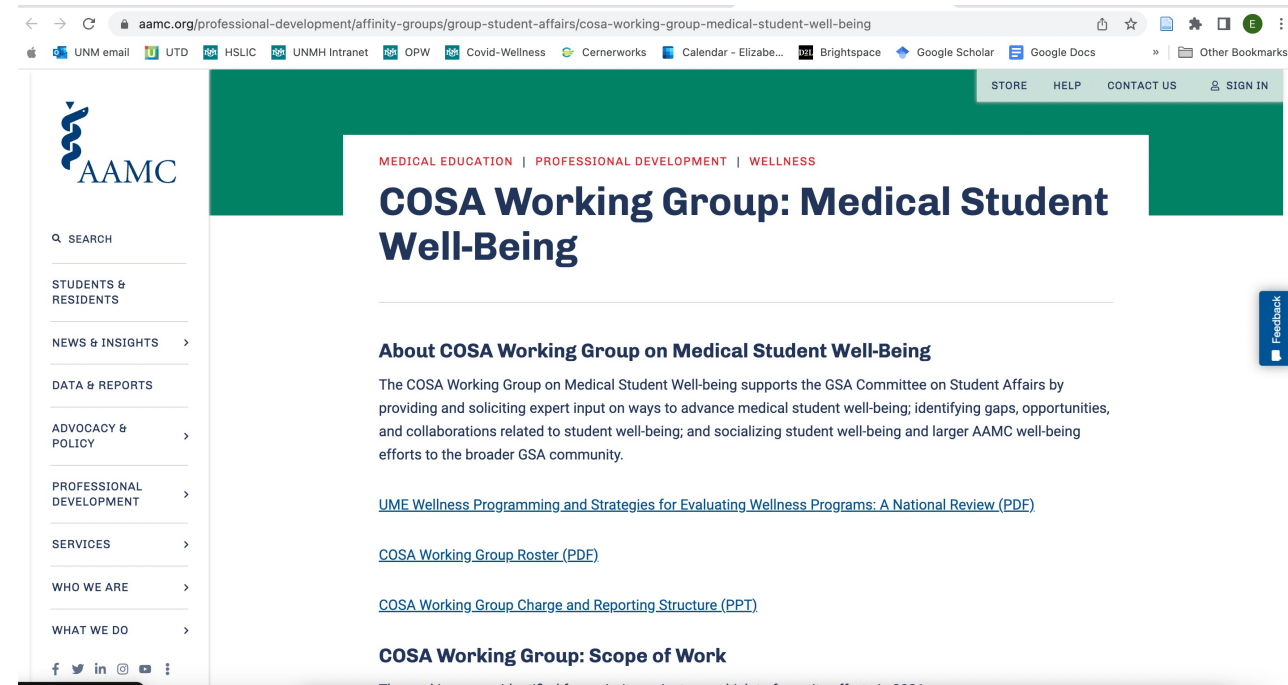
Authors and Speakers

- Liz Lawrence
- Wei Wei Lee
- Michelle Lizotte-Waniewski
- Maggie Rea
- Chantal Young

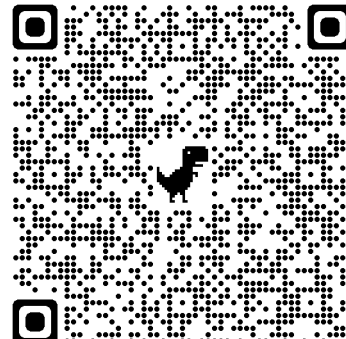
We have no disclosures.

What is the COSA Working Group on Medical Student Well-being?

- Formally convened in April 2019
- We are a group of passionate volunteers supporting the GSA and our national community to further well-being for medical students everywhere
- We have a chair, 2 representatives from each region, a student, and some essential help...



The screenshot shows the AAMC website page for the COSA Working Group on Medical Student Well-being. The page features the AAMC logo on the left and a navigation menu with categories like 'STUDENTS & RESIDENTS', 'NEWS & INSIGHTS', 'DATA & REPORTS', 'ADVOCACY & POLICY', 'PROFESSIONAL DEVELOPMENT', 'SERVICES', 'WHO WE ARE', and 'WHAT WE DO'. The main content area has a green header with the text 'MEDICAL EDUCATION | PROFESSIONAL DEVELOPMENT | WELLNESS' and the title 'COSA Working Group: Medical Student Well-Being'. Below the title, there is a section titled 'About COSA Working Group on Medical Student Well-Being' which describes the group's mission and provides links to documents such as 'UME Wellness Programming and Strategies for Evaluating Wellness Programs: A National Review (PDF)', 'COSA Working Group Roster (PDF)', and 'COSA Working Group Charge and Reporting Structure (PPT)'. At the bottom of the main content area, there is a section titled 'COSA Working Group: Scope of Work'.



Our Work Thus Far

2019-2020

- Published best practices related to:
 - Wellness curricula & programming
 - Strategies for evaluating wellness programs

2020-2021

- Published guidelines for supporting students during COVID (including 1:1 check-ins)
- Surveyed schools to understand current makeup and function of wellness programs
- Community Call

Current Projects

1. Open-source wellness repository with curricula and programmatic content

Team: Dr. Maggie Rea, Dr. Liz Lawrence, Dr. Michelle Lizotte-Waniewski

2. Recommendations for systemic changes to the local learning environment

Team: Dr. Christa Zehle, Dr. Kathleen Kashima, M2 Jeff Woods

3. A process for evaluating wellness programs including sample survey items

Team: Dr. Katie Daly, Dr. Alex Wolanskyj-Spinner, Dr. Wei Wei Lee, Dr. Alicia Hurtado

Literature Review

- UME Wellness Programs/Curricula
 - 2000-2020
 - 51 articles reviewed
 - 15 systematic reviews
- Takeaway: *Design and approach of wellness programs varied widely among medical schools*

<https://www.aamc.org/media/56246/download?attachment>

Results from Curricular Survey

- 10/1/2019 - 11/25/19, 142 schools were invited to participate
- 23 schools completed curricular survey
- 54 different wellness topics were identified
- Of the schools, that that completed survey, great majority mandated wellness-related topics
- The top 3 topics most often taught were:
 - Intro to Wellness/Self-Care/Self-Compassion; Seeking help/mental health care while in medical school
 - Mindfulness/Mind-Body Medicine/Staying present in the moment
 - Resilience; Personal Resilience/Wellness Plans; Resilient Professional Identity

Designing a Wellness Program: Core Wellness Curricular Topics

Open-source repository with readymade PPTs

- Led by Drs. Rea, Lawrence and Lizotte-Waniewski
- Selected 22 topics to include
 - Conducted literature review
 - Engaged national wellness listserv
 - Discussion and feedback received from committee

Top Three Topics

**Overview of
Wellness**

**Mental Health
and Suicide
Prevention**

**Impostor
Phenomenon**

Other Curricular Topics

1. Overview of medical student well-being – what it is, why it matters, why you matter, resources, asking for help
2. Impostor syndrome/phenomenon
3. Managing mental health – anxiety, stress, depression, burnout
4. Suicide awareness and prevention
5. Physical well-being – nutrition, sleep, and exercise
6. Growth mindset and grit
7. Self-compassion
8. Cognitive distortions and what to do with them
9. Time and energy management
10. Mindfulness/meditation
11. Positive psychology, finding meaning in medicine
12. Peer support, social connectedness, belonging
13. Self-reflection and self-awareness
14. Assertiveness, limit setting, communication skills
15. Debriefing critical incidents, managing negative outcomes
16. Spirituality, awe and mystery in medicine
17. Substance misuse and other addictive behaviors
18. Financial well-being
19. Shame and vulnerability
20. Structural approaches to well-being, how to become a well-being advocate
21. Coping with disappointment and grief
22. Coping with gross anatomy/cadaver work

Repository of Curricular Templates

- Readymade, open-source PPT templates on a variety of topics can be found on our website
- The creators of the slides are credited on the slide, so users can “mix and match”
- Each PPT templates include talking points/scripts in the notes section and references/resource lists

Sample Curricular Template

An Overview of Medical Student Wellness

Dr. Michelle Lizotte-Waniewski, Director of [HealthFirst](#), Florida Atlantic University, Charles E. Schmidt College of Medicine

Dr. Margaret Rea, Director of Student and Resident Wellness, University of California Davis School of Medicine

Dr. Elizabeth Lawrence, Chief Wellness Officer and Assistant Dean of Professional Wellbeing, University of New Mexico School of Medicine



Lizotte-Waniewski, et al, 2021

INSTRUCTION and CONTEXT:

By way of introduction, this presentation is designed to discuss not only the activities that support medical student wellness but also data/evidence that encourages medical student buy-in. Because medical students have very logical minds (and because the elements of the presentation are evidenced-based) where ever possible and appropriate, data is provided to support the recommendations.

There are some optional activities presented in the powerpoint at various points which can be included in the presentation or not depending upon the time that is available for the talk. The original version of 38 slides is designed to take 1 hour with all of the activities included. The notes section of the powerpoint contains suggested talking points (when helpful), references to support statements in the slides (where appropriate) and image credits for any images used in the slide.

Why Focus on Wellness in Med School?

- You have chosen a challenging career! ^(1,2)
 - 27% rate of depression
 - 32.4% alcohol abuse among medical students
 - Low treatment rates for depression or mental illness
 - 2.47x higher suicide rate than general population
- Attributes of doctors predispose to burnout. Which ones?



- 1) Dyrbye LN, West CP, Satele D, Boone S, Tan L, Sloan J, et al. Burnout among US medical students, residents, and early career physicians relative to the general US population. *Acad Med.* 2014;89(3):443–5.
 - 2) Rotenstein LS, Ramos MA, Torre M, et al. Prevalence of depression, depressive symptoms, and suicidal ideation among medical students—a systematic review and meta-analysis. *JAMA.* 2016;316(21):2214–36.
- Lizotte-Waniewski, et al, 2021

Talking Points:

The practice of medicine can have dangerous consequences to physicians who are not prepared for its unique challenges. *Suggested Interactive Activity* – survey students about attributes of doctors that predispose to burnout: imposter syndrome, perfectionism, inability to say “no”, failure to delegate, intense desire to serve others (angel doctor).

Resources for Slide Content:

- 1) Dyrbye LN, West CP, Satele D, Boone S, Tan L, Sloan J, et al. Burnout among US medical students, residents, and early career physicians relative to the general US population. *Acad Med.* 2014;89(3):443–5.
- 2) Rotenstein LS, Ramos MA, Torre M, et al. Prevalence of depression, depressive symptoms, and suicidal ideation among medical students—a systematic review and meta-analysis. *JAMA.* 2016;316(21):2214–36.
- 3) Dyrbye, Liselotte N. MD, MHPE; Shanafelt, Tait D. MD Commentary: Medical Student Distress: A Call to Action, *Academic Medicine*: July 2011 - Volume 86 - Issue 7 - p 801-803 doi: 10.1097/ACM.0b013e31821da481
- 4) Rubin R. Recent suicides highlight need to address depression in medical students and residents. *JAMA.* 2014;312:17251727

Image Credits:

Doctor on Floor Image: [Young doctor in a lab coat sitting on a floor in hospital corridor touching her head](#) — Photo by ArturVerkhovetskiy, -CCO public domain - This image is not copy righted and no attribution is required

Doctor with Wings - CCO public domain - This image is not copyrighted and no attribution is required [Referer-URL:https://www.pxfuel.com/en/free-](https://www.pxfuel.com/en/free-)

Challenges in Wellness Curriculum Design

- Mandatory or optional or mixed?
- Integrated into overall curriculum or presented as separate curriculum?
- Designed by faculty or students?
- How many hours? Length of sessions?
- In which years?
- Taught by whom?
- Topics to be added or deleted?

General Student Preferences

- Wide variability in what students want
 - mere existence of wellness offerings most important?
- Preferred approaches
 - Optional instead of required
 - Longitudinal
- Increased information and visibility for offerings
- Build community, relationships

Experiential & Individualized Preferred

- Some students resent being “lectured to” about wellness
- Supporting students finding individualized paths to wellness
- Student-initiated programming a strong alternative to faculty-created

Faculty-Identified Themes

“Structured activities to change student perspectives”

“Structured teaching of coping strategies”

Student-Identified Themes

“Individualized paths to resiliency”

“Defining effective advisors”

“Perspective changes with time and experience”

QUESTIONS/COMMENTS?

Small Breakout Groups

- You will be assigned to a small group for the next 25 minutes.
- Each person should have a handout.
- Agenda:
 - Introduce yourselves – name, title, institution, whether or not you have wellness curriculum
 - Designate a reporter
 - As a table, come to a consensus for the question(s) your table has been assigned.
 - Please be prepared to share your reasoning

Large Group Debrief

Lessons learned from our experiences

- Do a listening tour to get buy-in.
- Less lecturing - more personal stories and panels
- Don't be wedded to the 50-minute hour
- Always acknowledge what you are doing about LE stressors
- Hold to the same standards as other curricula
- Keep it specialized
- Keep it sophisticated
- Keep it honest

Questions and Next Steps