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Mental Health Resources & Healthcare Professional Students

Matthew A. Knealing University of North Dakota

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Mental Health Resources & Healthcare Professional Students Matthew A. Knealing PA-S, with Dr. Jeannie McHugo PA-C & Professor Julie Solberg, MSPAS Department of Physician Assistant Studies, University of North Dakota School of Medicine & Health Sciences Grand Forks, ND 58202-9037

Abstract

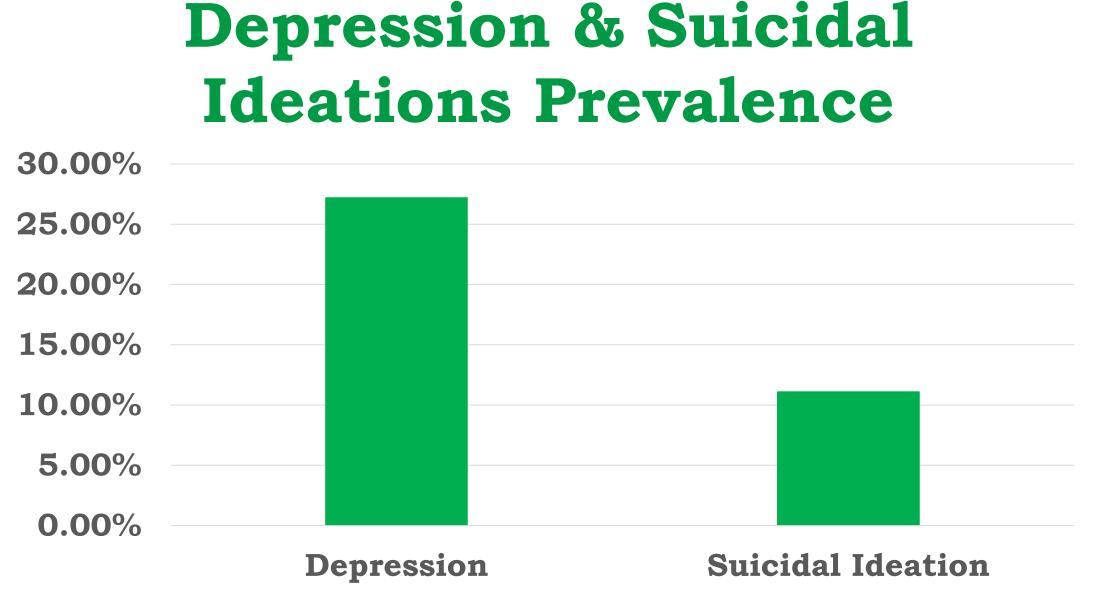
The reasoning for this review of literature is to determine if implementing mental health resources in graduate healthcare programs decreases the rate of depression and suicidal ideations. In this review of literature, five databases were searched. They included: PubMed, PsycInfo, CINAHL Complete, Clinical Key, and the Cochrane Library from September 15 to January 3, 2020. Due to the topic being dynamic and receiving more acknowledgment in recent years, articles reviewed were restricted to the last six years within the United States. Works chosen were peer-reviewed, which included meta-analysis, cross-sectional, systemic reviews, longitudinal and, survey method studies. Sources that were excluded included opinion-based editorials without primary research. This review concluded with 16 articles reviewed. The research in this review shows the prevalence of depression and suicidal ideations amongst graduate healthcare professional students. With the topic being brought into light, much of this research shows that cognitive-based therapy can decrease the previously mentioned stressors of graduate healthcare school. Other articles reviewed show methods for effective screening of depression and suicidal ideations along with the implementation of peer reflective groups, pass/fail grading, and the effects of sleep and exercise in this population. Implementation of mental health resources has begun to show promise versus previous methods of as needed services through campus student services. The research indicates that decreasing depression, as well as suicidal ideations, are multifactorial with CBT being effective, but more research, as well as implementation, is needed to determine which screening method along with what resources prove best. Keywords: students medical, depressive disorder therapy, education graduate, ideations suicide, suicide, and students physician assistant.

Introduction

Depression and suicidal ideations are prevalent problems in healthcare suicidal ideations (Rotenstein et al., 2016). professional students. These equate to greater than 25% for depression and 10% for suicidal ideation (Lockwood, 2018). Supplemental resources • The development of depression has an increased short-term risk of have long been available at most universities, but fear of stigma has suicide and a high long-term risk of morbidity. (Rotenstein et al., 2016). prevented many students from utilizing these resources. The purpose of **Compounding Factors (Drugs & Alcohol)** this study is to highlight the most effective ways of implementing mental • Emotional exhaustion and constant stress can lead students to selfhealth resources to decrease the prevalence of depression and suicidal medicate with alcohol and other illicit drugs like marijuana. (MacLean, ideation in healthcare professional students. Booza, & Balon, 2015)

Statement of the Problem

• Students who reported drinking too much were more likely to have a According to the Association of American Medical Colleges, the United PHQ-9 score of moderate to severely depressed with a p-value < 0.001. States will have a projected shortage of upwards of 120,000 physicians by (Martinez et al, 2016). the year 2032 (Culbertson, 2018). Graduate healthcare professional • Nearly one-third of students admit to increasing their alcohol programs are traditionally known to have low attrition rates; however, it is consumption while in school. (Merlo, Curran, & Watson, 2017). paramount to attempt to decrease mental health issues among these students. Recent data from the American Medical Student Association **Cognitive Based Therapy (CBT)** shows that healthcare professional students are three times more likely to • When surveyed after implementation of CBT 34% of students believed it commit suicide than others their age. Also, depression is twice as common was helping them and an additional 15% started implementing better in this population (American Medical Student Association, [AMSA], 2019) coping mechanisms. (Chang, Eddins-Folensbee, Porter, & Coverdale, 2013).



N= 129,123 Students

Figure 1 by Matthew Knealing, adapted data from Rotenstein, L., Ramos, M., Torre, M., Segal, J., Peluso, M., Guille, C., ... Mata, D. (2016). Prevalence of depression, depressive symptoms, and suicidal ideation among medical students: A systematic review and metaanalysis. Journal of the American Medical Association, 316(21), 2214-2236. http://dx.doi.org/10.1001/jama.2016.17324

Research Question

In healthcare professional students, does the implementation of mental health resources versus supplemental resources decrease the rate of suicide and depression?

Literature Review

Depression Prevalence

• Implementing depression screening of students and limiting clinical hours could combat fatigue and depression (Cocke, Klocko, & Kindratt, 2019).

• The fast-paced, intense nature of PA school often leads to high stress with little time for reflection of self-care (Cocke, Klocko & Kindratt, 2019). • Based on PHQ-9 scores47.15% of PA students had mild to severe depression (Clocke, Klocko, & Kindratt, 2019).

• Based on PHQ-9 scores, 27.5% of medical students had mild depression and 17.0% had moderate to severe depression (Thompson, Mcbride, Hosford, & Halass, 2016).

• Students who felt they did not receive the support they needed from their family or friends had a high level of emotional exhaustion (71.4%) on the Maslach Burnout Inventory. (Thompson, Mcbride, Hosford, & Halass, 2016).

• Many students believe that informing others of their depression could negatively affect their careers. (Wimsatt, Schwenk, & Sen, 2015).

Suicidal Ideations Prevalence

• From July 2006 to June 2011, six medical students from a pool of 90 different schools committed suicide. (Cheng, Kumar, & Nelson, 2014).

• Educator awareness of signs of mental illness and stress may help decrease student suicide. (Cheng, Kumar, & Nelson, 2014).

• Out of 129,123 medical students, 11.1% of students screened positive for

• The use of marijuana among students was surveyed at 18.2%. (MacLean, Booza, & Balon, 2015).

• Schools may benefit from identifying and decreasing barriers to mental health counseling. (Chang, Eddins-Folensbee, Porter, & Coverdale, 2013). • Healthcare students are willing to utilize online-based CBT which may lead them to increased benefit. (Lattie, Duffecy, Mohr, & Kashima, 2017).

• With online CBT students perceived stress decreased and they increased their implementation of coping skills. (Lattie, Duffecy, Mohr, & Kashima, 2017).

• Implementation of CBT from screening students dropped depression and anxiety by over 50% (Mascaro et al., 2018).

• With screening and implementation of CBT, UC San Diego medical school and healthcare system experienced six less suicided in eight years than the previous timespan. (Norcross et al., 2018).

Trending Additional Methods

• Implementation of pass/fail grading showed improved grade percentages of medical school students with a perceived increase in well-being. (Ange, Wood, Thomas, and Wallach, 2018).

• Lack of sleep and insomnia showed a greater risk of depression, anxiety, and alcohol abuse. (Wolf & Rosenstock, 2016).

• From adding peer support groups 83.4% of students reported an improved feeling of well-being. (Gold, Bentzley, Franciscus, Forte, & Golia, 2018).

Discussion

Current literature shows depression and suicidal ideations in graduate healthcare professionals' students being significantly higher than the general population. The largest study which confirms this data was done by Rotenstein et al. which was meta-analysis in nature with 129,123 students of which 27.2% screened positive for depression, and 11.1% screened positive for suicidal ideations. The research shows that graduate healthcare students do use avoidance coping mechanisms as a way of dealing with the stressors of school. One of the most noted avoidance coping mechanisms used by students was the use of alcohol. Implementation of screening for depression and referral to CBT has been shown to decrease depression and suicide in students.

Limitations still exist on screening students for depression and suicidal ideations as well as proper program initiation into graduate healthcare schools. Additional methods such as peer reflective groups, pass/fail grading, and proper school/life balance do show promise.

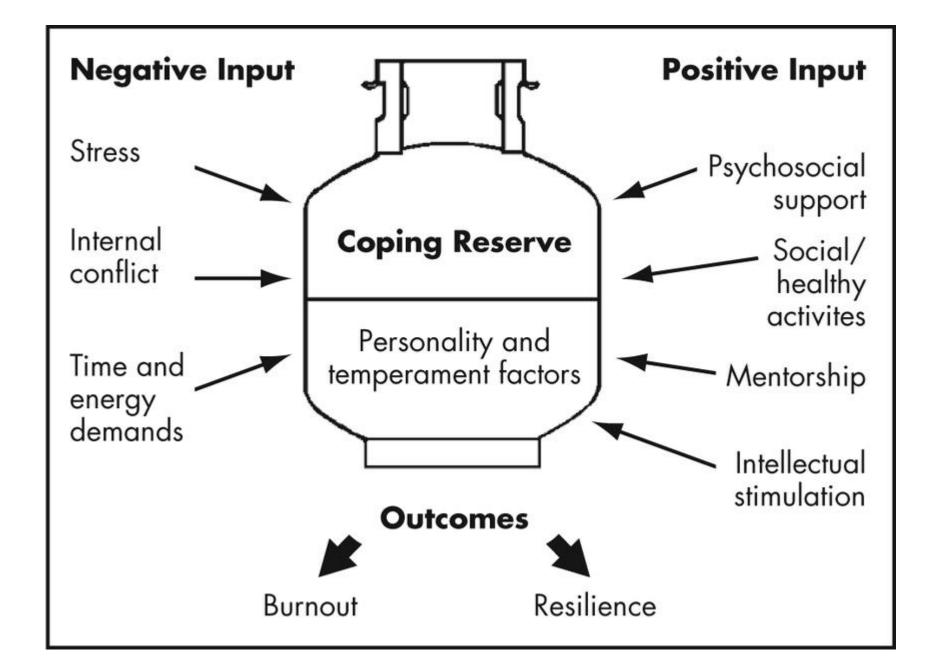


Figure 2, image from Dunn, L., Iglewicz, A. & Moutier, C. (2008). A conceptual model of medical student well-being: Promoting resilience and preventing burnout. Acad Psychiatry 32, 44–53 (2008) http://dx.doi.org/10.1176/appi.ap.32.1.44

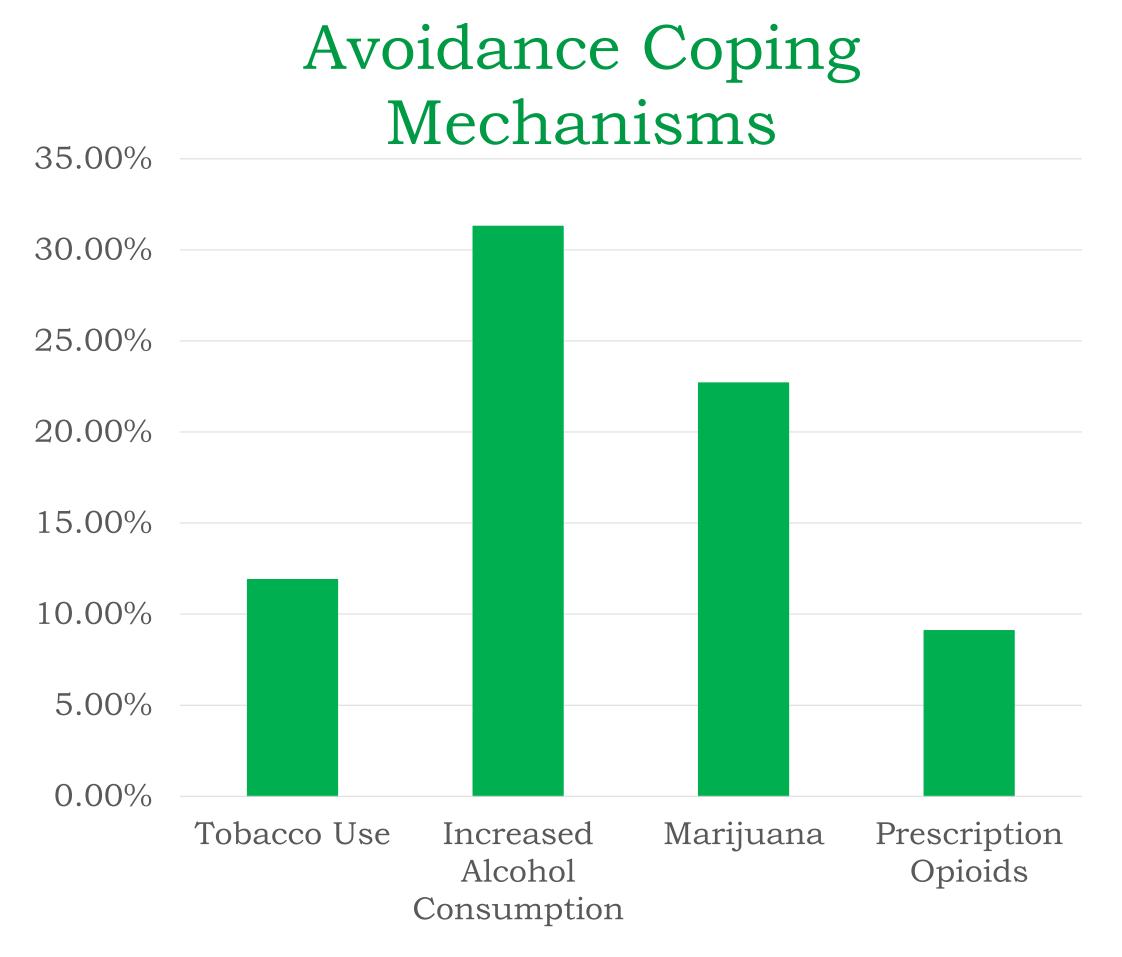


Figure 3 by Matthew Knealing, adapted data from Merlo, L., Curran, J., & Watson, R. (2017). Gender differences in substance use and psychiatric distress among medical students: A comprehensive statewide evaluation. Substance Abuse, 38(4), 401–406. http://dx.doi.org/10.1080/08897077.2017.1355871



Applicability to Clinical Practice

With the information obtained from this literature review, healthcare professional students, as well as academic institutions, will be able to identify which resources work best in their institution in decreasing the rate of depression and suicidal ideation in graduate healthcare students. Implementation of these mental health resources will lead to lower attrition of healthcare graduate students and better combat the shortage of healthcare providers.

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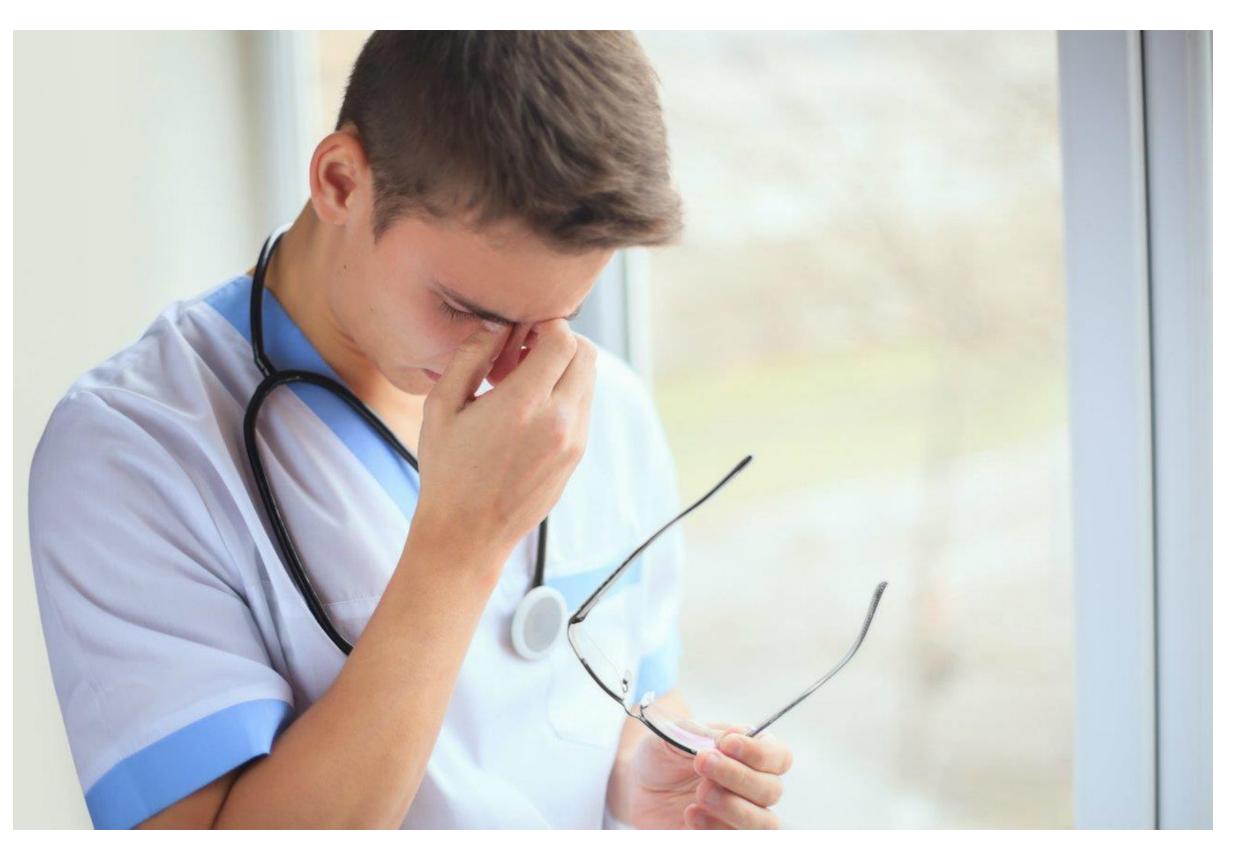
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