



*Reducing stigma through a
mentor video – a potential
tool to reduce stigma in
medical trainees*

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Memorial University of Newfoundland



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Faculty/Presenter Disclosure

Faculty: Heather Flynn

Relationships with commercial interests:

Grants/Research Support: NIL

Speakers Bureau/Honoraria: NIL

Consulting Fees: NIL

Other: NIL



Faculty/Presenter Disclosure

Faculty: Stephen Darcy

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Speakers Bureau/Honoraria: Nil

Consulting Fees: Nil

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Mental Health in Medical Students and Trainees

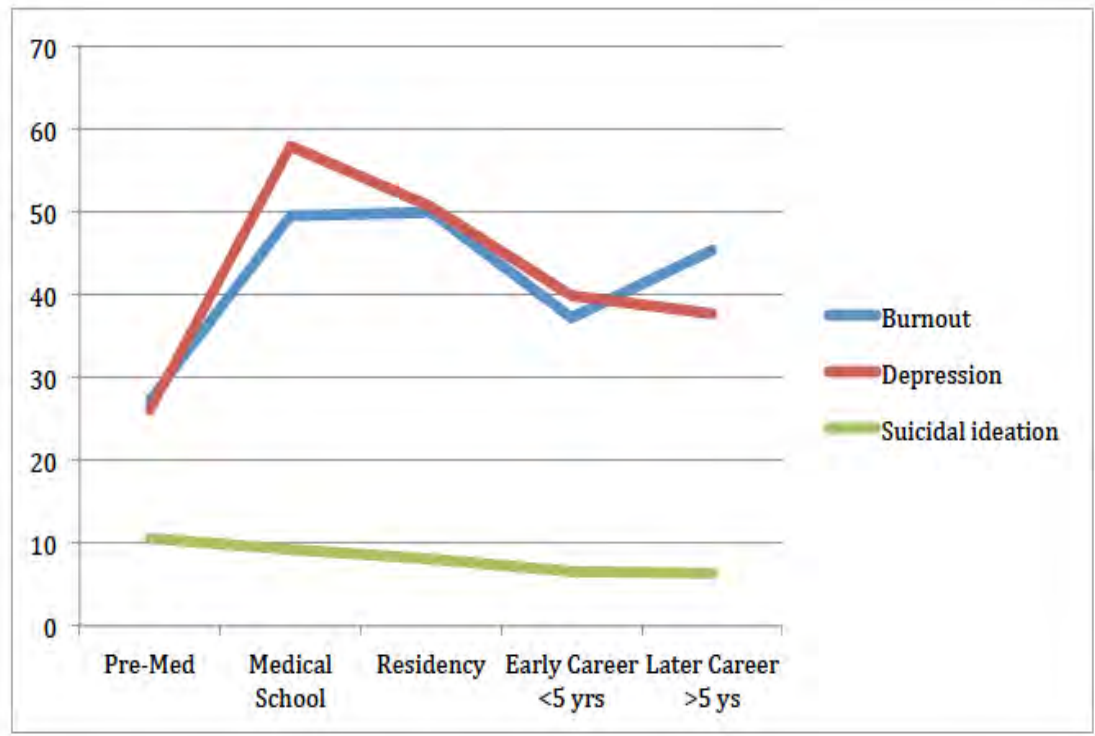
A Snapshot



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Brazeau 2014; Dyrbre 2014; Shanafelt 2012



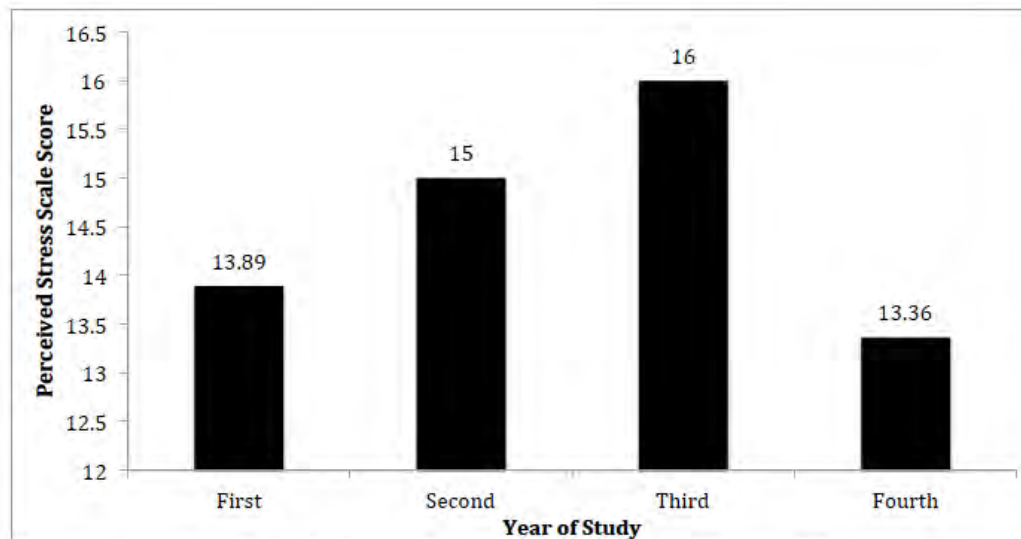


Figure 2. Averages of perceived stress (measured using the PSS) by year of student in medical students. There was no significant difference found between any year. However, an increasing trend in stress was observed until it dropped in students in their fourth year of study.

Rideout unpublished





Acad Psychiatry (2015) 39:37–46

DOI 10.1007/s40596-014-0202-z

EMPIRICAL REPORT

Mental Health Self-Care in Medical Students: a Comprehensive Look at Help-Seeking

Jessica A. Gold • Benjamin Johnson • Gary Leydon •
Robert M. Rohrbaugh • Kirsten M. Wilkins



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Table 2 Behavioral patterns by year in school (year 1–year 4+)

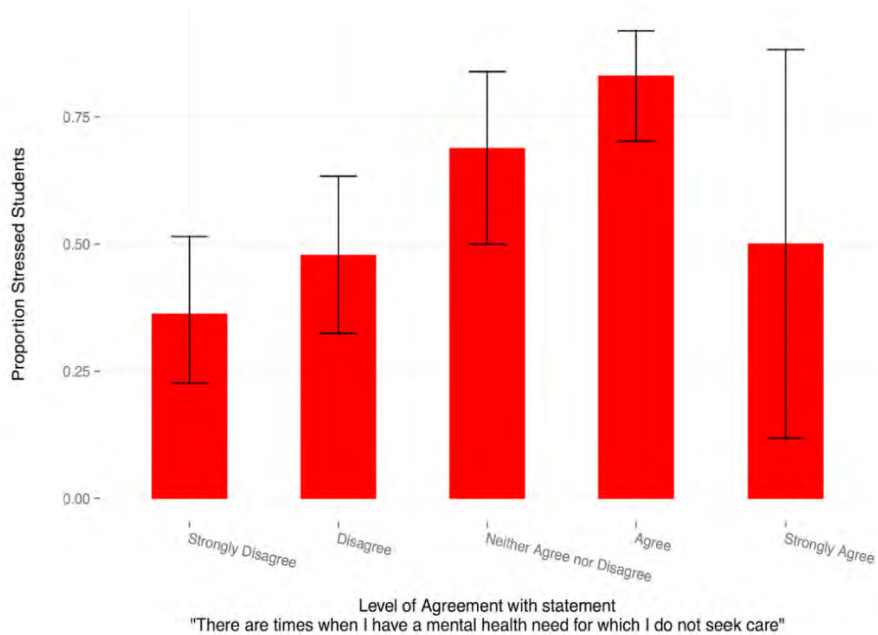
	Year 1 (N=35)	Year 2 (N=31)	Year 3 (N=38)	Year 4+ (N=78)	p value (for test of difference between years)
Have primary care provider (%)	45.7	54.8	60.5	71.4	0.007
Visit primary care provider (%)	94.3	87.1	84.2	79.5	0.045
Seek treatment when sick (%)					0.026
Never	2.8	12.9	10.5	19.2	
Seldom	51.4	58.1	52.6	53.8	
About half the time	37.1	19.4	28.9	19.2	
Usually	8.6	6.5	7.9	7.7	
Always	0.0	3.2	0.0	0.0	

Gold 2015





Fig. 1 Stress vs. untreated mental health needs. Stress significantly correlates with untreated mental health needs ($p < 0.001$). A student who reports feeling stressed is more likely to report also having untreated and increased (not shown) mental health needs ($p < 0.001$)



Gold 2015

Barriers to healthcare seeking among medical students: a cross sectional study from South India

Vikas Menon,¹ Siddharth Sarkar,¹ Santosh Kumar²

Table 2 Barriers to healthcare seeking

	Mental healthcare	Physical healthcare	Continuity corrected χ^2 (McNemar's p value)	OR (95% CI)
Lack of time	185 (40.1)	272 (59.0)	43.500 (<0.001)*	0.46 (0.36 to 0.60)
Fear of unwanted intervention	260 (56.4)	160 (34.7)	47.578 (<0.001)*	2.43 (1.86 to 3.17)
Unsure where to seek help	232 (50.3)	111 (24.1)	78.689 (<0.001)*	3.19 (2.41 to 4.23)
Lack of confidentiality	282 (61.2)	130 (28.2)	109.620 (<0.001)*	4.01 (3.04 to 5.29)
Stigma	211 (45.8)	77 (16.7)	102.843 (<0.001)*	4.21 (3.10 to 5.71)
Cost	53 (11.5)	103 (22.3)	27.284 (<0.001)*	0.45 (0.32 to 0.65)
Fear of side effects	139 (30.2)	198 (43.0)	20.144 (<0.001)*	0.57 (0.44 to 0.75)
Fear of impact on academic performance	179 (38.8)	143 (31.0)	9.280s (0.002)	1.41 (1.07 to 1.85)

All values are expressed as n (%), unless otherwise indicated. Comparisons done using McNemar's test

*Statistically significant difference after correction for multiple comparisons.



Our Video Project

[I am not alone](#)





“Reachout”

Winter of 2018

PGY1 class at Memorial

Administered PSOS/SSOH

Timepoint “0” before video

then: 30 and 90 days post



SSOSH/PSOSH

Complimentary scales to determine the internalized stigma associated with help seeking for psychological problems
Validated for college students

Vogul 2006; 2013



Changes over time in Medium & High Stigma :SOSH

SSOSH Category

Time Point	Frequency	Percent	Valid Percent	Cumulative Percent
1.00 Valid	Low Stigma	14	28.6	28.6
	Medium Stigma	29	59.2	87.8
	High Stigma	6	12.2	100.0
	Total	49	100.0	100.0
2.00 Valid	Low Stigma	11	33.3	33.3
	Medium Stigma	18	54.5	87.9
	High Stigma	4	12.1	100.0
	Total	33	100.0	100.0
3.00 Valid	Low Stigma	8	50.0	50.0
	Medium Stigma	6	37.5	87.5
	High Stigma	2	12.5	100.0
	Total	16	100.0	100.0

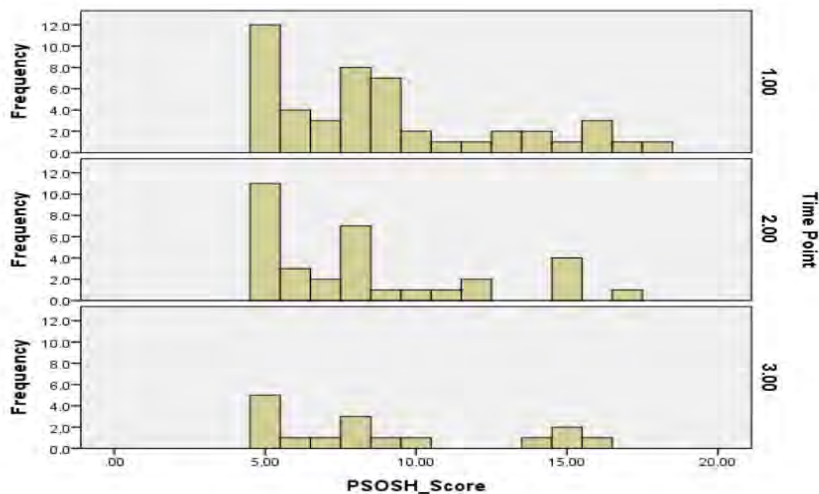
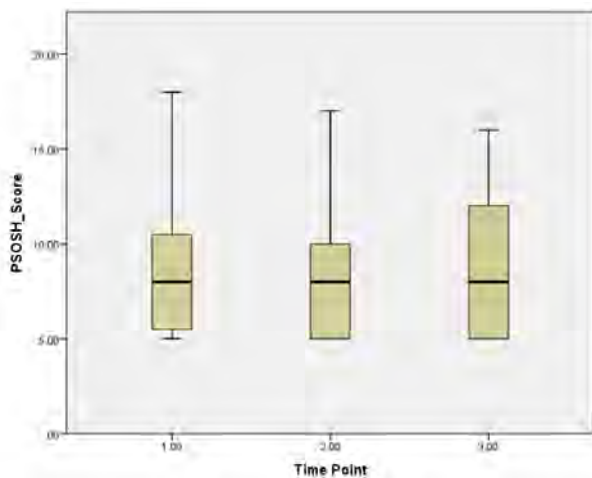
71%

66%

50%



PSOSH



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Conclusions:

The stigma scores trended downward over time but did not reach significance.



Lessons Learned:

Physicians see wellness as an important issue and are keen to participate in wellness initiatives.

We need to find innovative ways to mentor our learners in wellness while reducing the stigma of help-seeking.





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Questions:



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