BACKGROUND

- 2020: ARC-PA requires curricula about provider wellness
- 22.9% of PA students (61/267) considered dropping out of PA school in the past 6 months
  - Mental health was #1 contributor (65.6%)

PURPOSE

- Affect of mandatory, multifaceted virtual wellness curriculum on student wellness [mental health stigma, psychological flexibility, help-seeking behaviors]

METHODS

- 259 first year PA students from 5 programs recruited for a 16-week wellness course in 2021
- Pre- and post-surveys
  - Philadelphia Mindfulness Scale
  - Open Minds Stigma Scale for Health Care Providers
  - Self-Stigma of Seeking Help
  - UCLA 3-item Loneliness Scale
  - Reflective Practice Questionnaire
  - Alcohol Use Disorder Identification Test ConCise
- 30-60 minutes each week, asynchronous
- 3 topic sub-tracks:
  1. Vulnerability and stigma
  2. Mindfulness and decentering
  3. Reflective writing

KEY REFERENCES


KEY RESULTS

Individuals not identifying as white had higher baseline and end-point levels of mental health stigma (OMSHC-15)

Higher self-stigma of seeking mental health care (SSOSH) was found with lower age

Higher reflective practice (RPQ) scores for female versus male students

KEY RESULTS AS A WHOLE

- 73.6% thought course had a “positive impact” on their training as a PA student.
- Baseline scores were significantly predictive (p<0.05) of end-point scores for PHLMS, OMS-HC-15, SSOSH, RPQ, and UCLA-3 measures.
- Students with the lowest baseline well-being had the largest gains at the end-point

PRIMARY TAKEAWAYS

- We must integrate diversity driven analysis into the discussion of student wellness
- Students with low baseline well-being benefited the most from a required curriculum
- Curricula should allow freedom of choice and expression with wellness activities
- Wellness curricula cannot be one size fits all…or even most.