2020 FAMILY MEDICINE MIDWEST CONFERENCE

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Youth Mental Health First Aid Training:
Assessing the Value to Medical Students
& the U.S. Medical Education Curriculum

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Supported by Vince Keenan, CAE, CEO

THE FLEXIBILITY OF FAMILY MEDICINE IN A CHANGING WORLD
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Speakers

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DISCLOSURE

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Learning Objectives

- 1. On completion of this session, the participants should be able to describe a novel approach for training mental health first aid for medical students
- 2. On completion of this session, the participants should be able to cite evidence reinforcing the benefits of the *Youth Mental Health First Aid* course.
- 3. On completion of this session, the participants should be able to identify patterns of reported benefits of *Youth Mental Health First Aid* from course participants

The Problem

- Nearly one in five U.S. adults live with a mental illness
- Suicide was the tenth leading cause of death overall in the United States in 2018, claiming the lives of over 48,000 people.
- In 2018, suicide was the second leading cause of death among individuals between the ages of 10 and 34, and the fourth leading cause of death among individuals between the ages of 35 and 54.

The Problem

In the U.S., there are nearly 383,000 out-of-hospital sudden cardiac arrests annually, and 88 percent of cardiac arrests occur at home¹

- We know effective CPR can double or triple chance of survival
- We know that people who have been taught CPR are significantly more likely to attempt to help.

So, why can't we treat these

two problems the same way?

We can.

As per the National Council for Behavioral Health:

- YMHFA is designed to teach participants how to help an adolescent who is experiencing a mental health problem, substance use challenge, or crisis.
- YMHFA is primarily designed for adults who regularly interact with young people.

As per the National Council for Behavioral Health:

- The course introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations.
- Topics covered include suicide, anxiety, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including AD/HD), and eating disorders.

ALGEE: THE ACTION PLAN



ASSESS for risk of suicide or harm.



LISTEN non-judgmentally.



GIVE re-assurance and information.



ENCOURAGE appropriate professional help.



ENCOURAGE self-help and other support strategies.

<u>Purpose</u>

- Previous studies have shown the benefit of course participation in both community and university-based populations across the world.
- No studies have examined the benefits, experience and satisfaction of medical students taking these courses.
- Medical students are increasingly susceptible to mental health problems due to the high-stress environment inherent to their training.

Program Description

- From 2018-2020, the YMHFA course was provided free of charge to medical students and community members over 9 Saturdays.
- The course was led by an Illinois family physician and hosted 58 self-selected medical students and 68 community members at Rush Medical College.
- Following the course, participants completed surveys.
- We analyzed the collected survey data and key trends were highlighted to evaluate the course's success.

Educational Evaluation

- The post-course survey evaluated the course's ability to:
 - o Prepare participants to provide mental health first aid,
 - o Recognize signs of mental health crisis, and
 - o Provide assistance to young people who may be dealing with a mental health problem, substance use challenge, or crisis.

Quantitative Education and Analysis Findings

- Participants completed post-course surveys and mean ratings were quantitatively compared using a t-test.
- We analyzed ten data points in total.
- Two data points were statistically significant. However, they were not deemed clinically significant.
- All participants described this course as "helpful" with medical students ratings of (mean= 4.65) and non-medical students (mean=4.85). There were no statistical differences between these two groups regarding this data point.

Qualitative Results

- Qualitative feedback about the course material revealed three underlying themes:
 - o The need for more variety of content and techniques,
 - o Inclusion of notable at-risk populations, and
 - o The need for local applications.
- Qualitative feedback from medical students specifically called for improved mental health training within the standard U.S. medical school curriculum.

Limitations

- Most responded at the ceiling effect, enjoying the course at the highest level.
- Small total sample size over nine courses offered.

Action Items

- To collaborate with other institutions hosting MHFA courses to build a stronger data pool.
- To evaluate the program with more emphasis on the medical student experience.
- To continue to host MHFA courses to interested medical students and community members in the Chicago area.

Call to Action

- We encourage medical education curriculum creators to include MHFA courses to ensure their medical students can recognize a mental health problem, substance use challenge, or crisis in their community, patients and fellow medical students.
- We encourage medical students, faculty, and community members to attend MHFA in order to build the confidence, knowledge, and experience necessary to aid someone else experiencing a mental health problem, substance use challenge, or crisis.

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Questions?

References

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- 2. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. Web-based Injury Statistics Query and Reporting System (WISQARS) Available from URL: www.cdc.gov/injury/wisqars