

# Chapter 9

## Medical School Wellness Initiatives

**Lynda Tierney Konecny**  
A. T. Still University, USA

### ABSTRACT

*In this chapter, wellness, and the importance of balance among wellness dimensions for medical students will be defined based on information found in relevant peer-reviewed and/or professional literature. Practical, evidence-based examples of wellness programme and initiatives within medical schools will be discussed. Benefits and challenges of the wellness program examples will be presented; limitations to programme results will be provided. Health education models and/or theory applicable to the needs assessment, development, implementation, and evaluation of medical school wellness programmes will be explored. Recommendations and best practices will be suggested to facilitate the practical implementation of wellness initiatives. A discussion of emerging trends will also be presented for future consideration.*

### INTRODUCTION

With the intensive demands faced by medical students, the medical education community must have current and relevant information to assist in making informed choices about how to develop and implement the most effective wellness programmes. Throughout their education, medical students often struggle with balance in dimensions of wellness, which contributes to mental health issues. Guidance both inside and outside the classroom to help medical students cope with being separated from families and friends, and the wide-range of personal challenges faced while attending medical training, should be provided. To enhance academic performance,

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students and those within the medical education community should be taught how to recognise wellness imbalances, along with strategies that can be used to increase wellness equilibrium.

According to Agarwall and Lakel (2016) ‘successful medical student wellness and professional development are critical areas in medical student education for students reaching optimal performance’ (p. 105). The fact that medical students face challenges to mental health and overall wellness throughout their education is well-known and documented in relevant literature. Studies show medical students have higher rates of imbalances in wellness dimensions than their non-medical school peers in similar age groups. Reports of higher suicide rates among medical students than those within other academic disciplines are also alarming and create a sense of urgency to providing wellness interventions for these high-risk students. Medical students can experience extreme stress, anxiety, and depression which can ultimately affect not only their medical school performance, but also their effectiveness later as a practicing physician.

Wellness programming should be proactive and not only offered as reactive services within counselling departments. Outreach and education efforts should be incorporated into daily activities rather than relying on students to seek help when it may be too late and they are already in crisis. A culture in which students learn about and practice self-care, and care for peers, should be fostered. In addition, services that are available to students should be well-advertised. Not only should students be made aware of available wellness development options, faculty, staff, and administrators should also know what services and programmes are available.

Chapter objectives include:

- Evaluate current wellness initiatives and innovations.
- Describe future wellness initiative trends within medical schools.
- Define wellness and the importance of balance in wellness dimensions specifically for medical students.
- Identify an appropriate wellness model to meet medical student and institutional needs.
- Explain how health education models and theory can be applied to develop, implement, and assess wellness programmes for medical students.

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