Role of Personal Wellness in Preventing Student and Faculty Burn-out

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Presenters





Learning Objectives

- Describe the role of self-care and wellness in preventing professional burn-out in graduate students and trainees
- Develop a personalized self-care plan that incorporates diversified personal wellness strategies into weekly routines
- Construct a curricular component that provides mentorship on stress management and self-care strategies for graduate students and trainees



Introduction

- Over the past decade, there has been an increased focus on the mental health needs of students pursing graduate education
- Increased need for graduate programs to address issues of stress management and self-care
- Graduate student mental health and well-being is now often included as a training/program accreditation standard for many professional graduate programs
 - Potential impairment of professional functioning
 - Long term concerns re: provider "burnout"



Stress in Graduate Students

- Depression is common in graduate and professional school students, with higher levels than age-and gender-matched populations.
- At least half endorsed anxious feelings, with over 86% feeling nervous, worried, overly stressed, and easily irritated. (Garcia-Williams, Lauren Moffitt, & Kaslow, 2014).
- Stress and maladaptive coping strategies are related to poor sleep, psychiatric disorders, substance abuse, physical health decrements, attrition, and poor academic performance or academic/professional burnout.



COVID-19 Stress

Negative Effects of COVID-19 on Mental Health (Vindegaard & Benros, 2020)

- Healthcare workers: increased depressive symptoms, anxiety, psychological distress and poor sleep quality
- General public: lower psychological well-being and higher scores of anxiety and depression
- Those with preexisting psychiatric diagnoses reported worsening of symptoms

Effect of COVID-19 Stress on Graduate Students (Langin, 2020)

- Feelings of "graduate student isolation" increased
- Survey of 3000 U.S. graduate students: 1/3 reported moderate to severe depression or anxiety
- Students of color are at higher risk for deterioration of mental health



Rationale for Study

• The Pitt Personal Wellness Program consists of 3, 1-hour psychoeducation and experiential workshops

• Goals include:

- Developing a personalized self-care plan
- Introducing empirically based strategies for stress management
- Creating a culture of self-care within graduate programs to facilitate conversations between faculty and students



Rationale for Program Evaluation

- To determine acceptability of program content, format, and presentation
- To collect demographic data to better describe baseline characteristics of graduate students in the health sciences that could affect personal wellness
- To examine potential changes in students stress, anxiety and depressive symptoms, and use of self-care and coping strategies



Methods

Workshop attendees

- 156 first-year graduate students in 5 SHRS programs invited
 - Audiology, Counseling, Occupational Therapy (OT), Physical Therapy (PT), Speech & Language Pathology (SLP)
- Programs decided if workshop attendance was mandatory or optional
- Program evaluation participants
 - IRB approval
 - 99 students opted in to the program evaluation (63% of workshop attendees)



Participants by SHRS Program

 N = 67 for retained across all three data collection points (70% completion rate)







| Table 1. Demographic and Characteristics of Graduate Students in Health Sciences (n = 99) | | | |
|---|-------------|--|--|
| Age, mean ± SD | 23.3 ± 3.48 | | |
| Gender, % Female (n) | 86.9% (86) | | |
| Ethnic/Racial Minority, % (n) | 17.9% (17) | | |
| Parental Marital Status, Married % (n) | 51.6% (49) | | |
| First Generation College Student, % (n) | 20.4% (20) | | |
| Veteran/Active Duty Family Member, yes % (n) | 21.2% (21) | | |





| Table 1. Demographic and Characteristics of Graduate Students in Health Sciences Cont. (n = 99) | | | |
|---|------------|--|--|
| Geographic Location, Suburban/ Rural % (n) | 90.8% (90) | | |
| Family Financial Status, "Comfortable" % (n) | 69.7% (69) | | |
| Previous Use of Psychiatric Medication, % (n) | 35.4% (35) | | |
| Current Use of Psychiatric Medication, % (n) | 22.2% (22) | | |
| Previous Experience with Counseling, % (n) | 53.5% (53) | | |
| Current Experience with Counseling, % (n) | 11.1% (11) | | |



Program Description

- 1. Development of a selfcare plan
- 2. Strategies for stress management
- 3. Social support session
- Delivered virtually due to COVID-19



Workshop #1: Developing Your Self-Care Plan

Objectives

- 1. Define self-care
- 2. Review and evaluate self-care practices and strategies
- 3. Develop a self-care plan



Defining Self Care

- Students brainstormed definitions.
- Reviewed self-care practices.
 - With an emphasis on professional self-care.
- Discussed maladaptive selfcare practices.





Application

Self-Care Self-Assessment

Self-Care Self-Assessment

This self-assessment provides an overview of effective strategies to maintain self-care. Rate the following items according to frequency.

As you complete the self-assessment, consider, to what extent do you think you are currently attending to your personal wellness through self-care?

| PHYSICAL SELF-CARE | | Occasionally | Rarely | Never/NA |
|--|---|--------------|--------|----------|
| Get enough sleep |) | Ο | Ο | 0 |
| Eat regularly (e.g., breakfast, lunch, and dinner) |) | Ο | Ο | 0 |
| Eat healthy foods |) | O I | O | 0 |
| Move your body/exercise |) | O | Ο | 0 |
| Get regular medical care for prevention |) | Ō | Ο | 0 |
| Take time off when sick |) | Õ | Ο | 0 |
| Other: |) | Ο | Ó | 0 |
| Other: |) | Ο | Ο | 0 |

Self-Care Plan

Self-Care Plan

Now that you have assessed your current self-care behaviors, brainstorm realistic self-care activities that you can begin incorporating into your overall self-care lifestyle.

PHYSICAL SELF-CARE 1

2. 3. EMOTIONAL SELF-CARE 1. 2. з RELATIONAL SELF-CARE 2. SPIRITUAL/RELIGIOUS SELF-CARE 2. 3.

PROFESSIONAL SELF-CARE

- 1
- 2. 3.

3

1



Bridge to the Next Workshop

- Reminder: While commitment to practicing self-care is important, self-care is never meant to be another obligation, obstacle, or unenjoyable experience.
- Tasked with completing their self-care plan and sharing it with their advisor.



Workshop #2: Personal Wellness Strategies

• Objective: To provide experiential training on selfcare/personal wellness methods.

- Cognitive restructuring
- Mindfulness meditations
- Relaxation techniques
- Time management and anti-procrastination strategies
- Values-guided behavioral interventions.

Personalized based on the presenting needs of the students



Cognitive Restructuring



Relaxation Techniques

Deep Breathing



Progressive Muscle Relaxation







Workshop 3: Enhancing Belonging

- Objectives:
 - Encourage participation in a meaningful activity that promotes holistic wellness and a sense of belonging.
 - Solidifying the culture of self-care.



Social Support & Belonging Activities

- Program faculty attend and participate with students.
- Guided relaxation exercises/mindful meditations.
- Breakout discussion groups.
 - What does this crisis mean to you as a current/future [profession]?
 - What are your major stressors and barriers to self care?
 - How has social distancing affected you?
 - What are your self-care/personal wellness/coping strategies?
 - Can your pet make a cameo?



Study Timeline







| Measure | Description | Measure | Description |
|--|--|------------------|---|
| Perceived Stress Score | 14-item questionnaire Likert-scale: 0-4 Higher score equates to higher stress levels (0-56) | Self-Care Scale | 13-item questionnaire Likert-scale: 1-5 Higher score equates to higher levels of self-care practices (13-65) |
| Patient Health Questionnaire (PHQ): Anxiety | 16-item questionnaire Likert-scale: 0-2 Higher score equates to higher prevalence of anxiety symptoms (0-32) | Brief COPE Scale | 28-item questionnaire Likert-scale: 1-4 Higher score equates to higher prevalence of coping strategies (28-112) |
| PHQ: Depression | 11-item questionnaire Likert-scale: 0-3 Higher score equates to higher prevalence of depressive symptoms (0- 33) | Acceptability | 5-item questionnaire Likert-scale: 1-5 Higher score equates to higher student acceptability of program (5-25) |



Students rated the program's acceptability as moderate—an average score of 16.5 (4.0 SD) range 7-25 (66% acceptability)

| 16 | | | | |
|-------------------|----------|------------------|-------|----------------|
| Strongly Disagree | Disagree | Neither Agree or | Agree | Strongly Agree |
| (1) | (2) | Disagree (3) | (4) | (5) |

- 1. This class met my expectations for a module on self-care and personal wellness
- I feel more aware of my self-care needs and the importance of personal wellness after participating in this class.
- 3. This course has had a positive impact on me.
- 4. This course has results in an increasing in my overall self-care activities.
- The course leaders played an important role in facilitating changes I made in my self-care and personal wellness routines.



We conducted repeated measures ANOVAs to determine change in students' stress and anxiety over time.





- We conducted repeated measures ANOVAs to determine change in students' depressive symptoms over time.
- There was a significant difference in depressive symptoms over time based on students' psychiatric medication history.
- Students who had a history of psychiatric medication usage had higher depressive symptoms over time than those who had no history of psychiatric medication.





- We conducted repeated measures ANOVAs to determine change in students' self-care and coping skills over time.
- There were no significant changes over time in students' ratings of their coping skills.
- Students' self-care significantly increased between time points 2 and 3, week 10 and 14.

Self-Care Scale F (1, 114) = 3.40, p = .04 84.00 83.00 82.00 81.00



Conclusion & Discussion

• Graduate students in the health sciences & mental health history

- More than half report a history of mental health counseling
- 35% report previous use of psychiatric medication for mental health issue
- Graduate students with a history of psychiatric medication usage report higher levels of depressive symptoms across the semester than those who do not
 - At-risk population



Conclusion & Discussion

- Graduate students' stress and anxiety are highest in the first 4 weeks of the semester, and decrease progressively across the midpoint and end of the semester
 - May be related to the Pitt Personal Wellness Program or may be the natural course of stress and anxiety during the semester
- The Pitt Personal Wellness Program
 demonstrated moderate acceptability and student satisfaction
 - Higher rates were seen in Spring 2020 pilot with Physician Assistant students (average score 20.54, 82% acceptability) when workshops were presented in person
 - Likely negatively affected by on-line delivery



Conclusion & Discussion

- Students' use of self-care strategies increased between the week 10 and 14 of the semester
 - Highest after all three Pitt Personal Wellness Workshops, higher than
 baseline assessment
 - Absence of a control group precludes us from making any causal connection between workshops and changes in students' behavior
- Future directions include a more rigorous test of the efficacy of this personalized education program in graduate students across health sciences disciplines



References

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Thank You

- Questions? Comments?
- Post them in the chat!



