Mindfulness in Undergraduate Medical Training: Guided and On-the-Go Practices

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WORKS IN PROGRESS

Background: Burnout among medical professionals now exceeds 50% and is associated with poor outcomes such as addiction, decreased quality of life, and suicide¹. Data shows that burnout begins at the very first stage of training in undergraduate medical education, and lack of time is a contributor². Recent mindfulness-based interventions show varying positive impact to mitigation of medical student burnout and stress³⁻⁵. Thus, given students' busy schedules, the need exists for an easy-to-access, flexible, and time-efficient intervention to improve wellness with mindfulness training.

Objectives: To examine the effects of brief, accessible, multimodal mindfulness interventions on undergraduate healthcare student wellness.

Methods: School of Medicine students were recruited to participate in one of two mindfulness interventions. The first intervention was a mindfulness-based didactic program featuring four, 1.5 hour sessions that learners could either attend in person or remotely through online, narrated PowerPoints. This voluntary program also offered students a "certificate" in "Mindful Medicine" if they completed additional self-reflection and mindfulness practices. The second intervention was the use of self-guided and self-chosen virtual mindfulness programs available for free or by paid subscription through mobile device or web-based applications.

Evaluation Plan: Participants completed a survey of assessments before and after the intervention. A control group of students who did not participate in any intervention was also assessed at both time points. Assessments included the Perceived Stress Scale (PSS, Cohen, 1994), Applied Mindfulness Process Scale⁶ (AMPS), Oldenburg Burnout Inventory⁷ (OLBI),

Brief Resilience Scale⁸ (BRS). A repeated measures analysis will be used to compare between-group and within-group differences over time. Initial findings of the mindfulness training intervention demonstrated significant positive changes for the intervention group. We expect results of the virtual mindfulness program to be similarly encouraging.

Conclusions: This study helps identify educational approaches to mitigating burnout that can be easily integrated into students' busy schedules. With multiple academic, clinical, and extracurricular responsibilities demanding students' time and attention, brief yet powerful multimodal techniques to improve student wellness are ideal. The final results may support the effects of easily accessible, brief mindfulness interventions for undergraduate healthcare students to decreasing stress and burnout while increasing resiliency.

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