

Personal Statement: Mini-Fellowship in Wellness Leadership 2018-2019
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Why are you interested in resident/medical student wellness?

Medical residency is a time of stress for many trainees, with documented depression in 20-40% of medical residents (1). Residents report burnout 20% more than age-matched peers (2). Rates of burnout in emergency medicine are especially high, with nearly half of residents and attending physicians endorsing feelings of burnout (3).

This hits close to home - we have seen similar levels of depression and burnout at our institution among interns (4). We have even seen resident suicide at our institution in the last year, despite having one of the more progressive House Officer Associations and residency mental health programs in the country.

The etiology of burnout is multifactorial: there are national, regional, institutional, and personal contributions to burnout and career dissatisfaction. The correction of these problems requires similarly multifaceted solutions. Biofeedback has been effective in reducing stress in physicians, athletes, and many others (5,6). Mindfulness/resilience training has promising results for relaxation in physicians and EMS providers (7,8). Multimedia-based interventions have successfully allowed for decentralized training (9). Other interventions, such as structured debriefing sessions on or after shift, can also reduce burnout (10).

I hope to be a part of bringing these interventions to emergency medicine, starting with my residency program.

What is a wellness project you would like to see implemented at your institution and why?

I am a founding member of our new Wellness Committee at the University of Michigan. Early interventions include lectures and small group discussions to facilitate conversation. I have led discussions on "Fulfillment, Accomplishment, and Success" as well as "Acute Stress Management and Psychological Skills."

Other prospective projects include a formal mentorship program within the residency, with a plan to provide longitudinal mentorship from senior-to-junior residents.

Finally, we are interested in investigating physiologic markers of stress in our residents and assessing whether interventions used in other fields (biofeedback, mindfulness training) can improve resilience and crisis resource management in our emergency residents.

This mini-fellowship would provide the necessary foundation to avoid re-creating the wheel as our department embarks on these new endeavors. I would also be eager to share ideas with other residents and play a role in this new community. Thank you for your consideration.

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