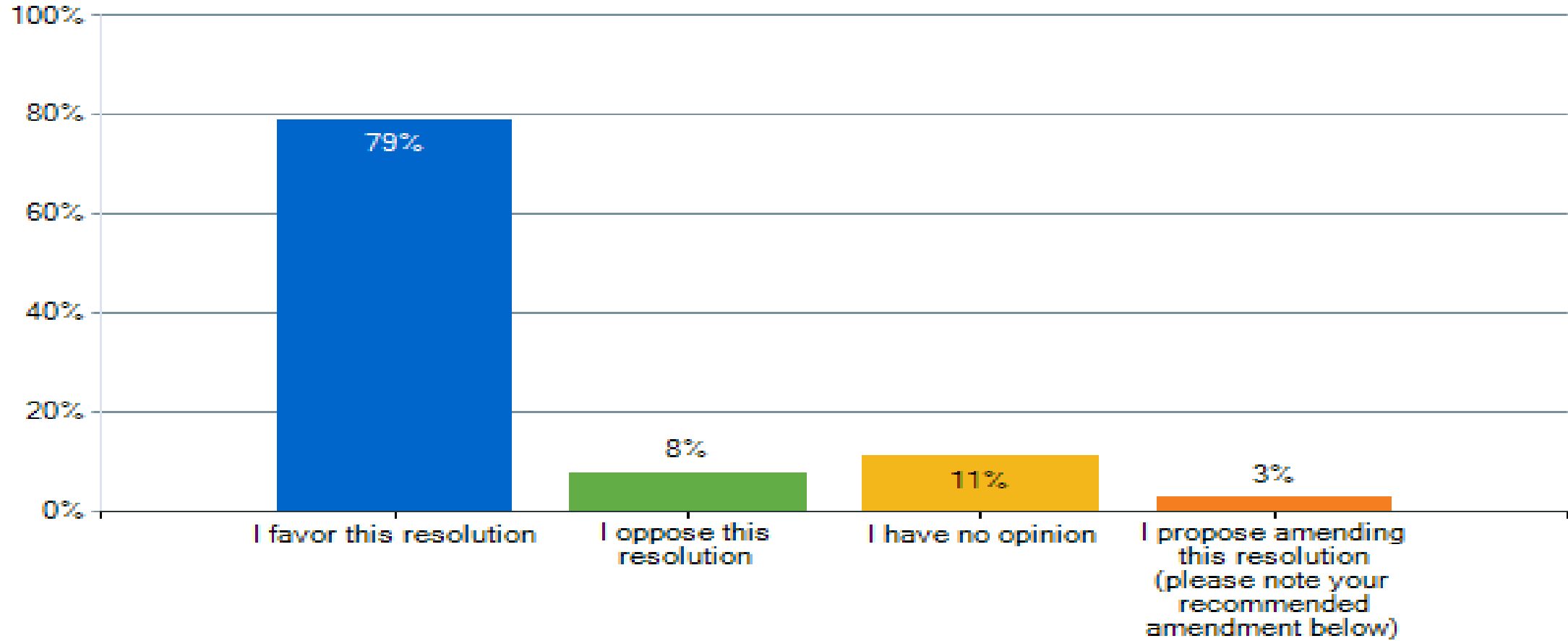
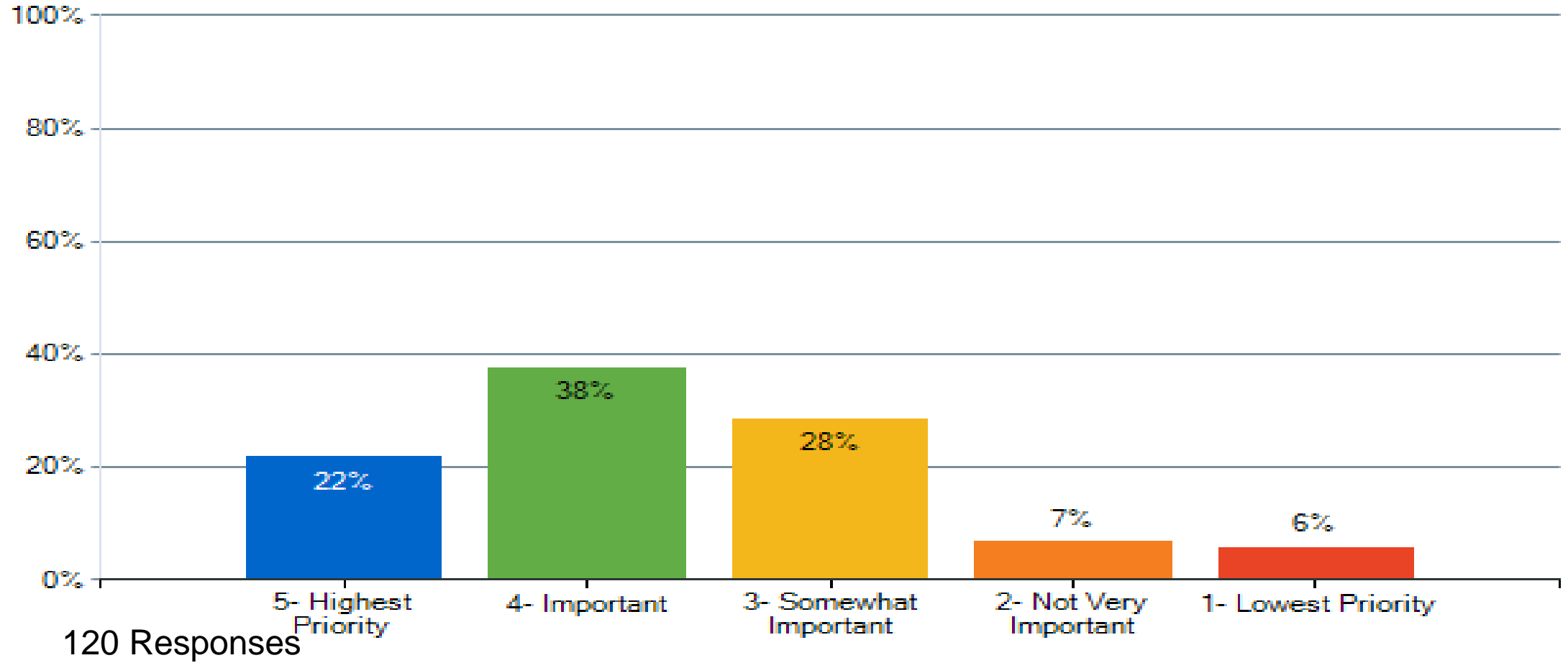


# Supporting the Mental Health of Medical Students



119 Responses

Please indicate your view of this resolution as an ISMS priority.



## Comments

### Response Text

This would be nice, but why would removal of coverage limitations only apply to medical students.

It is my understanding that you have to participate in a health insurance plan to be in any graduate school (i.e. medical school). Is there anything like "no student health insurance" at any medical school in this country? Or college for that matter. Most insist that you participate in their health plan if you don't have insurance through your parents. I do not think that the ISMS or the AMA should advocate for free medical care of any sort.

This is stupid and an good example of the 'woke' policies infecting the Society

Excellent to have a healthy workforce

I think that medical students should have affordable access to mental health services when needed. Much mental health counseling currently is provided by psychologists & MSW's with psychiatrists involved only for more severe mental illness. I am wondering why the resolution requests "physician led" mental health services. I'm afraid that this might cut back on the availability of counseling for medical students. It's true that many primary care physicians provide basic counseling in their offices which may suffice. I think if one is to keep it affordable & readily available it may be wise to delete "physician led" from the resolve

"Mental health services" access always leads to increasing numbers of DSM-5 diagnoses and endangers the student to limp through the rest of their life as "mentally ill". Flee mental health services.

Many of these programs are already implemented in schools. I support that they be implemented overarchingly in all Illinois schools if not already. Though it seems like more effort needs to be on resident burnout and mental health also.

support

The number of visits is going to be an issue with coverage & cost.

As a medical student, I advocate for the value of having students having access to mental health services. As my school, students are only offered 6 free counseling sessions from a therapist, after which, they are on their own. Some students need longitudinal care, and that isn't possible if it's not affordable.

About time!

Individual schools should deal with the issue

Full support for this resolution - Rasmeet Miller MD (member, committee member)

This is tough - as a medical student, I of course want more resources for fellow and future students, and more space to manage their mental health. That said, I don't like that this resolution seems to make mental health management only about self-care, almost - there is little mention of other structural changes that could, you know, make life for all med students less unnecessarily stressful and therefore have positive effects on student mental health? There is little scope in here acknowledging the structural factors contributing to mental health issues among students. I also as a future psychiatrist like the idea of having access to physician-led mental health services, but not sure if that is the only viable or best option for mental health care for all med students ...

Who helps the helper? We should.

Want to support students' mental health but need to realize who is going to pay for these services needs to be addressed and there needs to be some parameters as some medical students may have pre-existing mental health conditions that should not be what this is trying to address.

I fully support medical student access to mental health services. Has there been any thought on how associating mental health service insurance with medical school enrollment might escalate the cost of medical school tuition? In order to provide this type of unlimited coverage, could the costs be so prohibitive as to make tuition even more unaffordable? Is there any other mechanism to ensure coverage without impacting costs to the medical school, which would likely be passed onto the learners?

Policy should support leaving the number of follow up visits to the physician and patient (medical student) relationship and treated as a medical relationship. "Burnout" is a population issue that should be addressed separately as multifactorial and is appropriate for looking at those factors with faculty and students.

## Supporting the Mental Health of Medical Students

### Response Text

Other (Please specify) :

Other (Please specify) : remove the "number of visits" sentence

Other (Please specify) : Need to remove from first resolved clause the insurance limitation section as there needs to be caps in order to have payors agree to participate. Be careful that asking for too much will get you nothing.