



Medical student distress, personal health care practices, and barriers to care

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Purpose: Medical students experience higher levels of psychological distress than age-matched peers. Suicide rates are also higher among medical students and physicians in comparison to the general population. Despite reported health needs, medical students are reluctant to seek help for mental health issues potentially resulting in inappropriate self-care practices and impairment. This trend increases throughout training and has been observed among physician populations manifesting as persistent, long-term mental health problems. Medical students report unique barriers to care which occur at individual, provider, and system levels and reflect issues related to stigma and the medical school culture or environment. The aim of the current study was to determine the prevalence of psychological distress among a population of medical students in comparison to the general population, ascertain factors contributing to the distress, explore personal health care needs and practices, and identify barriers to care.

Methods: A cross-sectional design was employed which involved electronic and classroom administration of a survey. Participants included 181 medical students in years one through four attending a university in Atlantic Canada. **Results:** The prevalence of medical student distress in the current study was 17%. Medical students reported significantly higher levels of severe psychological distress than peers in the general population yet were reluctant to seek help for mental health issues. Students also expressed concern they may develop mental health issues and/or inappropriate self-care practices over the course of their training. Students indicated a preference for informal consultation and off-site care, citing system-based barriers including: concern for confidentiality, stigma, academic vulnerability and discomfort with the dual role of student-patient. Finally, students expressed reluctance to report impairment in a peer in scenarios depicting both high- and low-stigma consequences. **Conclusions:** Medical students experience levels of distress far exceeding rates among peers in the general population. Factors that contributed to this distress in the current study reflected some negative aspects of medical training and the socialization of medical students to deny or minimize illness, avoid seeking help through formal channels, particularly for stigmatizing health issues, and to develop inappropriate or harmful self-care practices.