Making a Medical School Class Whole: A Holistic Approach to Student Government

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ABSTRACT: Student government has a unique role in medical schools, where it can function to strongly nurture the well-being of a class. Student body representatives have a better understanding of the interests of medical students and the adversity they face. Thus, the student government is in a prime position to make positive change in the lives of their classmates with help from the school administration. This article explores these ideas and is written from the perspective of the co-presidents of the student body at a northeast medical school.

KEYWORDS: Medical education, student government, diversity, inclusion, wellness

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Across the United States, medical schools have become epicenters for diversity. In addition to academic excellence, character and compassion, extracurricular activities, dedication to medicine, and leadership potential, many admissions counselors seek to create a medical school class with students from varied backgrounds and interests. This article discusses the role that medical student governments can play in promoting this diversity through extracurricular activities, creating stronger classes in which all peers can learn from one another and become better and healthier physicians.

There is now a growing body of evidence that demonstrates how medical students contribute significantly to the quality and content of their degree programs.[1-3] Student engagement with institutional leadership has been shown to enhance student learning and development, as well as improve the academic environment and culture.[4,5] To date, numerous forms of student involvement have been developed, including student-staff partnerships in teaching and research,[6,7] co-creation in the design of programs,[8] and university decision-making.[9,10] While there has been a growing interest in the "student voice" and student-staff partnerships, less attention has been given to the role that elected student representatives can play in promoting and fostering personal, professional, and academic competencies through extracurricular activities. A cohesive, well-organized, and independent student organization has a crucial impact on student development and growth,[11] and medical student governments are uniquely poised to facilitate this through extracurricular engagement, if done appropriately and equitably.

As our own dean told us at our White Coat Ceremony, we are not a band of trumpets. Instead, we are a symphonic orchestra, composed of a myriad of instruments that together can produce a beautiful melody. Plenty of thought is given toward compiling this ideal ensemble, but after arriving on campus, significantly less attention is given to ensuring the music does not fall flat. Friends form in the early months of the year and groups branch off to their own hangouts, meals, and study spaces. By the end of the first year, classmates on a whole are merely acquaintances. Closest friends are often eerily similar in terms of backgrounds, interests, and goals. Moreover, after preclerkship courses, students are dispersed through their various hospital sites and are bound by varying and rigorous rotation schedules. This is problematic in that the purpose of having such diverse classes is to learn from one another's experiences, to open one's eyes to new perspectives, to befriend others vastly different, and to become the best versions of ourselves. Having a diverse class will help us care for our patients better, and class factions are a contributing reason that a large percentage of medical school classes—regardless of medical school itself—are beset with high rates of depression and low well-being.

While many schools have deans for students who oversee student resources, mentorship, and learning, it can be challenging from the administrative level to prevent a medical school class from fragmenting. Instead, the gestalt of a class must come from within. Student government can play a major role in establishing and facilitating this class cohesion and spirit, especially in the formative first year. While different at each school, most student governments are similar with elected presidents (or co-presidents) and a board that orchestrates many class events and function as liaisons between the administration and student body. Our student council has started and continued many initiatives which we believe have made a noticeable difference in helping make our class whole and reduce the separation that often takes place soon after the commencement of anatomy lab in the fall. We would like to share some elements that have yielded success and recommend that other medical schools follow suit.

First, we have taken strides to ensure all events are as affordable as possible for our classmates to attend. At the start of the year, we learned that regardless of how low we set the price for certain events (examples include a Halloween party and Thanksgiving feast), there will always be at least 5% to 10% of

the class who will feel uncomfortable about paying for a ticket and will most likely not attend. Even small expenses can aggravate over half the study body beset with massive loans and debt. Our Financial Aid Committee, comprising administrators and student representatives, revealed that a nontrivial number of students were concerned about affording food each week. Such financial constraints and stressors burden students and further prevent full class engagement. Understanding that funding is limited, our student government had to become creative in finding funding. To combat this, we applied for university grants that could cover events, held class fundraisers (eg, Candy-grams on Valentine's Day), worked closely with faculty to utilize open funds, and orchestrated events with other graduate schools that had additional financial support. These measures worked. For the first time in our school's history, for example, we held a completely free spring formal (free for a student and guest with food and beverages included) in which attendance rose to over 80% of the class. Medical schools should be looking to ensure such events are funded and inclusive to promote full attendance of interested students, as it has been shown time and again that engagement with one's community helps combat feelings of isolation and depression that are highly prevalent in this population.

Second, we have sought to create a diversity of events open to all classmates. Traditionally, the stereotypical graduate social may be "club" nights, which are popular in many medical schools due to the "work hard play hard" mentality. We expanded events to include trivia nights, dodgeball tournaments, camping and wilderness adventures, potluck dinners, and trips to nearby cities. Keeping in line with our first goal, the costs (if any) of these events were held to a minimum. In addition, student council acted as an advocate for student matters and well-being, as we are a large and diverse group and are able to obtain regular feedback from our classmates. Student Council advocated for more student common spaces that would offer a wide variety of study spaces (individual pods and large tables) and common rooms (ping-pong tables and video games). A new study center in our medical school was opened last year, and this has allowed students to work in more comfortable environments around their peers, rather than being cooped up in libraries or small classrooms that are often not conducive to discussion and conversation. By listening to the pulse of the class, student government was able to offer events, activities, and new school settings that worked better for everyone.

Third, we feel it is important to offer various wellness events that can bring classes closer together given the exhaustive demands and isolating nature of the medical school curriculum. We started a wellness committee and an annual tradition of a wellness month with various free events including wine and paint nights, yoga classes, massage sessions, and cooking opportunities. The month also showcased the many resources available for students to take advantage of mental health resources and wellness outings that are far too often difficult for students to access. There is a 13.5% median increase in prevalence of depression after starting medical school.[12] We found that many students are struggling with depression and anxiety, and yet most never access available support. This is due to a limited awareness of resources, fear of stigma and repercussions, and embarrassment that their "reason" for depression is unjustified. Discussing the wide prevalence of depression and anxiety among our peers actually brought our class closer and having a wellness month with events focused on mental health also began a larger dialogue with the administration on ways to further improve a culture where perfection deemed paramount. Mental health anti-stigma work has been shown to be effective in empowering individuals to seek care and reduce any shame associated with seeking care.[13] We believe that medical students would find comfort up front in discovering shared experiences of balancing high expectations, increased pressures of medical school, and uncertainty about the long and arduous path needed to become a physician.

While our class is far from perfect, we believe these 3 goals had significant impact on giving our class a strong and connected foundation going into the future. Other medical schools that have noticed some of the class separation may benefit from similar initiatives. Unfortunately, it is far easier for a class to break than to come together. That is why is it so important that the grounds for such goals are in place before students arrive and carried out from day one.

Over the last decade, there have been increasing levels of student engagement, from consultation, involvement, and participation to partnership.[14,15] Development of student-staff collaborations in education have led to improved learning and teaching processes, better quality culture and organizational learning, and the development of a range of graduate attributes.[6,9,14,16] While a step in the right direction, student-staff collaboration is not enough. Institutional support for medical school student-run governments is pivotal for the next generation of physicians to develop their personal, professional, and academic competencies.

Indeed, class formation and bonding are best implemented when it is student driven. Student government can play an important role in augmenting existing programs, but it also has a unique role of holistically understanding what it means to be medical students and advocating on behalf of the students. The medical school administration should never play a mere passive role. Rather, medical school deans and faculty can and should assist wherever possible. Having faculty and deans liaise frequently with students (whether on student council or otherwise) can go a long way in ensuring prompt and immediate administrate attention to carry out initiatives and bypass obstacles. The identity of a first-year medical school class is dynamic and one that must be cared for and nurtured. Even the Boston Symphony Orchestra cannot sight-read Beethoven's 5th perfectly on first try. To become

the best physicians we can be, medical school classes should listen to the pulse of their students.

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