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Title of article: The impact of COVID-19 on the mental health of medical students in Australia

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160 character summary of article: COVID-19 has left an overwhelming impact on medical students through the miscommunication of directives. It has resulted in many students feeling confused, dejected and exhausted.

Keywords: COVID-19, student, miscommunication, mental health

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Discussion Points

1. COVID-19 has placed pressure on medical students completing their clinical placement in Australia.

2. The COVID-19 crisis is expected to increase the already high risk of medical student’s developing mental health disease.

3. Action to provide mental health resources to medical students is important during this pandemic.
The impact of COVID-19 on the mental health of medical students in Australia

The coronavirus disease 2019 (COVID-19) is a highly infectious disease placing a large burden on hospitals worldwide, with an overwhelming number of patients requiring hospital admissions [1]. This has placed tension on some of the most well-resourced healthcare systems such as those of the United States [2] and the United Kingdom [3]. The presence of medical students in Australia on clinical placement during this pandemic has been discussed at all levels of government, university, and hospital management. Although conversations have been started, are current recommendations and rulings being passed onto medical students effectively? In my own personal experience, miscommunication between different managerial bodies left me in periods of confusion, dejection, and ultimately fatigue. It is important that all forms of management recognise the impact ambiguity has had on medical students in Australia, in order to restore students’ mental health wellbeing and for future disease outbreaks.

It is understandable that the presence of medical students in Australia on clinical placement during the pandemic has been unwelcome, since students increase the risk of hospital-outbreaks due to their frequent rotations between departments, use already low stocks of personal protective equipment (PPE), and carry associated liability issues if students were to contract the virus [4,5]. Nevertheless, the current health crisis of COVID-19 provides a phenomenal learning opportunity for students. This includes acquiring proficiencies in recognising, investigating, and managing infectious diseases in preparation for an inevitable outbreak in the future [5,6].

Personally, the most challenging part about the pandemic, as a medical student, were the mixed messages communicated from an array of management bodies. These messages included where we were and were not permitted to be, expectations of online learning and attendance, and additional roles available for medical students. From my own experience, streams of information were sent from all levels of government, medical boards, university heads, university departments, local hospital networks, and clinical school administration. Additionally, the constant feed was beamed from all available technological sources making it increasingly more difficult to remain informed about the COVID-19 crisis. Even upon attending regulated clinical placements, last minute cancellations were not uncommon. Weeks-upon-weeks of these convoluted recommendations and rulings left me in a confused state.

Prior to the COVID-19 crisis, it was well-established that medical students are at an increased risk of developing mental health issues due to the pressure placed on them during their degree. Mental health issues include depression, anxiety, and burning out which notably increase the risk of suicide [7,8]. To date, small studies suggest that there is an increased risk of mental health issues globally and in healthcare workers residing in China during COVID-19 [9,10]. It would be interesting to see the effect this pandemic has had specifically on medical students in Australia.

Moreover, even when clinical placement went ahead, the environment provided for the medical students was hostile and combative. Medical students are no strangers to an unwelcoming atmosphere, however, with the current situation it has been intensified. Equally disheartening, many other student healthcare placements continued ahead as we were left to the confines of self-directed online learning. This left me in periods of despair, dejection, and disappointment [11].
The chronic state of confusion and dejection, in combination with the unknowns ahead, left me exhausted. The situation I experienced was unfortunately, not unique. The COVID-19 pandemic has placed a lot of stress upon the current medical students in Australia undertaking clinical placement. Miscommunication between all levels of healthcare and administration have created unclear messages, placing a great deal of confusion, despair, and fatigue upon medical students. It is imperative that we do not ignore this issue. Now is the time to act and provide medical students with accessible mental health resources so that they can care and support the Australian community in the future.

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References


