

INTRODUCTION

The COVID-19 pandemic has significantly altered the way education is delivered globally. Students rapidly shifted from learning in classrooms close to their peers and participating in extracurricular activities to opening their computers to enter a virtual classroom in the wake of a quarantine. In professional schools, students have been influenced differently; specifically, medical and dental students, whose education largely relies on clinical, educational experiences, have seen significant changes to their curricula, such as the addition of stricter guidelines in pre-clinical and clinical settings [3]. While much of the first two years of the medical curriculum rely heavily on didactic learning, the first two years of dental school rely equally on didactic learning as hands-on, clinical skill education.

Before the pandemic, doctors and health professions students already suffered from high rates of depression; moreover, there is a pre-existing stigma surrounding burnout and suicide rates among medical students [1]. The Patient Health Questionnaire (PHQ-9) and the Generalized Anxiety Disorder (GAD-7) are screening tools that can assess depression and anxiety, respectively

METHODS & MATERIAL

Quantitative:

A survey was developed to analyze depression, anxiety, burnout, curriculum impacts, extracurricular impacts, among many other issues. The survey was distributed to every class at the UConn School of Medicine and the UConn School of Dental Medicine. The data was then analyzed, involving descriptive, bivariate correlations (chi-sq. test, One-way ANOVA, Pearson's r), SPSS, and multivariate linear and logistic regression.

Qualitative:

The research team conducted one-on-one interviews with student and faculty key informants and one focus group with student participants. Each interview was recorded and had notes written down. A qualitative analysis was done using these recordings and notes.

Results

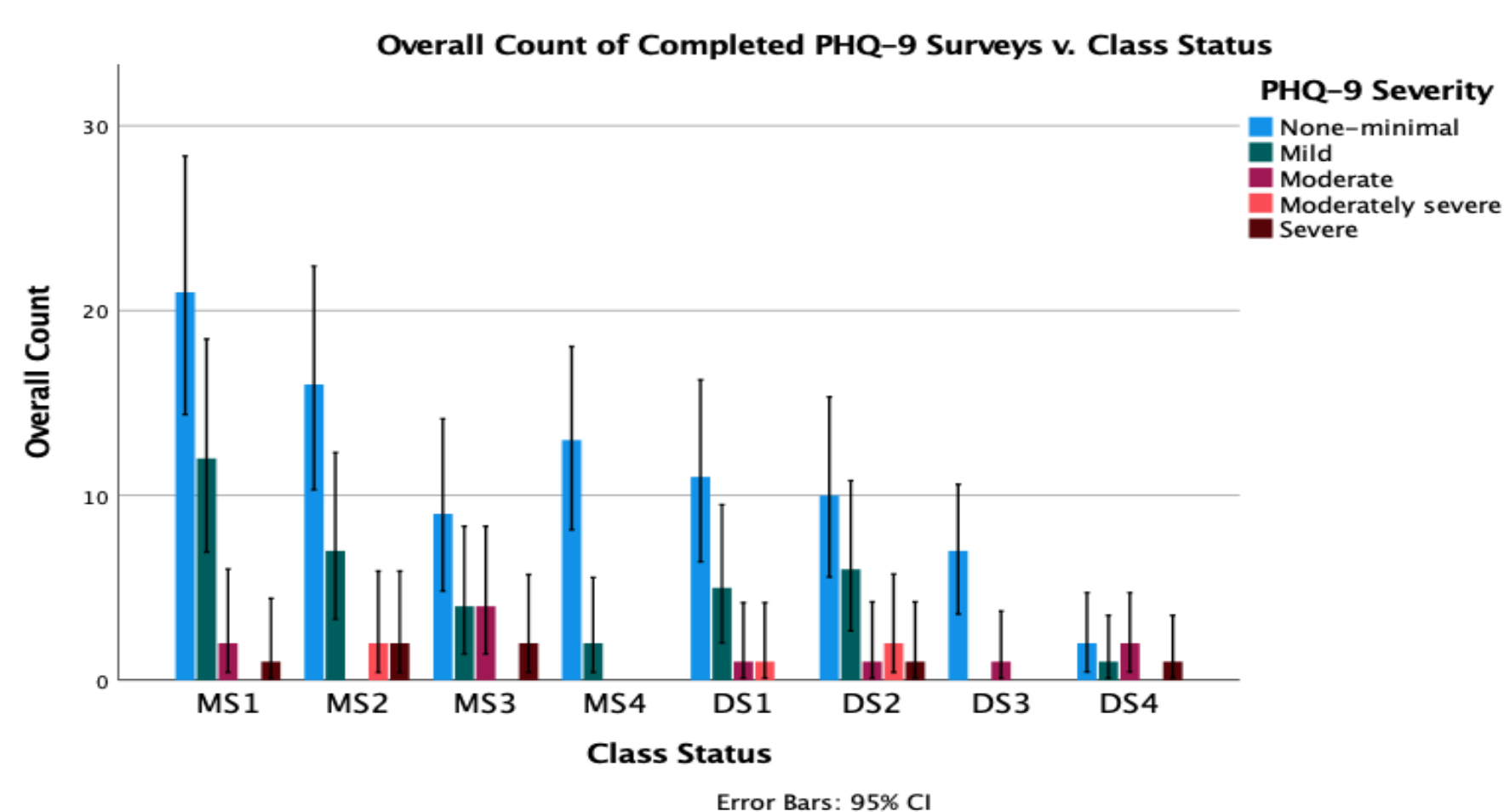


Figure 1: Cumulative Results of PHQ-9 scoring and severity (n=151)

Results Continued

The PHQ-9 is a diagnostic instrument for depression and was administered to everyone who participated in this survey (n=151). The results revealed that 59.6% of the participants showed a depression severity of none to minimal, 25.2% exhibited a mild depression severity, 10.6% exhibited moderate to moderately severe, and 4.6% showed a severe depression severity. A deeper look into this data showed that as you go up a class in the medical school, the percent of participants in the severe depression category increased until the 4th year [2.8%(MS1) to 7.4%(MS2) to 10.5%(MS3) to 0%(MS4)].

Results Continued

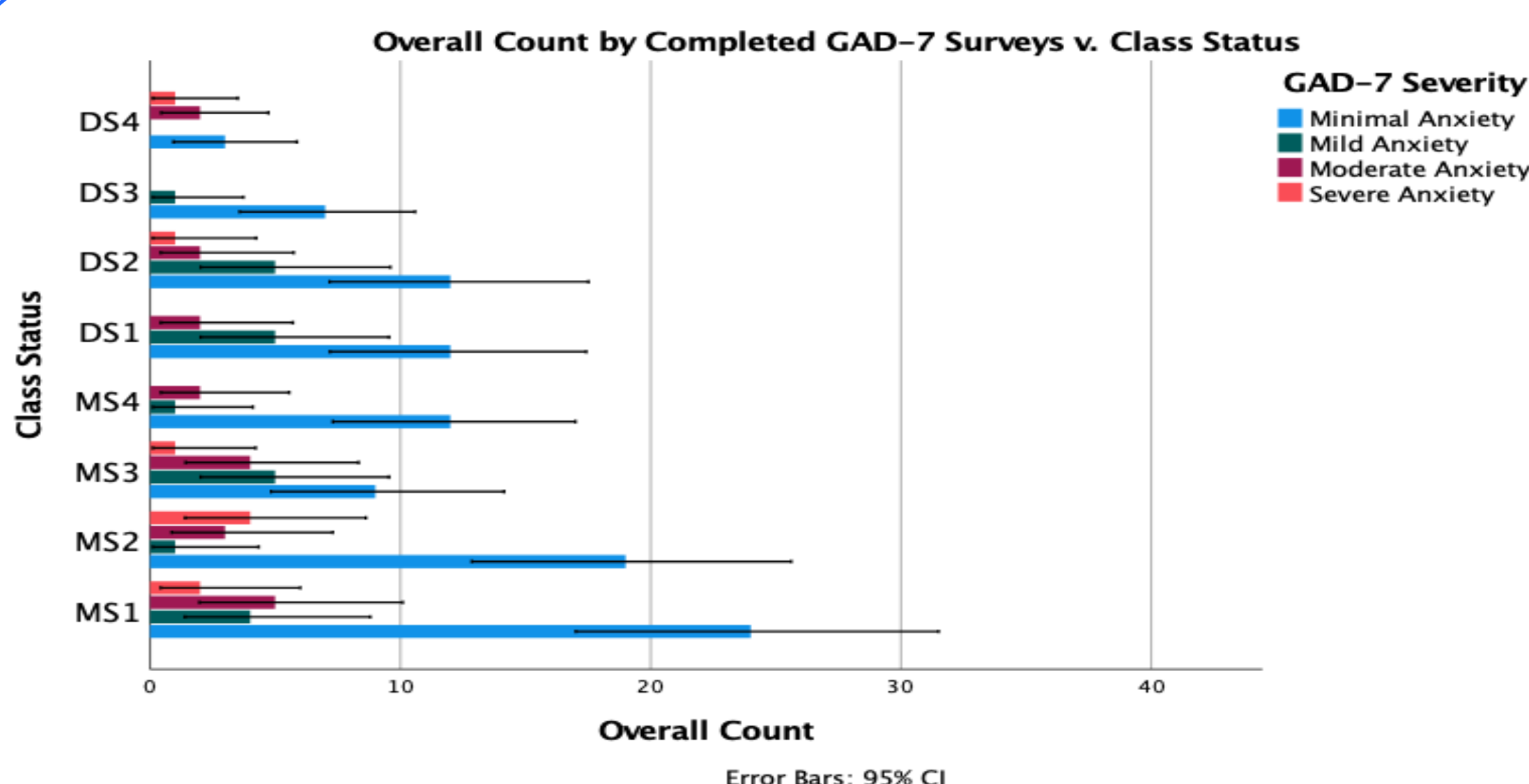


Figure 2: Cumulative Results of the GAD-7 scoring and severity (n=151)

Results Continued

The GAD is an instrument that measures anxiety symptom severity and can be used as a screening measure of social anxiety and Post-Traumatic Stress Disorder (PTSD) and was administered to those who participated in the survey. Out of the cumulative result, 41.7% of the participants classified as having at least mild anxiety.

Results Continued

	Frequency	Valid Percent	Cumulative Percent
Decreased My Stress Levels	24	15	15
No Affect on My Stress Levels	25	15.6	30.6
Increased My stress Levels	59	36.9	67.5
Not Applicable	52	32.5	100
Total	160	100	100%

Table 1: Demonstrates the results of the survey question: How did the hybrid curriculum in the medical or dental school affect your stress levels?

Results Continued

Mental Health Services

When asked, "If you did seek out mental health services, was this more often than before the pandemic?" 30.3% indicated yes. The survey data showed that 35.5% of students sought mental health services at UConn in the last 16-18 months; 80.7% of these students stated that mental health services were easy to access at UConn.

Results Continued

Results from the student interviews reveal that among 75% of the students (n=8) interviewed, a common theme of isolation was identified due to the lack of social events. Question: Has the lack of student social events affected you? In what ways?

- "Yeah, I think it's definitely been hard to meet classmates and made it more of a lonely and isolating process." - D2.
- "Yeah, I definitely feel like that's the case. There are many classmates that I haven't seen in months. Now that we're in rotations, you don't get to see everybody. I don't feel like I know a lot of other classes like 1st & 2nd years. Lack of social activities hindered ability to socialize with students." - M3.

CONCLUSION

The quantitative analysis revealed that at least 15.2% of respondents show consideration for treatment action, including pharmacotherapy, according to the PHQ-9 recommendation guidelines. Furthermore, students fear virtual setting fatigue and increased burnout rates due to the pandemic. The hybrid curriculum increased stress levels for almost 37% of students. Results of the qualitative analysis reveal students experiencing feelings of isolation due to the lack of social events. We believe integrating mental health services within the medical and dental curriculum will promote better mental health among students at UConn Health. We also recommend efforts to offer specific support for students who need intervention. The results demonstrated that some students sought out mental health services more often than before the pandemic, showing an increased opportunity to provide these students more access to the services at UConn Health. We suggest requiring all medical and dental students to participate in a short session with a trained mental health professional at the start of each academic year.

References

1. New, Jake. "Research On Mental Health Struggles Of Medical Students Is Clear, But Stigma Persists." *NAMI Montgomery County, MD*, National Alliance on Mental Illness, <https://namimc.org/research-mental-health-struggles-med-students-clear-stigma-persists/>
2. "Educational and psychological support for medical students during the COVID-19 outbreak" <https://onlinelibrary-wiley-com.ezproxy.lib.uconn.edu/doi/full/10.1111/medu.14376>