

## EDITORIAL

## Recovering and rebuilding after COVID-19: What are the best ways to support medical radiation science students?

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In this current issue of *Journal of Medical Radiation Sciences*, there are two articles relevant to the field of medical radiation sciences in the time of COVID-19. Together, these articles provide a platform for important discussions about how medical radiation science (MRS) students (radiography and radiation therapy) can be optimally supported in these difficult and challenging times.

Without doubt, the COVID-19 global pandemic has significantly affected the education, learning and clinical experience of future allied health professionals through the swift transition to online and remote teaching, and the disruption or cessation of clinical placements. Even before the pandemic, studies conducted in the UK and Australia found that MRS students have been shown to be at greater risk of psychological distress, emotional exhaustion and burnout.<sup>1,2</sup> In the UK, the student attrition rate from radiation therapy and diagnostic radiography courses is reported at 36.5% and 19%, respectively.<sup>2,3</sup> Radiation therapy students report how poor clinical placement experience influences decisions about leaving their course. In particular, they comment on the practical challenges they face (e.g. finances, transports and housing), the way the placement is organised, the inconsistency with student support and assessment and perceived bullying and marginalisation.<sup>2</sup> Similarly, student diagnostic radiography students cite external responsibilities/ pressures, financial difficulties, academic difficulties and unmanageable workload as reasons for leaving their course.<sup>3</sup> As the pandemic progresses, it is imperative to understand how MRS students are coping and identify strategies to help them during these precarious times.

In a cross-sectional, online qualitative survey of UK diagnostic radiography students ( $n = 201$ ) from the University of Hertfordshire (North of London), Lawson

Jones et al. explored how the pandemic has affected their lives and education.<sup>4</sup> The study was conducted during the UK's first national lockdown in May 2020, at a time when England and Wales were experiencing double the expected number of deaths associated with COVID-19. London was one of the first areas to be significantly affected and in mid-May was the region with the highest number of confirmed cases. The article illuminates the serious impact of the ongoing pandemic on the lives of students, psychologically, academically and financially. Indeed, the high response rate (71%) suggests students wanted to be heard. This qualitative study offers an important insight into how students' lives had been adversely affected by the pandemic, with some grieving the loss of loved ones. Not surprisingly, these experiences have been detrimental to students' psychological well-being. The article captures the array of emotions (largely unpleasant ones) students experienced amid the pandemic, including anxiety, fear, sadness, tiredness, boredom, anger and frustration. They also expressed feelings of loneliness and isolation, with the disruption of clinical placements and studying remotely due to the stay-at-home measures imposed. Social connectedness, including connection with peers, are known to be important for students; the loss of these aspects of student life is likely to amplify emotional distress. On a positive note, for the majority of students, the new reality seemed to enhance their sense of pride in their chosen career as a radiographer and frontline health worker. A number of students felt valued by society and were willing and prepared to help in future pandemics and emergency health crises.

### Tailored and proactive support

Throughout the evolving COVID-19 landscape, input of academic and clinical supervisors and mentors is more

critical than ever. The provision of tailored support for students is imperative, as is open and frequent communication. A proactive approach from supervisors and mentors combined with the recognition of differing support needs and circumstances of students is needed; there is no one-size-fits-all solution. Lawson Jones et al highlight that students may be at different stages of life. Some were conflicted between their parental and student role while supporting children with home schooling. Students were also grappling with unemployment and financial worries. Students' circumstances must always be considered central, but particularly during crises. By offering support proactively, scheduling well-being check-ins and asking students what is happening in their context, we are better able to address these concerns in a timely manner. Academic staff and clinical supervisors could also encourage MRS students to keep reflective journals to help students express their thoughts, fears, concerns, frustrations and hopes in the context of a crisis.<sup>5</sup> To ensure appropriate guidance, it is essential supervisors are given information about available, potentially suitable support services (e.g. online therapy, practical and financial assistance, and specialist bereavement counselling). Professional bodies played a key role in developing resources for students during the pandemic. For example, the Society of Radiographers (UK) provided a range of COVID-19 resources to educate and empower students on topics such as infection control, personal protective equipment, clinical placements and well-being toolkits.

### **Building resilience**

The dynamic nature of the pandemic has made it critical for universities and clinical departments to work collaboratively and responsively to effectively support MRS students, emotionally, academically and financially. Cultivating positive student mental health and well-being is paramount but made more difficult by the stigma associated with asking for help and poor understanding of mental health issues and treatment.<sup>6</sup> Evidence-based, mental health literacy campaigns are needed to increase students' understanding about mental health issues and encourage healthy lifestyle behaviours (physical activity, adequate sleep and balanced diet) sensitively during a period focused on physical distancing, social isolation and closure of universities. Solutions are not universal, with only some students comfortable talking about the challenges they face. Recent work shows that students with higher levels of resilience and healthy coping mechanisms experience greater emotional well-being and improved coping during crises.<sup>7</sup>

Further research is needed to explore the effects of COVID-19 outbreak on MRS students' coping strategies. It will also be important for universities to not only educate students about practical infection and public health controls during pandemics but also offer education aiming to strengthen their resilience and emotional well-being. Doing so will help enable students to gather effective tools to cope when faced with the challenges of different clinical situations and the uncertainties inherent in a global health pandemic and other crises. These strategies include problem-solving, stress management, positive reinterpretation (reappraising a stressful situation to see it in a positive light) and expression of emotion. Cognitive emotion regulation strategies such as mindfulness meditation may be a way for MRS students to reappraise stressful situations to more adaptive ones and protect against the adverse repercussions of the current and future pandemics.<sup>8</sup> Although these strategies can help at an individual level, it is important to ensure systemic issues (e.g. bullying, sexual harassment and long work hours) are addressed to avoid the perception of blaming individuals for not coping in resource-poor environments. Previous work has shown some students experience bullying and harassment during their clinical placements, which can contribute to feelings of loneliness, depression and de-motivation.<sup>9</sup>

### **Peer group supervision**

Peer group supervision (PGS) is another strategy that may be used to mitigate stress and anxiety in MRS students, particularly in response to COVID-19, and is the focus of Dungey and Bates' article published in this issue.<sup>10</sup> PGS typically involves groups of 4 to 6 peers discussing key topics proposed by group members, to explore solutions to challenging situations and dilemmas. PGS seeks to provide a supportive and reassuring environment in which peers with similar experience and status can share concerns collectively. Dungey and Bates' pilot tested a PGS intervention with third-year New Zealand undergraduate radiation therapy students, to examine their perceptions of taking part in PGS. Overall, they reported students felt comfortable articulating their concerns to fellow students within the group, and PGS enabled them to reflect on their clinical practice and identify useful solutions to problems. They perceived PGS as a useful strategy to manage and reduce workplace stress. The authors conclude that further research is needed to determine whether PGS impacts the quality of patient care in the long term and alleviates emotional burnout in students and staff. Although the study was conducted pre-pandemic, PGS could be an effective tool

to help MRS students to work through ongoing psychological distress from COVID-19 and feel less isolated.

## Conclusions

The extended COVID-19 pandemic and lockdown periods have impacted MRS students personally and professionally, requiring high levels of coping skills and resilience. This group is prone to emotional burnout and clinical placement stress. Although MRS students reported a wide emotional range during the pandemic, negative emotions were of the highest prevalence and the extent to which students mask psychological effects cannot be underestimated.

Rapid changes in teaching, with online and remote learning, placed major adaptive demands on MRS students, staff and clinical supervisors. Universities and clinical departments must adopt a tailored and proactive approach to supporting MRS students, personally and in their learning. Evidence-based strategies and interventions are essential to assist MRS students recovery from living through a pandemic and protect them for future outbreaks. PGS and embedding mindfulness training in university and clinical programs could be useful, cost-effective strategies to build resilience in MRS students to support them in their studies and future health professional careers.

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