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Ongoing discussions on supporting medical students during a crisis

Discussions en cours sur le soutien des étudiants en médecine en période de crise

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Dear Editor,

We are writing in response to the ideas shared in the letter by Wiwanitkit et al.¹ regarding our medical student-led paper, "Investigating the experiences of medical students quarantined due to COVID-19 exposure."²

The authors suggested that a larger sample size could have improved response rates and a longer study could have provided a more comprehensive understanding of student experiences. We agree and had considered these limitations. However, given the context of a rapidly evolving global pandemic, limitations around sample size were inevitable and prolonging the study would have delayed our ability to promptly share key insights with the MD Program. Medical students were facing enormous stressors during the COVID-19 pandemic, and our priority was to provide urgent improvements in student support for their safety and well-being.

Factors such as uncertainty, isolation, stigma, and a challenging political climate² likely contributed to reduced study participation. Our aim was to inform immediate central programmatic responses without causing further harm to participants navigating illness and turmoil. The literature supports our emphasis on the importance of study timing and the need for effective communication to reduce negative reaction and avoid stakeholder harm

during times of crisis.³ We reasoned that even a small number of interviews and surveys could provide valuable lessons and insights. Broad generalizability and long-term study were not our goals; rather, we aimed to develop targeted, student-centred recommendations to drive program improvement and prioritize student wellbeing during an intense time of crisis management.

We thank the respondents for their thoughtful letter.

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