



AUSTRALIAN  
MEDICAL STUDENTS'  
ASSOCIATION

# Australian University Student Mental Health: A Snapshot

## Summary of Findings 2013

# Acknowledgements

Report co-authored by John Coombs, Joshua Monester, Susan Lee, Sarah Wang, Matthew Kang, and Zahra Tasha Wahid of the Australian Medical Students' Association Student Mental Health and Wellbeing Committee 2013.

The Student Mental Health and Wellbeing Committee would like to acknowledge the support of Benjamin Veness, AMSA President, and Steve Hurwitz, AMSA Advocacy Stream Leader, in the production of this report.

Formatting: Acheel Kamale and Zahra Tasha Wahid.

For enquiries regarding this report please contact:

Zahra Tasha Wahid  
National Project Manager  
Student Mental Health and Wellbeing  
Australian Medical Students' Association

e – [tasha.wahid@amsa.org.au](mailto:tasha.wahid@amsa.org.au)

w – <http://www.amsa.org.au/student-mental-health-and-well-being-campaign/>

a – 42 Macquarie St, Barton, ACT 2600

p – PO BOX 6099, Kingston, ACT 2604

t - @yourAMSA

Published 11 September 2013.

# Contents

Welcome.....	4
Introduction.....	5
University Student Mental Health in Australia.....	6
Regional and Remote Settings: University Student Mental Health.....	8
Mental Health Interventions for University Students: Australia and the Global Context.....	10
Psychological Initiatives for Medical Students: A Grass-Roots Approach.....	12

# Welcome

In 2013, the Australian Medical Students' Association (AMSA) adopted a new Student Mental Health and Wellbeing Policy, which drew attention to the morbidity caused by mental health issues to young people Australia-wide:

"Students are less likely to perform well at university when suffering from mental ill health. Psychiatric illness has been shown to be associated with lower educational achievement, decreased employment, lower incomes and lower standard of living, and studies specifically of university students have found a correlation between mental health problems and poorer educational outcomes, as well as increased impairment and more days out of role... [The] Australian Institute of Health and Welfare (AIHW) data shows more than one quarter (26 per cent) of the 16-24 age group experience a mental health disorder in a 12-month period – the highest incidence of any age group. Anxiety disorders are the most common, followed by substance use disorders and then affective disorders."

*AMSA Student Mental Health and Wellbeing Policy 2013*

Following the introduction of this policy, AMSA established the Student Mental Health and Wellbeing Committee in order to translate this policy into tangible and multifaceted action.

One of this committee's initial goals was to establish an 'Evidence Database' which consists of a range of reports focusing on various aspects relating to tertiary student mental health. The following report is one of a set of five that together provide a rationale upon which our committee and others may formulate future endeavours. These reports also play an incredibly valuable role in generating awareness of the current tertiary student mental health context. Consequently, we hope that through a greater knowledge of the facts, our readers will feel empowered to take actions to promote student mental health and wellbeing.

Warm Regards,



Tasha Wahid  
National Project Manager  
AMSA Student Mental Health and Wellbeing Committee

# Introduction

This publication aims to provide a summary of a variety of reports produced by the Australian Medical Students' Association Student Mental Health and Wellbeing Committee. Each author undertook an in-depth approach to investigating their chosen topic and the final reports culminate to produce a valuable outline of the Australian University Student Mental Health picture. By exploring University student mental health in Australian urban and non-urban settings, a greater understanding of the risk factors may be obtained and then areas for targeted strategies may be established. This is compounded upon by an assay of current and recent interventions utilised in University contexts both locally and overseas. It is indeed a valuable opportunity to glean the degree of awareness of and proactivity shown by countries in response to the growing burden of mental illness that is occurring amongst the developmentally and psychosocially vulnerable group that is tertiary students.

The specific focus on grass-roots interventions engaged by Medical Student Societies gives further insight into such factors, and understanding how students are supported by their peers when engaged in high-stress courses elicits important information regarding the types of attitudes and approaches to psychologically distressing circumstances that are currently acceptable in our culture. Such initiatives can be important in breaking the vicious cycles that predispose students to poor psychological wellbeing and thus may serve to inform other such Student Societies on innovative and effective methods to approach the issue.

In addition to these reports providing a better understanding of the ways to take action with regards to mental health promotion, the importance of generating greater awareness should not be underestimated. Although a general understanding of what the concept of mental illness really means has started to pervade societal consciousness in Australia, there is still some way to go when compared with the acceptability and understanding of treatment pathways for physical illness. Through generating a louder and positive discourse surrounding mental health, we may generate a better understanding amongst the general public pertaining to issues such as the distinction between 'the person' and the 'mental illness', the value of investing in protective mental strategies, developing resilience and thus 'mental fitness' and the power of working on mental wellbeing as this affects all facets of life. Ultimately good mental health helps to facilitate greater success in all our endeavours and so clearly it is something worth talking about.

# University Student Mental Health in Australia

Through examining the literature on the mental health needs of young people, this paper highlights the significance of psychiatric issues amongst youths, particularly university students, not only in Australia but also around the world.

University students are a high-risk population in terms of mental health problems - the 16-24 age group has the highest incidence of psychiatric disorders in a 12-month period. Studies conducted at Australian universities have shown that there is an extremely high prevalence of mental health problems in university students, particularly when compared with the general population. One study found the prevalence of elevated distress amongst student sample groups to be double that of patients drawn from the general population, while nearly one third of students at University of Newcastle reported having experienced at least one of the following disorders – anxiety, eating disorders and alcohol abuse.

Furthermore, psychiatric disorders often co-exist, with strong associations found between anxiety disorder and depression, and between suicidal thoughts and depression. However, there is a lack of research investigating comorbid psychiatric disorders amongst Australian youth populations.

Many risk factors for developing mental illness have been identified. These include female gender, studying full-time, age younger than 35 years, financial stress and low socio-economic status. In contrast, characteristics deemed protective against developing mental illness include age greater than 25 years, living at a campus residential hall and being a post-graduate student.

As well as being more likely to develop mental health problems, it has been found that those in the 16-24 age group are less likely to access mental health services than older age groups. Predictors of low access to mental health services include lower socio-economic status, misinformation and lack of public awareness, lack of perceived need and scepticism regarding the value of mental health treatment. However, further investigation is required into factors contributing to the development of mental health problems in Australia.

The rise in the number of students encountering mental health problems is reflected by the increase in demand for college counselling centres. Worryingly, in addition to increased prevalence of psychiatric disorders, American college counselling centres have found an increase in severity of presenting psychological disorders.

The impact of mental health problems on Australian youths is significant. A correlation between capacity for work or study and levels of psychological distress has been found, with Australian university students reporting high levels of psychological distress also experiencing

reduced capacity or total impairment for more than 10 days on average in the previous month. In addition, psychological distress has been associated with termination of college education, difficulty with time and resource management, and a decreased likelihood to seek academic assistance.

# Remote and Regional Australia: University Student Mental Health

There is well-defined disparity between mental illness, healthcare access and geographical location in Australia. The ideas surrounding rurality are important as they attempt to explain the vastness and difficulties in categorizing rural and regional Australia (Kelly, et al., 2010). Recent research outlines that rural communities have only 40% of the range of services available to metropolitan areas, where 91% of psychiatrists are situated. In 2008, regional Australians were 66% more likely to die of suicide and 25% more likely to suffer from substance use disorders than their respective metropolitan counterparts (Pink, 2011). These figures are attributed to unemployment, availability of lethal self-harm means, service barriers and loneliness (Pink, 2011).

The Australian Institute of Health and Wellbeing defines 'non-metropolitan' as any community with a population <100,000. According to this definition 30% of the population lives in a non-metropolitan area (AIHW, 2006). However, it can be this broad definition that commonly negates a thorough investigation into the true relationship between rurality and mental health prevalence and outcomes. However, data does not support this homogenous view of rural and remote communities.

Australia has a renowned system of regional universities that allow students to access a high quality level of tertiary education within regional and rural settings. At present figures show that 140,000 students enrolled at Australian universities are from a non-metropolitan area (Withers, 2009).

There is a distinct lack of research into the mental health of non-metropolitan university students. This is despite the prevalence of mental health in rural and remote areas and the importance of non-metropolitan Universities coupled with the significant portion of students enrolled in tertiary education from these areas as outlined above. Only one paper was identified from recent literature specifically examining mental health and wellbeing in Australian university students from non-metropolitan areas. King et al's (2010) paper, "The loneliness of relocating: Does the transition to university pose a significant health risk for rural and isolated students?" studied a cohort of first year Health Science students at a large metropolitan university [response rate; 21% relocated from rural area: 74%]. Unfortunately the study was not properly powered and the selection bias meant that it could not conclude mental health issues in relocating students.

Further research examining the role of population size, geographical location, service access, as well as the myriad of economic factors needs to be concluded to truly understand mental health in non-metropolitan Australia. Secondly, there is a clear link between mental illness and

university students. As the importance of regional universities continues to grow research, into mental health in this group needs to be conducted. In particularly factors that differ from metropolitan universities so that targeted management strategies can be implemented effectively.

## References

- AIHW. (2006). *Indigenous and total populations within each ASGC Remoteness Area, 2006*. Retrieved 16<sup>th</sup> August 2013, from <http://www.aihw.gov.au/rural-health-demography/>.
- Pink, B. (2011). Australian Social Trends Retrieved 16th August, 2013, from [http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/00ABBB1BCCE82509CA25785B000D8DDD/\\$File/41020\\_ASTMar2011.pdf](http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/00ABBB1BCCE82509CA25785B000D8DDD/$File/41020_ASTMar2011.pdf)
- Kelly, B., Stain, H., Coleman, C., Perkins, D., Fragar, L., Fuller, J., . . . Carr, V. (2010). Mental health and well-being within rural communities: The Australian Rural Mental Health Study. *The Australian Journal of Rural Health, 18*, 16-24.
- Withers, G. (2009). [Submission of Inquiry into Rural and Regional Access to Educational Opportunities].
- King, S., Garret, R., Wrench, A., & Lewis, N. (2010). *The loneliness of relocating: Does the transition to university pose a significant health risk for rural and isolated students*. Cohort Study.

# Mental Health Interventions for University Students: Australia and the Global Context

This paper will report on information regarding mental health interventions at a tertiary education setting. This includes international countries including the United States (US) and United Kingdom (UK). The report breaks down the intervention to three levels: national bodies, university institutions and third-party stakeholders.

The national bodies in UK and the US had published formal policies and guidelines. The Royal Society for Public Health (RSPH) in the UK developed National Healthy Universities Framework, whilst the American College Health Association (ACHA) formed Higher Education Mental Health Alliance (HEMHA). These formations have set a national guideline for tertiary institutions to follow in terms of improving mental health in their students. A Delphi study has been published in Australia with recommendations but there is still yet a formal guideline. Due to the unique nature of the Australian tertiary institutions and the factors that arise as compared to traditional mental health care setting, it is important that the disadvantages are addressed and ways of using resources effectively are promoted from a government body. This first encourages tertiary institutions to act on the situation, as well as provide a framework for quality control. It also allows collaboration work amongst different universities and combined care between different health services.

In terms of interventions conducted at a university and college level, 32 studies were identified in the last 6 years. Over half were from America, and no formalised study was conducted in Australia. A majority of the studies focused on alcohol and substance abuse in tertiary students. Research helps to identify effective mental health interventions in the tertiary setting, which as stated before is quite different to a traditional mental healthcare. Thus it is important that effective interventions are identified through evidence. Transparency of activities in different tertiary institutions also enables sharing of information. A formalised guideline by an Australian Government body can set standards and encourage research for evaluation of current trends in the country.

Other stakeholders include mental health advocates such as *beyondblue*, Headspace, and Young and Well CRC. Another potential contributor can be the business sector. Many publications showed that poor mental health are linked with decreased productivity in the workplace. Thus the stakeholders in the business sector should be approached and encouraged to work together with the Government and tertiary institutions. It must be highlighted that investment now can have huge economical boost in the future.

Mental health intervention in tertiary setting is a new and developing field. Although many institutions are providing good healthcare to their students, there is a need for development. It has been partially demonstrated in the UK that a unified approach by all stakeholders including the government, tertiary institution, students and other third-parties can enable effective utilisation of resources available. The initial encouragement, guidance and evaluation that is provided by a national effort is an important start to addressing the current situation.

# Psychological Initiatives for Medical Students: A Grass-Roots Approach

In 2013, the Australian Medical Students' Association (AMSA) adopted a new Student Mental Health and Wellbeing Policy, which drew attention to the morbidity caused by mental health issues to young people Australia-wide. Following the introduction of this policy, AMSA has set out to build an evidence base on which to construct future mental wellbeing initiatives and campaigns, and to guide future AMSA policy.

Given that Australia's approximately 17,000 medical students are the core constituency of AMSA, one of the first investigations into student wellbeing concerned the activities of the 20 medical student societies of the 20 Australian medical schools spread across the six states and the Australian Capital Territory.

This document is a summary of the **current informal initiatives** run by each of the medical student societies to prevent or ameliorate mental illness in medical students. It attempts to explore the range of activities offered by the various medical societies, not in order to establish a benchmark, but rather to discover the extent to which medical students are being supported by their representative bodies, and to explore the varying ways in which medical societies are responding to the new AMSA policy.

	Initiatives	Dedicated Wellbeing Officer
<b>Adelaide Medical Students Society (AMSS)</b>	No initiatives reported by the AMSS.	No
<b>Australian University Students' (ANUMSS) National Medical Society</b>	<p><b>Student Mentoring Program</b></p> <ul style="list-style-type: none"> <li>This program provides a support system for 1<sup>st</sup> and 2<sup>nd</sup> year students, with a focus on those from interstate and/or a non-science background.</li> </ul> <p><b>Wellbeing Handbook</b></p> <ul style="list-style-type: none"> <li>This annual publication contains a list of GPs and psychologists who are willing to bulk bill, and also acts as a guide to clubs and societies.</li> </ul> <p><b>'No Lights, No Lycra'</b></p> <ul style="list-style-type: none"> <li>An evening party in the dark, which aims to limit expectations about physical appearance, and to reduce</li> </ul>	Yes

	<p>peer pressure to drink alcohol.</p> <p><b>Meditation Workshop</b></p> <ul style="list-style-type: none"> <li>· A workshop that focuses on promoting mental health and stress reduction.</li> </ul> <p><b>Wellbeing Evening</b></p> <ul style="list-style-type: none"> <li>· This event has an emphasis on discussion of the stresses of medical school and coping strategies.</li> </ul>	
<p><b>Medical Students' Society of Bond University (MSSBU)</b></p>	<p><b>Live Well, Study Well</b></p> <ul style="list-style-type: none"> <li>· An initiative that promotes exercise and healthy eating, and includes key speakers and workshops to build skills such as stress reduction and meditation.</li> </ul> <p><b>e-Peer Mentoring Program</b></p> <ul style="list-style-type: none"> <li>· An email-based mentorship for Year 1 students. Mentors are all MedSoc members; each mentor is allocated a group of up to 8 students.</li> </ul>	No
<p><b>Deakin Medical Students' Association (MeDUSA)</b></p>	<p>MeDUSA is currently undertaking formal discussions with the Faculty of Medicine to improve the structure, content and format of the faculty-run course "<b>The Essence of Health</b>" – a mindfulness and wellbeing course.</p>	No
<p><b>Flinders' Medical Students' Society (FMSS)</b></p>	<p><b>Mental Health in Medicine Seminar</b></p> <ul style="list-style-type: none"> <li>· Included in the seminar are keynote speakers and medical student speakers, who share their own experiences with mental health conditions.</li> </ul> <p><b>Wellbeing in Medicine Workshop</b></p> <ul style="list-style-type: none"> <li>· A program that focuses on general student wellbeing, through a series of workshops that teach coping methods and stress reduction.</li> </ul> <p><b>Mental Health Month</b></p> <ul style="list-style-type: none"> <li>· Activities included are a jokes competition, promotion of support services and mental health awareness, and the importance of assisting colleagues in times of need.</li> </ul> <p><b>FMSS website, links to internal and external support services</b></p> <ul style="list-style-type: none"> <li>· This resource lists counseling services and GPs. On-campus, phone and remote counseling services are also available.</li> </ul>	Yes
<p><b>Griffith University Medicine Society (GUMS)</b></p>	<p><b>Mindfulness sessions</b></p> <ul style="list-style-type: none"> <li>· These sessions aim to provide students with strategies to alleviate stress and allow for relaxation.</li> </ul> <p><b>Parasympathetic Picnic in the Park</b></p> <ul style="list-style-type: none"> <li>· An opportunity for medical students to "get outside and socialise in the sunshine!"</li> </ul> <p><b>Wellbeing Breakfast</b></p> <ul style="list-style-type: none"> <li>· A free breakfast targeted at raising awareness for mental health and wellbeing issues.</li> </ul> <p><b>Massage Day</b></p> <ul style="list-style-type: none"> <li>· During the exam period, massage therapists are employed to provide stress-relieving massages to</li> </ul>	Yes

	<p>students.</p> <p><b>Wellbeing Cookbook</b> (to be released)</p> <ul style="list-style-type: none"> <li>· A publication highlighting the importance of healthy eating and good nutrition.</li> </ul>	
James Cook University Medical Students' Association (JCUMSA)	<p><b>Wellbeing Page on JCUMSA website</b></p> <ul style="list-style-type: none"> <li>· Contains information regarding nutrition, exercise, and mental health.</li> </ul> <p><b>Weekly "Wellbeing Tips"</b> (on the JCUMSA Facebook page)</p> <p><b>Mental Health Week 2013</b> (to be arranged)</p> <ul style="list-style-type: none"> <li>· Last year this event included a keynote speaker from Headspace, a free barbeque and a masseuse service.</li> </ul>	Yes
University of Melbourne Medical Students' Society (UMMSS)	<p><b>Tutoring/Mentoring Groups</b></p> <ul style="list-style-type: none"> <li>· This is an academic support, which also provides an older contact for students should any mental health issues arise.</li> </ul> <p><b>MD Queer Group</b></p> <ul style="list-style-type: none"> <li>· A forum for the discussion of queer issues. All students are encouraged to attend, regardless of sexuality.</li> </ul>	No
Monash University Medical Undergraduates' Society (MUMUS)	<p><b>Student Support Program</b></p> <ul style="list-style-type: none"> <li>· A series of workshops and seminars highlighting common issues faced by medical students. The goal of the seminar is to reduce stigma associated with feeling stressed, anxiety and depression.</li> </ul> <p><b>Mental Health First Aid Course</b></p> <ul style="list-style-type: none"> <li>· These workshops aim to highlight that mental health issues are often noticed by those closest to the individual.</li> </ul> <p><b>Surviving Medicine Seminar</b></p> <ul style="list-style-type: none"> <li>· This seminar has an emphasis on raising awareness as well as discussing methods to improve the current mental health situation amongst medical students and young doctors.</li> </ul> <p><b>Q&amp;A Forum</b></p> <ul style="list-style-type: none"> <li>· This panel-style seminar allows younger students to ask their senior medical students questions regarding about coping with medical studies.</li> </ul> <p><b>R U OK Day Morning Tea</b></p> <ul style="list-style-type: none"> <li>· An event aimed at promoting a sense of community among clinical students, given that they spend limited time at the university campus.</li> </ul>	Yes
University of New England Medical Students' Association (UNEMSA)	<p><b>Free fortnightly <i>Body Balance</i> sessions</b></p> <p><b>Sporting days such as <i>Tennis Day</i></b></p> <ul style="list-style-type: none"> <li>· Aims to encourage students to exercise and mingle with each other.</li> </ul> <p><b>Mental Health Month</b></p> <ul style="list-style-type: none"> <li>· This initiative includes a <i>Mental Health Speaker Night</i>, a Quidditch Competition designed to encourage students to engage in physical activity, and a <i>'Bring Healthy Food</i></li> </ul>	Yes

	<i>to PBL' competition to promote healthy eating.</i>	
<b>University of Newcastle Medical Society (UNMS)</b>	<p><b>First Year Mentoring Program</b></p> <ul style="list-style-type: none"> <li>Each first year is given a mentor from an older year to help them settle into university and medical school life.</li> </ul> <p><b>Orientation Camp for first year students</b></p> <ul style="list-style-type: none"> <li>The camp includes mentoring sessions, team-building exercises and social events.</li> </ul> <p><b>MedPALS (Medicine Peer Assisted Learning Sessions)</b></p> <ul style="list-style-type: none"> <li>This initiative is focused around examination period, and aims to relieve academic stress and exam anxiety.</li> </ul>	No
<b>Medical Students Association of Notre Dame (MSAND)</b>	<p><b>Live Well, Study Well Seminars</b></p> <ul style="list-style-type: none"> <li>Topics that are discussed at these seminars include memory, exam preparation, study skills, stress, nutrition and sleep.</li> </ul> <p><b>Med100 Survival Night</b></p> <ul style="list-style-type: none"> <li>Older students share information regarding course structure, strategies for thriving and study techniques, learning resources, nearby services (GP clinics, counseling services), and information for interstate students.</li> </ul> <p><b>Med100 Survival Guide</b></p> <ul style="list-style-type: none"> <li>This publication includes information especially for interstate students including accommodation, travel details, and shipping possessions.</li> </ul> <p><b>Student-Run Mentoring Program</b></p> <ul style="list-style-type: none"> <li>Groups can use these sessions as they wish. For example, many groups focus on clinical skills, but others are used as a support opportunity.</li> </ul> <p><b>GP Night</b></p> <ul style="list-style-type: none"> <li>The aim of this event is to allow interstate students to find a GP, following MSAND research that showed that approximately half of each cohort has come from interstate, and many of them do not have a local GP.</li> </ul>	Yes
<b>Medical Association of Notre Dame University Sydney (MANDUS)</b>	<p><b>Family Picnic</b></p> <ul style="list-style-type: none"> <li>An opportunity for students with children to form a sense of community. The event includes a lunch and games for the children.</li> </ul> <p><b>Culture Club</b></p> <ul style="list-style-type: none"> <li>This club promotes cultural events in Sydney, to encourage social interaction between students outside of the classroom.</li> </ul> <p><b>Mental Health Month in November</b></p> <ul style="list-style-type: none"> <li>This is a campaign to raise awareness of mental health issues among the medical student body.</li> </ul>	Yes
<b>Sydney University Medical Society (SUMS)</b>	<p><b>First Year Buddy Program</b></p> <ul style="list-style-type: none"> <li>This program allows first year students to raise pressing issues with their buddy, and gain support with commencing medical school.</li> </ul>	Yes

<p>University of New South Wales Medical Society (UNSW MedSoc)</p>	<p><b>Mental Health Awareness Week</b></p> <ul style="list-style-type: none"> <li>· A campaign to reduce stigma associated with mental illness that is run in conjunction with the Disability Awareness Campaign.</li> </ul> <p><b>Smash the Stigma campaign</b></p> <ul style="list-style-type: none"> <li>· This campaign includes distributing stickers and posters to raise awareness of mental health conditions, and the way sufferers are subjected to stigma.</li> </ul>	<p>No; however, a Students with Disabilities Portfolio exists.</p>
<p>University of Queensland Medical Society (UQMS)</p>	<p>No initiatives reported by the UQMS.</p>	<p>No</p>
<p>Tasmanian University Medical Students' Society (TUMSS)</p>	<p><b>Health and Wellbeing Week</b></p> <ul style="list-style-type: none"> <li>· Each day has an event highlighting a specific theme, such as exercise, diet and mental health. Breakfast and lunch are provided, as are fitness classes and other group activities (ice-skating, laser-tag or bowling).</li> </ul> <p><b>First Year-Third Year Mentorship Program</b></p> <ul style="list-style-type: none"> <li>· This program aims to provide a safe environment to discuss anxiety, and the stresses of moving away from home and starting university and medicine.</li> </ul>	<p>Yes</p>
<p>Western Australian Medical Students' Society (WAMSS)</p>	<p><b>Students Passionate About Mental Health (SPAMH) group</b></p> <ul style="list-style-type: none"> <li>· A group of students who strive to reduce stigma towards mental health and psychiatry, and to equip medical students with the knowledge and skills to be effective advocates for people with mental health issues.</li> </ul> <p><b>The Q&amp;A Session (by SPAMH)</b></p> <ul style="list-style-type: none"> <li>· A panel of professionals in diverse fields including politics and psychiatry holds the session.</li> </ul> <p><b>SPAMH Coffee Club</b></p> <ul style="list-style-type: none"> <li>· An opportunity for students to discuss mental health issues with guest speakers.</li> </ul> <p><b>R U OK? Day (organised by SPAMH)</b></p> <p><b>The Little Book of Calm, 2013</b></p> <ul style="list-style-type: none"> <li>· A small publication which includes study and exam techniques, aimed to reduce exam-related anxiety levels.</li> </ul>	<p>Yes</p>
<p>University of Western Sydney Medical Society (UWSMS)</p>	<p><b>Blue Week</b></p> <ul style="list-style-type: none"> <li>· The purpose of Blue Week is to raise awareness about mental health and reduce stigma associated with mental health problems, as well as improve student wellbeing.</li> </ul> <p><b>GPSN and MDA Wellbeing Events</b></p> <ul style="list-style-type: none"> <li>· Both companies present a lecture to students regarding health and wellbeing during life as a medical student and future health practitioner.</li> </ul> <p><b>Psychological assistance page for the UWSMS website</b></p> <ul style="list-style-type: none"> <li>· This page includes resources and links to help their students cope with the stresses of being a medical student.</li> </ul> <p><b>Free Mental Health First Aid course</b></p>	<p>Yes</p>

	<ul style="list-style-type: none"> <li>· A program that teaches students how to recognize early signs and provide mental health first aid to people with mental health problems.</li> </ul>	
Wollongong University Medical Students' Society (WUMSS)	<p><b>SPARTA (Shoalhaven People's Activities, Recreation and Training Association)</b></p> <ul style="list-style-type: none"> <li>· A group that organises sporting and wellbeing activities for students at the Shoalhaven campus.</li> </ul> <p><b>Women in Medicine, Men in Medicine events</b></p> <ul style="list-style-type: none"> <li>· These are social evenings where doctors speak about managing medicine and their personal lives.</li> </ul>	No

These initiatives intend to raise awareness and reduce the stigma of mental illness within the medical student and junior doctor communities, through exposure to, and discussion of, mental health issues. Certain programs aim to prevent the development of mental health issues or promote early recognition and intervention through fostering a sense of community and support amongst medical students, as well as providing students with necessary skills in mental health first aid. Furthermore, a number of campaigns address issues pertaining to general wellbeing, such as nutrition and exercise, which highlights the close association between mental and physical health. In addition, it was noted that many faculties and medical societies integrate the philosophy of wellbeing into their other events and curriculum, so that mental health becomes intertwined with general health.

## Common initiatives

**Mentoring programs** were widespread and seem to cater to the unique academic and wellbeing needs of medical students. Through these programs – some of which were offered by medical societies and others by the faculties of Medicine – students were provided with support and advice from their older colleagues.

**Wellbeing evenings and workshops** were a common occurrence, and guest speakers were invited to many of these events – most of which were held during an evening. The success of these events appeared to be varied. One disadvantage of these initiatives is that while they deliver a set amount of information to students, there is usually no follow-up.

**Regular events/classes** such as yoga and meditation, have in general struggled to maintain attendance. This is in stark contrast to the popularity of mentoring programs.

A few medical societies provided a **list of GPs/psychologists** who bulk bill to their students, which further promotes mental health and wellbeing, and increases access for many students who would not be otherwise able to locate these professionals.

## Health and Wellbeing Portfolio

Thirteen out of the twenty medical societies included a position for a Health and Wellbeing Officer (or equivalent) on their committee. This in general was associated with other wellbeing initiatives, and indicated a focus of the medical society on student mental health.

*The sources of all information included in this report were MedSoc Wellbeing Officers, or in the absence of this position, MedSoc Presidents. Information was received via e-mail.*