



# Lend an ear to your colleagues

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Currently there is a battle being waged across the country, hidden from view and often unknown to those outside this profession. Concerningly, as a student representative in the advocacy space, I have become aware that suicide and suicidal ideation are prevalent within medical students, and we must not allow discourse around this to plateau.

Earlier this year, this topic transitioned from one that I advocated for to one that I was directly involved in. A casual check-up on a friend resulted in a discussion about a prior suicide attempt and an honest discussion about their mental health. I am grateful to this day that I decided to send a message and check in. I don't think I contributed much more than lending an ear for them to talk to, but sometimes that's enough to make a difference.

The current rates of mental illness and suicide within the Australian medical student community are unacceptable. Almost 20 per cent of medical students had experienced suicidal thoughts within the previous 12 months, with 4.1 per cent of students noted as having made a prior suicide attempt.<sup>1</sup> This is in comparison to 5.2 per cent of Australians aged 16-34 who reported suicidal thoughts or behaviours in the past 12 months.<sup>2</sup>

The Australian Medical Students' Association (AMSA) have called for responsibility for suicide prevention and reporting pathways to be taken by multiple stakeholders, including the Australian government, hospital services and universities, rather than having responsibility rest with student organisations and individuals.<sup>3</sup> Some key strategies being advocated for include the provision of mental health first aid training, reinforcing a healthy culture

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in medicine, and establishing clear reporting pathways for adverse student experiences.

AMSA is also currently working on their own 'Policy, Protocols and Pathways Audit' of all Australian medical schools to determine current mental health policies (mental health leave, for example) and reporting pathways (for negative experiences in medical education or placement, for example). The information gathered from this audit is then aimed to be summarised into best practice guidelines to be distributed to each medical school society and faculty, which will hopefully aid advocacy efforts around Australia.

However, statistics aside, I'd also like to appeal to my fellow medical students to take action. Asking friends and colleagues how they're feeling should

not only be reserved for 'R U OK' Day. For those struggling alone, there are a variety of organisations that can help. A good first point of call is your GP, and the Doctors' Health Advisory Service WA (DHASWA)<sup>4</sup> can also help. Their services include an anonymous and confidential helpline for doctors and medical students, as well as a 'Drs for Drs' list if you need a GP, psychiatrist or psychologist.

Suicide prevention is often seen as an issue that requires extensive reform by organisations and individuals in order to enact change. While this is true, simply checking in with your colleagues can make all the difference. ■

## References

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- 4 [dhaswa.com.au](https://dhaswa.com.au)