Exploring the impact of the COVID-19 pandemic on medical learners

2	medical learners
3 4	
5 6	Start of Block: Country
7	Q2.1 What level of learner are you currently? (select one)
8	Medical Student, Pre-Clerkship or Pre-Clinical Years
9	Medical Student, Clerkship or Clinical Years
10	1st year resident or intern (i.e., PGY1 Resident)
11	O 2nd year resident (i.e., PGY2 Resident)
12	O 3rd year resident (i.e., PGY3 Resident)
13	4th year resident (i.e., PGY4 Resident)
14	5th year resident (i.e., PGY5 Resident)
15	O 6th year resident or above (i.e., PGY6 or higher Resident)
16 17	I prefer to not answer this question
18 19	
20	Q2.2 In which country is your medical school or residency program located? (select one)
21	▼ Afghanistan Zimbabwe
22 23 24	End of Block: Country
	Start of Block: Demographic Questions
25 26 27	Display This Question: If Q2.2 = Canada
28 29	Q3.1 What academic institution are you currently a registered learner at in Canada? (select one)
30	▼ University of British Columbia (1) I prefer to not answer this question (18)
31 32	
33	

34	Q3.2 Which of the following best describes your gender identity ? (select all that apply)
35	identify as a woman
36	lidentify as a man
37	I identify as non-binary
38	I prefer to self-describe:
39 40 41	I prefer to not answer this question
42 43 44	Q3.3 Which of the following condensed categories best describe your race or how you are racialized ? (select all that apply)
45	White/Caucasian
46	Black/African American (e.g., African American)
47	Hispanic/Latinx (e.g., Latin American, Spanish, Portugese, etc.)
48	South Asian (e.g., Indian, Pakistani, Bangladeshi, Sri Lankan, etc.)
49	Southeast Asian (e.g., Vietnamese, Cambodian, Laotian, Thai, Filipino, etc.)
50	West Asian (e.g., Middle Eastern, etc.)
51	East Asian (e.g., Chinese, Japanese, Korean, etc.)
52	I prefer to self describe:
53 54	prefer to not answer this question
55 56 57	Display This Question:
58	If $Q2.2 = Canada$
59 60	Q3.4 Do you consider yourself an Aboriginal or Indigenous person, that is, First Nations, Metis, or Inuit? (select one)
61	▼ Yes (1) I prefer not to answer this question
62 63 64	Q3.5 Do you consider yourself to live with a physical disability ? (select one)
65	▼ No (1) I prefer not to answer this question
66	
67 68	Q3.6 Do you consider yourself to live with a learning disability ? (select one)
69	▼ No (1) I prefer not to answer this question
70	v 110 (1) I preser not to answer this question

End of Block: Demographic Questions

rotations or experiences) as a result of the COVID-19 pandemic? (select one) Yes No I prefer not to answer this question Display This Question: If Q2.1 — Medical Student, Pre-Clerkship or Pre-Clinical Years OF Q2.1 = Medical Student, Clerkship or Clinical Years OF Q3.1 = Medical Student, Clerkship or Clinical Years OF Q5.1 = Medical Student, Clerkship or Clinical Years Q4.2 Are you currently working in my planned clinical rotations as a medical student Yes, I am currently working but in other clinical ways at this time No, I am not currently working clinically at this time No, I am still in pre-clerkship or the pre-clinical stage of my training I prefer not to answer this question Display This Question: If Q2.1 = Medical Student, Pre-Clerkship or Pre-Clinical Years OF Q2.1 = Medical Student, Clerkship or Clinical Years OF Q2.1 = Medical Student, Clerkship or Clinical Years OF Q3.1 If your medical school has excused you from clinical duties or moved your scheduled curriculum to onlin learning modalities, did you leave or depart from your primary residence (i.e., where you live during the several) to go to another location during this time? (select all that apply)	Q4.1 Did your medical school formally excuse you from clinical duties (i.e., clerkship rotations, other clinical rotations or experiences) as a result of the COVID-19 pandemic? (select one) Yes No I prefer not to answer this question Pre-Clerkship or Pre-Clinical Years OrQ2.1 = Medical Student. Pre-Clerkship or Clinical Years OrQ2.1 = Medical Student. Clerkship or Clinical Years OrQ3.1 = Medical Student. Clerkship or the pre-clinical stage of my training I prefer not to answer this question Display This Question: If Q3.1 = Medical Student. Pre-Clerkship or Pre-Clinical Years OrQ3.1 = Medical Student. Pre-Clerkship or Pre-Clinical Years OrQ3.1 = Medical Student. Pre-Clerkship or Pre-Clinical Years OrQ3.1 = Medical Student. Clerkship or Older Older Years OrQ3.1 = Medical Student. Clerkship or Older Older Years OrQ3.1 = Medical Student. Clerkship or United Years OrQ3.1 = Medical Student. Clerkship or Older Older Years OrQ3.1 = Medical Student. Clerkship or Clinical Years OrQ3.1 = Medical Student. Clerkship or United Years OrQ4.3 If your medical school has excused you from clinical duties or moved your scheduled curriculum to online learning modalities, did you leave or depart from your primary residence (i.e., where you live during the school year to go to stay at my parent(s) or familiary to go to another location during this time? (select		rt of Block: Questions for Medical Clerks
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prefer to not answer this question	Display This Question: If Q2.1 = Medical Student, Pre-Clerkship or Pre-Clinical Years		No, I have not left the primary residence where I live during the school year
	If $Q2.1$ = Medical Student, Pre-Clerkship or Pre-Clinical Years		prefer to not answer this question
Dienlas This Augstion	If Q2.1 = Medical Student, Pre-Clerkship or Pre-Clinical Years		

My learning or training has not been disrupted so I am spending my time as I typically would during the medical school year
My learning is now online as coordinated by the medical school
I am engaging in self-directed learning
am studying for licensing examinations
am working on research or scholarly projects
am volunteering
am helping with contact tracing
am taking this time to relax or rest
am taking care of someone who is ill
am personally unwell and need to self-isolate
am spending this time to take care of my children/family
am taking this time to engage in more wellness activities than I usually would
Other (please describe)
prefer not to answer this question
Display This Question: If $Q4.4 = 1$ am volunteering
Q4.5 How are you currently volunteering ? (select all that apply)
Contact tracing
Call centres
Screening centres
Providing child care to healthcare professionals
Providing child care to others
Other (please describe)
prefer not to answer this question

181 182	Display This Question: If $Q4.4 = I$ am volunteering
183 184 185 186 187 188	Q4.6 How did you get involved in the volunteer opportunities you are currently engaged in as a result of, and/or during, the COVID-19 pandemic? Please provide a brief description about how you found out about these opportunities, or how you may have sought them out yourself.
189 190 191 192 193 194	
195 196	Display This Question: If Q2.1 = Medical Student, Pre-Clerkship or Pre-Clinical Years Or Q2.1 = Medical Student, Clerkship or Clinical Years
197 198 199 200	Q4.7 Have you participated in any online learning during this time that was coordinated or organized by your medical school for aspects of your core curriculum (e.g., lectures or clerkship teaching sessions on Zoom)? (select one)
201	O Yes
202	○ No
203 204	O I prefer not to answer this question
205 206 207	Display This Question: If O4.7 = Yes
208 209 210	Q4.8 Do you feel that the quality of your medical education will be lower as a result of any online learning your school is coordinating at this time? (select one)
211	O Yes
212	○ No
213 214 215	I prefer not to answer this question
216 217 218	Display This Question: If Q4.7 = Yes

219 220	Q4.9 Do you have any challenges accessing online learning modalities (e.g., Zoom, online lectures)? (select all that apply)
221	Yes - I have difficulties accessing a computer
222	Yes - I have difficulties accessing the internet
223	Yes - I have difficulties learning from home
224 225	Yes - I have other difficulties I wish to describe
226	No - I do not have any difficulties accessing online learning
227 228	prefer not to answer this question
229	
229 230 231	Display This Question: If Q2.1 = Medical Student, Clerkship or Clinical Years
232	1 g2:1 Stated sharing exchanges canted tears
233	Q4.10 How has the COVID-19 pandemic directly impacted your clinical electives ? (select all that apply)
234	My visiting electives at other institutions have been cancelled or postponed at this time
235	My core electives at my own medical school have been cancelled or postponed at this time
236	My electives have not yet been influenced at this time
237	Not applicable, as all of my clinical electives have already been completed
238	Not applicable, as I am a pre-clerkship or pre-clinical level of learner
239 240	I prefer not to answer this question
241 242	
243 244	Display This Question: If $Q4.10 = My$ visiting electives at other institutions have been cancelled or postponed at this time Or $Q4.10 = My$ core electives at my own medical school have been cancelled or postponed at this time
245	
246 247	Q4.11 How many weeks of electives have been impacted so far? Feel free to provide any additional information
247	below about how these electives have been impacted or any concerns about this area.
249	
250	
251	
252 253	
254 255 256	Display This Question:
256 257	If Q2.1 = Medical Student, Pre-Clerkship or Pre-Clinical Years Or Q2.1 = Medical Student, Clerkship or Clinical Years
258	or Q2.1 Medical stratety, Cleriship of Clinical Fears

259 260	Q4.12 How has the COVID-19 pandemic influenced your career decision-making (e.g., residency interests, career planning)? (select all that apply)
261	It has influenced the residency program or programs I wish to apply to
262	It has increased my interest in Public Health as a specialty
263	It has increased my interest in Infectious Diseases as a specialty
264	It has increased my interest in Family Medicine as a specialty
265 266	It has increased my interest in other programs (specify)
267	It has not influenced my career decision making or interests
268 269	prefer not to answer this question
270	
271 272 273	Display This Question: If Q2.1 = Medical Student, Pre-Clerkship or Pre-Clinical Years Or Q2.1 = Medical Student, Clerkship or Clinical Years
274	

Q4.13 Please respond to each of the following statements by selecting a response regarding your level of agreement: (select one response per row)

Strongly Not Disagree Neutral Strongly Disagree Agree (4) Applicable (3) Agree (5) (1) (X) I would have preferred to help out clinically at this time, thereby continuing my clinical rotations I feel under-utilized at this time I would feel comfortable helping out clinically at this I am concerned about the impact of COVID-19 on my chance to match to residency (select Not Applicable if you have already matched) The COVID-19 pandemic has negatively influenced my well-being I am concerned about the risk of exposure to COVID-19 during rotations I am concerned about the risk of exposure to COVID-19 in the community The response to COVID-19 will have minimal impact on my learning or skill development The response to COVID-19 will have minimal impact on my ability to enter residency with the knowledge and skills to provide safe, high quality care I am satisfied with how my program or institution is communicating information regarding the impact of COVID-19 on us as learners and the next steps for me as a learner (e.g., remainder of my training, career progression, I am worried about the impact of this disruption on my progression and timeline through medical training, including matching to a residency program, following a defined timeline, completing licensing exams on time, and/or starting a residency program on schedule

End of Block: Ouestions for Medical Clerks

277

82	Start of Block: Questions for Residents
82 83 85 86 87 88 89	Display This Question: If Q2.1 = 1st year resident or intern (i.e., PGY1 Resident) Or Q2.1 = 2nd year resident (i.e., PGY2 Resident) Or Q2.1 = 3rd year resident (i.e., PGY3 Resident) Or Q2.1 = 4th year resident (i.e., PGY4 Resident) Or Q2.1 = 5th year resident (i.e., PGY5 Resident)
90	Or Q2.1 = 6th year resident or above (i.e., PGY6 or higher Resident) Q5.1 What of the following best describes the primary setting for your residency program? (select one)
92	
	Urban (i.e., large city)
93	Rural (i.e., outside of a large city or in a remote location)
94	Other (please describe)
95 96	I prefer not to answer this question
97 98 99 00 01 02 03	Display This Question: If Q2.1 = 1st year resident or intern (i.e., PGY1 Resident) Or Q2.1 = 2nd year resident (i.e., PGY2 Resident) Or Q2.1 = 3rd year resident (i.e., PGY3 Resident) Or Q2.1 = 4th year resident (i.e., PGY4 Resident) Or Q2.1 = 5th year resident (i.e., PGY5 Resident) Or Q2.1 = 6th year resident or above (i.e., PGY6 or higher Resident)
05 06	Q5.2 Which of the following category best describes your residency program ? (select one)
07	C Family Medicine
80	O Public Health
09	C Emergency Medicine
10	O Internal Medicine (core training)
11	O Pediatrics (core training)
12	Medical Subspecialty Training (fellowship training)
13	Surgery
14	Obstetrics and Gynecology
15	O Anesthesiology
16	Psychiatry
17	Other:
8 9	I prefer not to answer this question
20	

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321
322
323
324
325
326
327
            Display This Question:
                  If Q2.1 = 1st year resident or intern (i.e., PGY1 Resident)
Or Q2.1 = 2nd year resident (i.e., PGY2 Resident)
                  Or Q2.1 = 2nd year resident (i.e., PGY2 Resident)
Or Q2.1 = 3rd year resident (i.e., PGY3 Resident)
                  Or\ \widetilde{Q}2.1 = 4th\ year\ resident\ (i.e.,\ PGY4\ Resident)
                  Or Q2.1 = 5th year resident (i.e., PGY5 Resident)
Or Q2.1 = 6th year resident or above (i.e., PGY6 or higher Resident)
328
329
           Q5.3 Are you working more than usual during the COVID-19 pandemic? (select one)
330
                  Yes, I am working more than usual
331
                      No, I am working the same amount as usual
332
                  No, I am working less than usual
333
                  I prefer not to answer this question
334
335
336
337
338
                 If Q5.2 = Family Medicine
Or Q5.2 = Psychiatry
339
340
           Q5.4 You selected that your residency program is either in Family Medicine or Psychiatry. Do you think residents in
341
           these programs could potentially be utilized at this time to provide peer-to-peer mental health support and/or
342
           counseling to other residents or healthcare professionals at this time over videoconferencing modalities? (select all
343
           that apply)
344
                       Yes, I think we could be useful to provide mental health supports at this time to any and all other residents
345
                 at this time
346
                       Yes, I think we could be useful to provide mental health supports at this time to residents who are working
347
                 at the front lines of care, or who may be additionally stressed or burnt out as a result of the pandemic
348
                       Yes, I think we could be useful to provide mental health supports at this time to other healthcare
349
                 professionals (e.g., nursing) at this time
350
                       No, I do not think we could be useful at this time in providing mental health supports to other residents
351
352
353
354
355
356
357
358
359
                  If Q2.1 = 1st year resident or intern (i.e., PGY1 Resident)
Or Q2.1 = 2nd year resident (i.e., PGY2 Resident)
                 Or Q2.1 = 3rd year resident (i.e., PGY3 Resident)
Or Q2.1 = 4th year resident (i.e., PGY4 Resident)
Or Q2.1 = 5th year resident (i.e., PGY5 Resident)
360
```

End of Block: Questions for Residents

Q5.5 Please respond to each of the following statements by selecting a response regarding your level of agreement: (select one response per row)

	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
My learning has been negatively impacted by the COVID-19 virus	0	0	\circ	0	0
My career/training timeline has been negatively impacted by the COVID-19 virus	\bigcirc	\circ	\bigcirc	\bigcirc	\circ
posses adequate knowledge of the COVID-19 virus to rovide safe care in clinical environments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\circ
as a resident, I am being adequately utilized during this time of provide patient care	\circ	\bigcirc	\bigcirc	\bigcirc	\circ
As a resident, I am being over-utilized at this time in providing satient care	\circ	\circ	\bigcirc	\bigcirc	\circ
feel comfortable providing patient care at this time	\circ	\circ	\bigcirc	\bigcirc	\circ
As a resident, I could be better utilized in other ways at this ime	\circ	\circ	\bigcirc	\bigcirc	\circ
feel prepared to use personal protective equipment (PPE) idequately and safety	\circ	\circ	\bigcirc	\bigcirc	0
feel prepared to be utilized on other clinical services or areas i.e., on services that are not my specialty)	\circ	\circ	\bigcirc	\bigcirc	\circ
am worried about working in the hospital or the clinic at he moment	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\circ
The COVID-19 pandemic has negatively influenced my well- peing	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\circ
am satisfied with how my program or institution is communicating information regarding the impact of COVID- 9 on us as learners and the next steps	\circ	\circ	\circ	0	0
Display This Question: If Q2.1 = 1st year resident or intern (i.e., PGY1 Resident) Or Q2.1 = 2nd year resident (i.e., PGY2 Resident) Or Q2.1 = 3rd year resident (i.e., PGY3 Resident) Or Q2.1 = 4th year resident (i.e., PGY4 Resident)					

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382
383
384
385

Start of Block: Common Questions

Q6.1 Please select the response that best reflects how you feel at this time **regarding the response of organizations** to the COVID-19 pandemic (select one response per row)

	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
I am satisfied with how the local/municipal government (i.e., the city where I live) has responded to the COVID-19 pandemic	0	0	0	0	\circ
I am satisfied with how the provincial government (i.e., the province, state, or region where I live) has responded to the COVID-19 pandemic	0	\circ	\circ	\bigcirc	\circ
I am satisfied with how the federal government (i.e., country where I live) has responded to the COVID-19 pandemic	0	\bigcirc	\bigcirc	\circ	\bigcirc
I am satisfied with how the professional organizations my clinical specialty is affiliated with have responded to the COVID-19 pandemic	0	\circ	\circ	\circ	\bigcirc
I am satisfied with how the professional organizations for medical learners have responded to the COVID-19 pandemic (e.g., resident unions or medical student organizations).	0	0	\circ	\circ	0

End of Block:

Start of Block: Impact of COVID-19 on Wellness for Learners

Q7.1 The following questions are from a short-form version of the **State/Trait Anxiety Inventory for Adults** (Tluczek, 2009). Please select the response that best reflects how you feel at this time for each row.

	Not at all (1)	Somewhat (2)	Moderately (3)	Very much (4)
I am comfortable	0	\circ	\circ	0
I am anguished		\circ	\circ	0
I feel at ease		\circ	\circ	\circ
I feel nervous		\bigcirc	\circ	\bigcirc
I feel concerned		\bigcirc	\circ	\circ
Right now I feel good		\circ	\circ	\circ

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Q7.2 The COVID-19 pandemic has <u>negatively influenced</u> the following aspects of my **well-being:** (select one per row)

	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
Physical wellness (e.g., physical activity, nutrition, your own disease management)	0	0	0	0	0
Mental wellness (e.g., mood, anxiety, stress management, motional well-being)	0	\bigcirc	\circ	\bigcirc	\bigcirc
ocial wellness (e.g., sense of inclusion, equity)	0	\bigcirc	\bigcirc	\bigcirc	\circ
ntellectual wellness (e.g., ability to learn or fulfill ducational goals)	0	\bigcirc	\bigcirc	\circ	\circ
Occupational wellness (e.g., safety in learning and working environments)			\circ		\circ
Display This Ouestion:					
Display This Question: If Q3.3 = South Asian (e.g., Indian, Pakistani, Banglade Or Q3.3 = Southeast Asian (e.g., Vietnamese, Cambodia Or Q3.3 = West Asian (e.g., Middle Eastern, etc.) Or Q3.3 = East Asian (e.g., Chinese, Japanese, Korean,	an, Laotian, Tha	etc.) i, Filipino, etc.)			
Or Q3.3 = Southeast Asian (e.g., Vietnamese, Cambodia Or Q3.3 = West Asian (e.g., Middle Eastern, etc.)	etc.) d that you are ehaviors tow	i, Filipino, etc.) e racialized a	as Asian. Hav		
If Q3.3 = South Asian (e.g., Indian, Pakistani, Banglade, Or Q3.3 = Southeast Asian (e.g., Vietnamese, Cambodia Or Q3.3 = West Asian (e.g., Middle Eastern, etc.) Or Q3.3 = East Asian (e.g., Chinese, Japanese, Korean, Q7.3 At the beginning of this survey, you indicate experienced an increase in racist comments or b setting since the emergence of COVID-19? (select	etc.) d that you are ehaviors tow	i, Filipino, etc.) e racialized a	as Asian. Hav		

418	Q7.4 Which of the following are concerns or stressors for you at this time? (select all that apply)
419	My personal health and well-being
420	The health and well-being of my family members
421	The health and well-being of the public
422	My personal financial situation
423	The financial situation of others
424	The impact of this pandemic on my learning
425	Other (specify)
426 427	prefer not to answer this question
427 428 429	
430 431	Q7.5 Would you consider yourself more anxious during this time than you typically are during the medical school or residency year? (select one)
432	O Yes
433	○ No
434 435	I prefer not to answer this question
436 437 438 439	Q7.6 Are you practicing social or physical distancing (e.g., staying home as much as possible to minimize the spread of COVID-19) at this time? (select one) Almost always
441	As much as I can
442	O Not at all
443 444	I prefer not to answer this question
445 446	
447 448	Q7.7 Have you had to be in quarantine or self-isolation due to testing positive for COVID-19, potential exposure to COVID-19, or having symptoms associated with COVID-19 at this time? (select one)
449	O Yes
450	○ No
451 452	I prefer not to answer this question

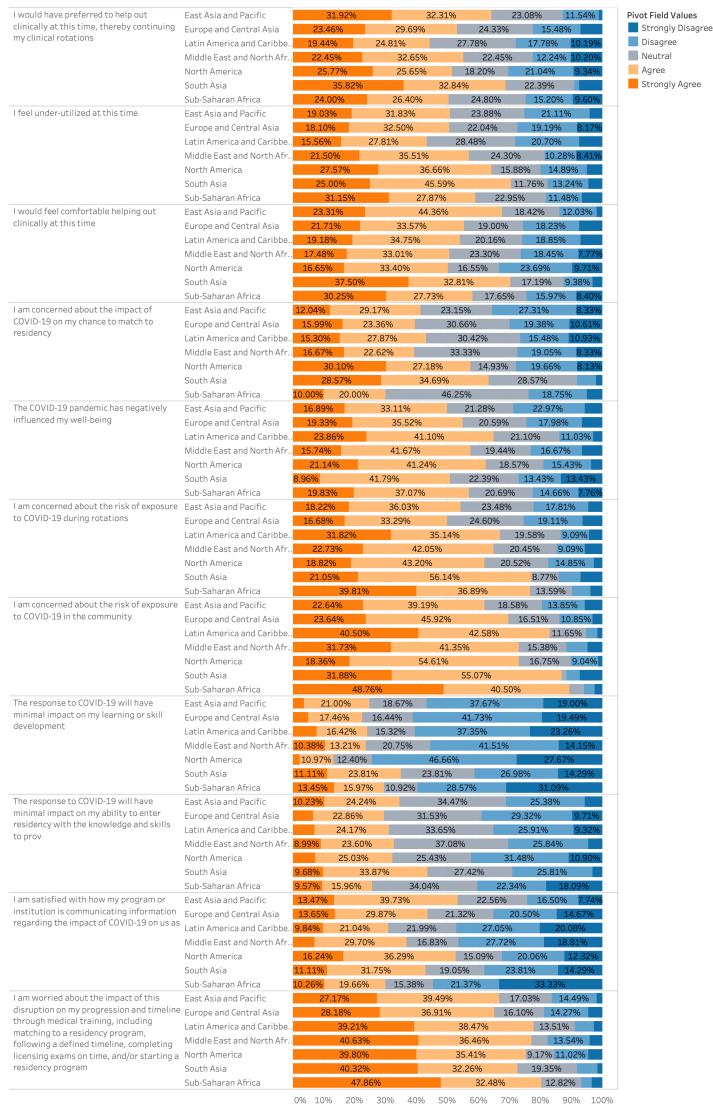
453 454 455 Q7.8 Are you being asked by family and friends to provide medical expertise or information regarding the 456 COVID-19 pandemic? (select all that apply) 457 Yes - Family Members 458 Yes - Friends 459 Yes - Others 460 No 461 I prefer not to answer this question 462 463 464 465 Q7.9 Are you using social media to communicate information to others about the COVID-19 pandemic? (select all 466 that apply) 467 Yes - Twitter 468 Yes - Instagram 469 Yes - Facebook 470 Yes - Other 471 No 472 I prefer not to answer this question 473 474 **End of Block: Impact of COVID-19 on Wellness for Learners** 475 476

	How can medical schools or residency programs improve your educational experience during this imilar temporary disruptions to your training?
Q8.3	Which strategies or innovations is your program or school using at the moment that could be benefici
other	Which strategies or innovations is your program or school using at the moment that could be beneficist to consider implementing? (e.g., setting up Zoom meetings for residents to check in with program diving medical students in online screening or volunteer opportunities, etc.)
other	s to consider implementing? (e.g., setting up Zoom meetings for residents to check in with program d
other	s to consider implementing? (e.g., setting up Zoom meetings for residents to check in with program d
other	s to consider implementing? (e.g., setting up Zoom meetings for residents to check in with program d ving medical students in online screening or volunteer opportunities, etc.)

Supplemental File B: Supplemental Analysis

Figure B.1 Comparison of Medical Student Scale Items by Geographic Region

Medical Student Specific Scale

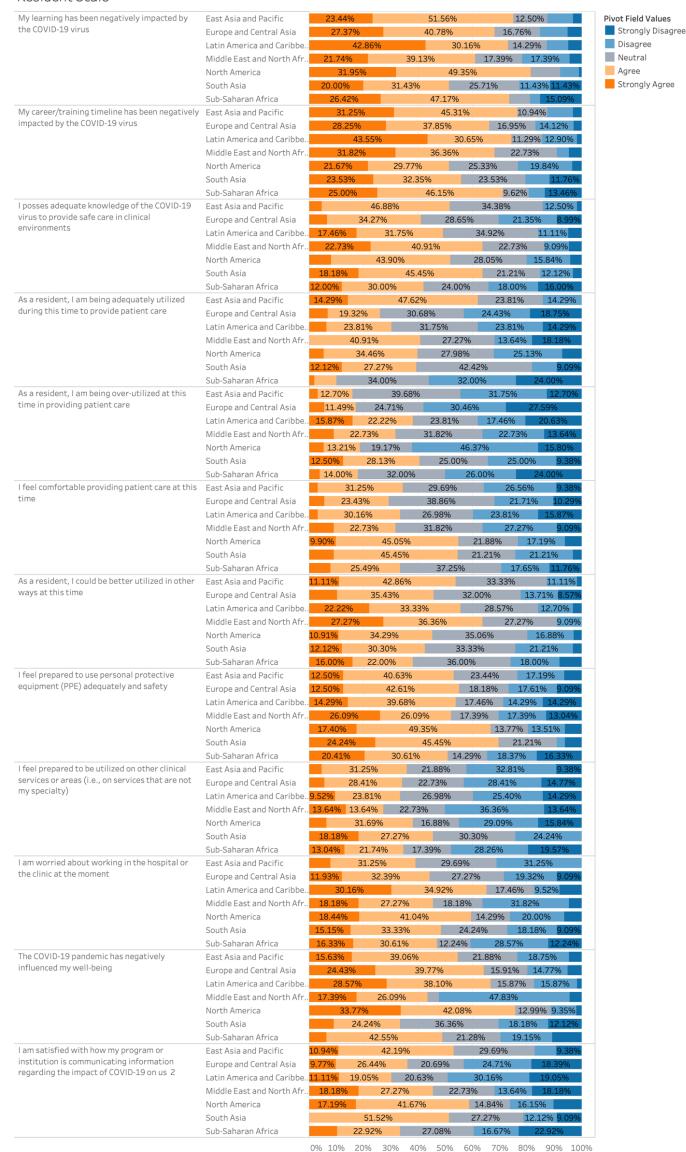


Agree

Strongly Agree

Figure B.2 Comparison of Resident Scale Items by Geographic Region

Resident Scale



% of Residents

Agree

Strongly Agree

14 15

Figure B.3 Frequency of Learner Concerns by Level of Training

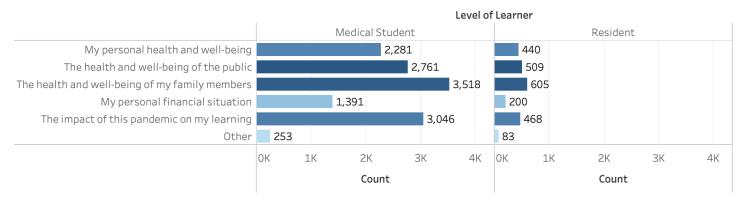


Figure B.4 Comparison of Learner Perceptions of Anxiety by Level of Training

Would you consider yourself more anxious during this time than you typically are during the medical school or residency year?



Figure B.5 Comparison of Social and Physical Distancing by Level of Training

Are you practicing social or physical distancing (e.g., staying home as much as possible to minimize the spread of COVID-19) at this time?

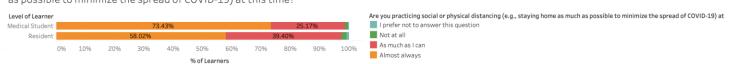
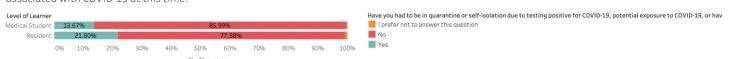


Figure B.6 Comparison of Quarantine or Self-Isolation by Level of Training

Have you had to be in quarantine or self-isolation due to testing positive for COVID-19, potential exposure to COVID-19, or having symptoms associated with COVID-19 at this time?



	Satisfaction with Organizational Responses (/25) α= .806			State-Trait Anxiety Inventory (/24) $\alpha = .849$			Impact of COVID-19 on Wellness $\alpha = .744$		
	Mean (SD)	95% CI	p-value	Mean (SD)	95% CI	p-value	Mean (SD)	95% CI	p-value
Level of Training ^a									
Medical Student	16.95 (4.32)	16.82-17.08	.000	14.36 (4.12)	14.23-14.48	.000	17.31 (4.07)	17.19-17.43	.000
Resident	15.67 (4.32)	15.36-15.98		15.13 (4.06)	14.83-15.42		18.52 (3.86)	18.24-18.80	
Geographic Regions ^b									
East Asia and Pacific	18.46 (4.28)	18.01-18.91	.000	13.33 (3.77)	12.93-13.73	.000	16.77 (4.22)	16.33-17.22	.000
Europe and Central Asia	17.34 (4.25)	17.16-17.52		14.33 (4.18)	14.15-14.51		17.14 (4.09)	16.96-17.31	
Latin American and Caribbean	14.78 (4.19)	14.48-15.07		15.22 (4.12)	14.93-15.51		18.15 (4.10)	17.86-18.44	
Middle East and North Africa	16.04 (5.10)	15.13-16.96		14.36 (3.81)	13.66-15.05		17.14 (3.97)	16.42-17.86	
North America	17.14 (3.78)	16.94-17.34		13.45 (4.01)	14.24-14.66		17.92 (3.78)	17.72-18.11)	
South Asia	15.39 (5.19)	14.37-16.41		15.01 (4.51)	14.09-15.93		17.45 (4.62)	16.54-18.37	
Sub-Saharan Africa	12.93 (4.28)	12.20-13.66		15.12 (4.23)	14.44-15.80		16.94 (4.42)	16.24-17.65	

 $[\]alpha$ = Cronbach's alpha (reliability statistic); upon exploratory factor analysis, all items in each scale loaded to one factor, suggesting each scale is unidimensional (construct validity) a = 1 Independent samples t-test, equal variances not assumed based on Levene's test for equality of variances; statistical significance if p < 0.05 b = 1 Analysis of Variance with Bonferroni correction to adjust for post-hoc corrections statistical significance if p < 0.007;

Supplemental File C: Inferential Statistical Analyses

Supplemental File D: Summary of Qualitative Themes

Code	Summary of Qualitative Data
Career Decision Making	Students noted additional increased interests in: EM, critical care, IM, anesthesia, and psychiatry; graduate training in epidemiology and public health. Some noted a decreased interest to pursue a clinical career, and many expressed concerns about the impact of the pandemic on the healthcare system and job prospects in their country, stating they would broaden the countries they apply to for residency. The limited clinical exposure resulting from their removal from the clinical environment limited their opportunities to explore various specialties, decreasing their career interests.
Communication	Communication (Parent Node): Clear and effective communication from institutions was essential for learners. Poor or absent communication left learners uncertain of what was happening, contributing to their stress.
A) Channels or Mode	Effective communication provided clarity and reassurance about the pandemic's impacts and the institutional response.
B) ContentC) Frequency	Channels or Mode: Learners preferred an integrated communications strategy which centralized and streamlined delivery to reduce information overload. Email and a regularly updated webpage were the most favoured communications channels. Social media was seen as a useful supplement in some cases, but not as a replacement for established channels.
D) Learner Input E) Transparency	Content: Learners wished to be informed about impacts on their programs, details of the pandemic response, their role (including how to help), and resources they could access. Effective communications about these topics were clear, specific, decisive, concise, and reassuring.
	Frequency: Learners preferred regular communication from their institutions, which kept them up to date and provided a social tether to their school community. Irregular (sporadic) communication created an information
	vacuum that was filled by speculation, rumours, and misinformation. Overly frequent communication created information overload and led some to ignore institutional communications.
	Learner Input: Learners desired to have input into their institutions' pandemic response. This helped ensure their circumstances were accurately understood and enabled them to raise concerns overlooked by decision
	makers. Input mechanisms included surveys, virtual town hall meetings, and learner representation on decision making bodies.
	Transparency: Learners expressed a strong desire for transparency. They wished to have information shared with them about what their institution was doing, and thinking of doing, in response to the pandemic. These
	included things such as policies under consideration, details of the decision-making process, and contingency plans.
Education and Training	Education and Training (Parent Node): Normal education and training processes were severely disrupted by the pandemic. Learners identified a need for institutions to adapt and innovate in order to mitigate these
A) Clinical Learning or	impacts and continue education.
Activities B) Educational Content	Clinical Learning or Activities: Institutions struggled to mitigate the substantial loss of clinical learning opportunities. All learners emphasized that practical, hands-on learning cannot be substituted. They worried about long term impacts on their clinical proficiency and competence.
C) Electives	Educational Content: Learners suggested their education shift focus to topics of immediate practical relevance: public health, critical care, infectious disease, and management of covid-19. They felt these adjustments to be
D) Exams and Assessment	prudent should they be called upon to support the pandemic response.
E) International Learners	Electives: Most learners lost multiple months of electives, and often core rotations as well. While they recognized the practical need for these cancellations, they were concerned their professional competence and
F) Online Learning	confidence would suffer if lost electives could not be made up in the future.
G) Self-Directed Learning	Exams and Assessment: Institutions attempted to cope with the impact on exams and assessments in various ways (e.g., cancellation, postponement, alteration). How these responses were executed was essential to whether learners were helped or hindered by them. Institutions were judged to have done well when they acted decisively, communicated clearly, consulted learners, and tested tools such as online exams before implementing them. International Learners: The situations of international learners presented a number of significant vulnerabilities unique to their group. These learners and their circumstances were frequently overlooked or deliberately ignored by decision makers. Institutions must plan for crises in advance and seek learner input to prevent international learners from continuing to fall through the cracks of pandemic responses.
	Online Learning: Learners requested the use of online platforms to maintain some continuity of education and training. Online learning differs in fundamental ways from in-person learning, with unique social and
	technological barriers; successful adoption resulted from careful planning and consideration of content, format, and delivery. When done well, online learning maintained educational momentum and provided learners with
	motivation, a routine, and sense of purpose. Self-Directed Learning: Self-directed learning was frequently used to accompany or substitute for an online learning curriculum. When they included appropriate support and guidance, self-directed learning programs
	furthered education and provided learners with motivation, accountability, and a sense of progress. Programs with too little guidance left learners aimless, and those with too much content overwhelmed them.
Future Concerns or Long-	Worries about completing next steps in their training or career trajectory (i.e., locum, certifying exams, electives, residency matching, job availability, getting paid, graduation, completing appropriate activities to bolster
Term Implications Patient Care	residency applications, cancellation of hands-on teaching sessions). Learners were concerned about lack of PPE and potentially putting patients at risk. Concerns were also articulated about how no matter the response from their program/school, the disruptions to their training would
Fatient Care	negatively impact patient care.
Responses to the Pandemic	Responses to the Pandemic: Programs/schools applauded for doing the best they could in these circumstances, but a clear theme was the need for proactive planning for the future. Medical schools responded to the
A) Strategies or	pandemic in various ways but it appeared that a lot of the responses to the pandemic, and the subsequent impact on learners, was influenced by how the country was responding (or not responding) to the pandemic.
Innovations	Strategies/Innovations: Numerous strategies and innovations were described in response to the pandemic, such as: virtual teaching strategies (via Zoom, Microsoft Teams, Google Hangouts, WebEx), virtual sessions
	between learners and the program via virtual office hours, check ins, and town halls; clinical strategies (e.g., patient handover via teleconference, alternating call schedules to minimize exposure). However, a substantial
	number of learners commented that their program or school had done nothing in response to the pandemic – it was business as usual or they were being told to just stay at home and figure out their own learning.
Silver Linings	Many trainees find that there are silver linings that have been uncovered by the pandemic, such as: opportunities to be involved in new clinical spaces (i.e., volunteering with health link/contact tracing/testing centres, redeployment, telemedicine), opportunities for innovation in scheduling (i.e., studying, clinical rotations, free time, research), opportunities for supporting others non-clinically (i.e., mental health support for co-residents, daily calls to COVID positive patients, creating medical education modules), opportunities to train for the pandemic rapidly and support heavier hit rotations (i.e., Medical and critical care units), opportunities to contribute directly to creating diagnostic tests and vaccines for COVID-19.
Spending or Utilizing Time	Since being quarantined, medical learners are spending their time: working, volunteering, engaging in academic activities, relaxing, catching up on personal responsibilities, or struggling financially and/or mentally.
Spending of Outlizing Time	since being quarantined, incured rearners are spending their time, working, volunteering, engaging in academic activities, relaxing, catening up on personal responsibilities, or struggling infancially and/or mentally.

A) Feeling under-utilized	Feeling under-utilized: learners expressing their desire to be useful clinically or through public health efforts. Many find being sidelined an affront to their training thus far, others feel they are missing valuable learning
B) Opportunity – offered	experience, and some just want to improve the wellbeing of the public. Controversy over whether learner education or public health should be prioritized by their university.
to them	Opportunity – offered to them: Most medical students had opportunities offered to them by their medical student associations, schools, hospitals, or through personal and professional connections. This information was
C) Opportunity – personal	often relayed through social media or email.
D) Personal activities	Opportunity – personal: A few volunteers either searched/ asked for opportunities or created their own
E) Volunteering –	Personal activities: The pandemic has offered medical students and residents a surplus of free time. Some have used this time to engage in self-care, self-betterment, and helping family. Others have found this challenging
Medical	as they are struggling with either financial or mental health troubles.
F) Volunteering – Non-	Volunteering – Medical: A minority of those volunteering in the medical field are providing hands-on patient care, the rest are helping with: PPE drives, working in public health, providing care via telehealth, hospital/
medical	clinical assistants, helping with research, education (public and other HCW).
	Volunteering – Non-medical: Most of the non-medical volunteering still strives to help with consequences of the pandemic: running errands and making food for essential workers and those that need help, coordinating
	volunteers for various services, helping community organizations, visiting elderly/ getting them in touch with family, working with medical student organizations/ support groups, tutoring, IT services, fundraising, and
	providing public education.
Utilizing Residents	Residents regularly felt they were under-utilized. If placed in a clinical context outside of their field, many saw it as a conflict with their educational goals, with little yield for patient care. Residents stated a preference for
	supporting their departments over redeployment. The pandemic has exacerbated tensions in the residents dual role; as a learner and as an employee of the health system. This is evidenced in statements around studying,
	compensation and learning.
Wellness	Mental Health: Learners reported poor mental health because of the stressors brought about by COVID-19 in their own lives such as their learning and working conditions but were also distressed by the impact COVID-19
	has had on others including their family members, friends, colleagues, patients, the broader community, their country's political climate and economy.
	Physical wellness: They reported that proper access to personal and protective equipment was most important to protect themselves, each other and the broader community.
	Social wellness: Learners also understood the importance of self-isolation but recognized the impact this had on their wellness and learning.
	Spiritual: COVID-19 also allowed a time for reflection and spirituality to signify what really matters to learners and the broader community in which they belonged.
	Strategies: The need for support and advocacy for their own and each other's wellness. Access to counselling, peer support systems and while practicing self-compassion as well as having compassion for others was
	emphasized.