

# Time off: the correlation between gap years and mental well-being in first-year medical school students

Dr. Tanner Vermilya, D.O.

PGY-1, Family Medicine, Millcreek Community Hospital  
Erie, PA

## INTRODUCTION

Many prospective students in professional fields consider taking an additional year off before continuing their education, known as a “gap year,” for various reasons such as mental health/stress concerns, work experience, or inability to afford more schooling. With the growing emphasis on the mental health of students in higher education, much attention has been placed on the value of taking some amount of time between graduating from one level of education and entering the next level. Most evidence on this topic has been anecdotal and focused primarily on high-school students going onto college; there have been few studies in the U.S. that directly examine the effects of a gap year on American students, and even fewer focusing specifically on undergraduate-to-graduate education gap years. There have been some studies, however, that do provide some evidence of positive benefits of taking a gap year, including a noticeable increase in GPA over non-gap students (Birch, E. R., & Miller, P. W. (2007)), the mental health of students (Birch, E. R., & Miller, P. W. (2007), Haigler & Nelson), and attainment of educational and career goals later in life (Birch & Miller, 2007; King, 2011; Knight, 2014; Martin, 2010; O’Shea, 2011b; Stehlik, 2010).

Given the ever-increasing awareness of mental health struggles among medical students, further investigation of the effects of a gap year on the self-reported mental well-being of first-year medical students seems prudent. This project seeks to further examine that very question – the perceived effects of a gap year on the mental well-being of first-year medical students. This study will make use of an anonymous online survey, sent out to the Class of 2026 of LECOM Erie, via the use of the online survey website Survey Monkey. The survey first asks the surveyed student to indicate whether they took a gap year between the end of their undergraduate education and the beginning of their graduate education, then presents a series of 10 questions, scaled from 1 to 5, asking the surveyed student to report on various mental health metrics, including assessment of personal stress level, self-assessed preparation level for their education, assessment of support they feel in their position, etc. The working hypothesis for this subject prior to data collection was that students who took a gap year would score higher on self-reported mental health metrics than students who did not.

## METHOD

**Subject Recruitment.** Recruitment and data collection for this project was performed through an online survey via SurveyMonkey, which was sent via LECOM Erie to all members of LECOM Erie’s Class of 2026, across all learning pathways.

**Data Collection.** The first question of the online survey given to participating subjects will require the subject to answer whether they took at least one year between graduating from undergraduate education and entering LECOM’s medical school program. For the subsequent survey questions, subjects will report their self-assessment of various metrics on their mental well-being at this point in their education, on a scale from “strongly disagree” to “strongly agree.” Examples: “I know who I can talk to if I am feeling overwhelmed,” “I feel that I am handling my stress well,” “I am receiving the right amount of support from the institution in my education,” “I feel safe in asking for help or guidance without judgment,” etc.

**Risks.** The primary risk in this project was breach of confidentiality of the subjects. To minimize this, the survey was designed to require no identifying information. SurveyMonkey users have the option to stop the site from tracking the IP addresses of survey participants; these IP addresses will be the only potential personal identifiers in this study design, so the option to track IP addresses were disabled, providing participants with full anonymity.

**Benefits.** No direct benefit to the subjects is anticipated. The benefit to society is the contribution to the growing knowledge base on gap years in higher education generally and to graduate education specifically, by either supporting or contradicting the idea that taking a gap year is associated with better mental health than entering directly into higher education.

**Analysis.** The mental well-being “scores” reported by participating subjects on the survey will be summed for two groups – one group that reports taking a gap year (the “gap year” group) and a second group that reports not taking a gap year (the “non-gap year” group). The cumulative scores of the self-reported “gap year” and “non-gap year” groups would be compared using a standard t-test.

**Consent Process.** The first page of the survey is dedicated exclusively to providing information about the purpose of the survey, how the data from the survey answers will be used, and that the data collected will be anonymous. At the end, the subject is given an option to continue with the survey, if they are interested in participating.

The data collection for this project is via an anonymous online survey. According to 45 CFR 46 Section 46.117 (c) from the HHS, the requirement for informed consent may be waived if the only record linking the subject and the research would be the informed consent form and the principal risk would be potential harm resulting from a breach of confidentiality. The survey will be sent to LECOM Erie’s Class of 2026 via LECOM Erie, but will not require entry of any personally-identifying information from the subjects, such as name, pathway, class rank, etc. Therefore, a signed informed consent form from each subject of the survey is not required for completion of this project.

## RESULTS & DISCUSSION

Only one subject that participated in the survey out of the targeted subject population. This subject reported that they were part of the “gap year” group and indicated an increased level of stress from undergrad and a noticeable effect on quality of life as a result, as well as effective stress reduction and mild confidence in confiding in peers, but neutral confidence in confiding in faculty. However, as there are no subjects in the “non-gap year” group, no significant data analysis could be performed via a t-test.



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