

## Health and Medical Research – The Covid Effect.

While Australia has been only mildly affected by the Covid-19 pandemic in terms of cases numbers compared with other countries, the disruption to business Australia wide has been significant.

Non-Covid-19 related preclinical research has all but come to a halt and most laboratory and animal facilities have become ghost labs or absorbed by pathology labs as their workloads increased.

The effect on research teams has been varied depending on discipline. Many researchers have lost years of research data, will likely lose funding opportunities and some may lose their jobs. There has been and still is significant stress in the preclinical research community as projects are on hold, seemingly indefinitely and or closed all together.

So how have we been able to support these teams as research administrators? In many cases, not as you might think. Mental health has been a key issue with many stressed research teams wondering what will happen. Our own teams too consist of those who cope well with working from home and others not so well. Hons and HDR students have been in tears, ECR's wondering what their next career move might be if the funding dries up. This sadness at the loss of "normal" has, in some cases, been expressed as frustration and even anger at the situation they find themselves in. We as administrators have found ourselves talking more and engaging more personally with their concerns.

Our workloads have changed, fluctuations in flow with many projects on hold and facilities closed, some work just disappeared but now as we seek a return to "new normal" the hoops must be jumped, SOP's and research protocols rewritten, spaces, rotas and schedules reorganised, project funding and timelines reviewed. Response times through government have slowed as Covid-19 takes priority over research in the health services sector. Webex, teams and zoom meetings fill diaries where previously corridor conversations and a quick email follow up sufficed. As our teams work remotely keeping meaningful connection and clear communication with our stakeholders has become ever more critical and patience is most definitely a must.

In research offices based within the hospital setting there has been a real concern within the clinician researcher cohort of how they will be able to continue their research given increased pressures of clinical load. Longer clinic times and working days to enable adherence to social distancing requirements has eaten into valuable research hours and their availability to us as administrators. Many fear this could be the end of their preclinical research careers. What can we do to help?

Clinical trials and the human research ethics committees are another group that have been impacted by Covid-19 pandemic. Key issues have been identified as difficulty and delays recruiting participants, reduced cohort numbers of participants in studies, with many studies seeing a withdrawal or removal of participants.

Supply lines for both preclinical research and clinical trials have been severely impacted where those lines begin outside of Australia and even from within. Samples for testing cannot be relied upon to arrive in good condition and some products are difficult to source.

There are difficulties and delays collecting data from participants due to physical distancing requirements – measurements, samples etc.

Critically, some trials, including randomised control trials for treatment intervention, have been unable to commence or continue, we are yet to learn the impact of this Covid-19 effect.

Closure or restricted access to clinical facilities and an inability to travel for data collection or conference presentations will also have long term effects on our community as will the freezes on HR recruitment that is now occurring, limiting employment of research assistants.

As we head into an uncertain future, research funding and the long-term impact on the research career pipeline is a very real concern.

Is it all doom and gloom? Reading above one might think so, but what are our opportunities in this pandemic? What have we learned, how have we changed our practices, what has been good about it, are there new and improved ways of working and how can we as members of ARMS, our own organisations and as members of our teams contribute to improving systems and supporting our researchers and our teams?

The health and medical research SIG are planning a webinar in the coming months to talk about what has worked, what has not, what have we learned about ourselves and where next in the new normal. If you are interested in taking part or know of those who may wish to join us please contact the health and medical SIG co-ordinators Tam Nguyen or Hannah Clarke.

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