

WAYNE STATE School of Medicine

Introduction

- Comprehensive reproductive healthcare training is of paramount importance in medical education.
- Current curricula often lack sufficient content on abortion and family planning.² Knowledge gaps in medical curriculum can have detrimental effects on patient outcomes and public health.²
 - A 2019 Survey explored patient attitudes towards the support they received from trained OB/GYN residents.⁴ In programs with standardized and routine abortion care training, 79% of patients felt 'very supported' by their physician.⁴ In programs with optional periodic abortion care training, only 50% of patients felt 'very supported' by their physician.⁴
- Our project aims to address this gap, gathering feedback and recommendations to develop an innovative reproductive healthcare curriculum.¹
- We aim to empower future healthcare professionals with the skills needed for contemporary reproductive healthcare.
- Our initiative underscores the significance of reproductive healthcare education in medical training for better patient care.³

Methods

- Interest Survey:
 - We designed an interest survey following 'Medical Students for Choice' guidelines to assess two key aspects:
 - Student readiness for abortion and family planning education.
 - Student perceptions of the current reproductive curriculum in our medical school.
- Medical School Curriculum Assessment:
 - We are conducting an in-depth assessment focused on M3 and M4 students.
- The survey aims to identify gaps in our existing curriculum, specifically in relation to abortion and family planning.
- Curriculum Development:
- Insights from the assessment will shape our institution-specific reproductive healthcare curriculum.
- Key topics include contraception, pregnancy options counseling, abortion statistics, sexual health, contraception and medication abortion pharmacology, and a focus on historical reproductive healthcare injustices for context.

Advancing Reproductive Healthcare Education: The Development of an Innovative Abortion and Family Planning Curriculum

Which of the following options are you willing to do for a female patient who has decided to discontinue a regnancy? Choose ALL that apply.

I would respect my patient's right to pose abortion and I would provide he ssuming you have received the propriate education and trainin

noose abortion and would refer her to a bortion provider

onfident providing my patient with ccurate information about abortion

For my own personal reasons, I would ot counsel my patient on abortion as a eproductive option

For my own personal reasons, I would not refer my patient to an abortion provide I plan to provide my patients with

mprehensive contraception counseling I plan to provide my patients with

mergency Contraception to prevent

Figure 1. Survey Questions

The figure displays survey questions related to our reproductive health curriculum assessment. The survey includes inquiries designed to gauge medical students' attitudes, knowledge, and interest in expanding the current reproductive health curriculum. These questions aim to assess the readiness of students to engage with topics like abortion and family planning, their perceptions of the existing curriculum, and their interest in a more comprehensive reproductive health education.

Results

Based on the responses (n = 172) of the preliminary 'Curriculum Reform Interest Survey, WSUSOM students have expressed a lack of confidence in providing accurate knowledge on many reproductive health topics to patients but more importantly, a strong interest in filling their knowledge gaps through an improved curriculum and other educational opportunities.

- 79% of respondents hoped to learn relevant topics during medical school through the curriculum
- More respondents (mean across all topics = 69%) favored a mandatory preclinical curriculum over an optional one (16%) or other learning experiences (15%), with most individuals (83%) expressing a desire to learn about emergency contraception and LGBTQ+ healthcare in particular
- Large variance in current preparedness in talking with patients about said topics (mean variance on a 6-point scale = 1.71)

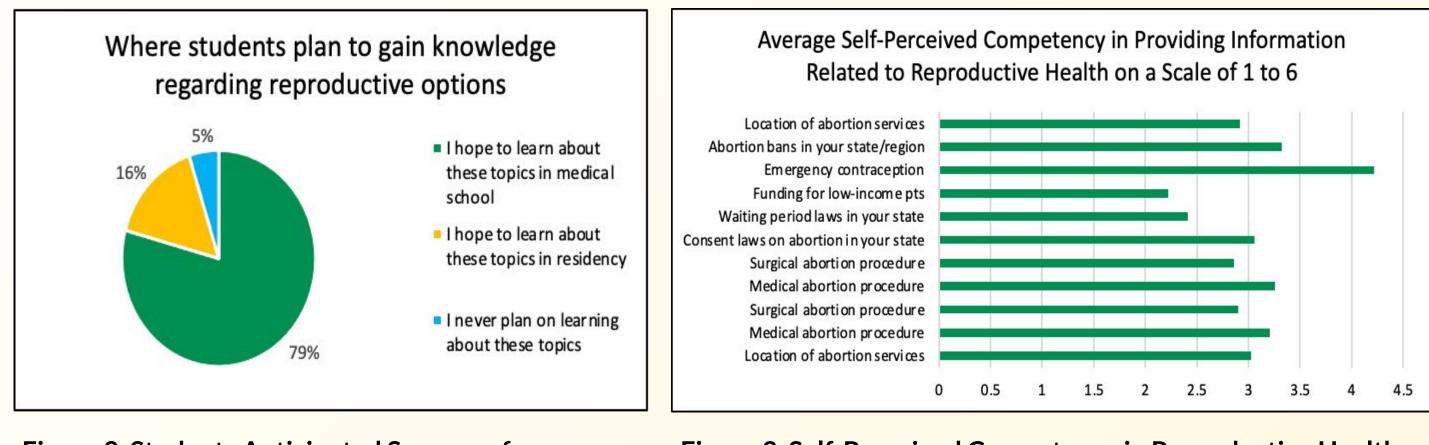


Figure 2. Students Anticipated Sources of Reproductive Health Knowledge Acquisition

This figure illustrates students' expected sources for gaining knowledge about reproductive options. The majority (80%) express their intention to learn these topics in medical school, while a smaller percentage plan to acquire this knowledge during residency (16%), and a minority do not anticipate learning about these topics (5%).

Information

This figure illustrates participants' self-perceived competency in providing information related to various reproductive health topics on a scale of 1 to 6. The findings reveal variations in competency levels across different areas. These results offer valuable insights for developing targeted educational and training programs in reproductive health.

	NOT in school	Yes, but optional	Yes, not optional	C
Pregnancy options counseling	0	0	0	
Post abortion counseling	0	0	0	
Emergency contraception	0	0	0	
Medical abortions	0	0	0	
Surgical abortions	0	0	0	
Legal issues of abortion care	0	0	0	
Racial & economic disparities of abortion care	0	0	0	
Abortion in adolescent & underserved populations	0	0	0	
Exploration of personal beliefs in relation to medical, legal, & ethical obligations as a physician	0	0	0	
LGBTQ+ healthcare	0	0	0	
Stem cell research	0	0	0	

Which of the following reproductive health care topics should be offered in t

year medical school curriculum'

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e 1st and 2nd	On a scale of 1 to 6, how v regarding the following top		ou can provide accu	rate medical info	ormation	
Only 3rd & 4th	I have no knowledge		I feel fully qualified to talk with a patient on this subject.			
year	1 2	3	4	5	6	
0	Location of abortion services					
0	Medical abortion procedure					
0	Surgical abortion procedure					
0	Consent laws on abortion in y	our state				
0	•					
0	Waiting period laws in your sta	ate				
0	Funding for low-income pts					
0	Emergency contraception					
	Abortion bans in your state/re	gion				
0	Location of abortion services					
	Medical abortion procedure					
0						
0	Surgical abortion procedure					

Figure 3. Self-Perceived Competency in Reproductive Health

- The development of our curriculum will enhance the competency and confidence of medical students, equipping them for meaningful discussions on abortion and family planning.
- Data gathered from the Interest Survey has allowed us to assess WSUSOM medical students' attitudes and interest in expanding the reproductive health curriculum, confirming the need for a comprehensive education.
- The Content Survey will pinpoint areas for improvement within our curriculum, strengthening its content.
- Combining data from surveys, faculty discussions, and recommendations from healthcare organizations, we will devise a comprehensive curriculum.
- This curriculum will equip future physicians with the medical knowledge and social context needed to address sexual health and family planning, including LGBTQI community needs.
- After the initial curriculum rollout, post-implementation assessments and surveys will be conducted to ensure its effectiveness and identify areas for further refinement.
- Our goal is to empower future physicians with the knowledge, empathy, and skills required to support patients in making informed family planning decisions, leading to improved healthcare outcomes.
- Long-term plans include collaborating with healthcare organizations and experts to stay updated with the latest advancements in reproductive health education and continuously evolve our curriculum to meet changing needs and challenges in the field.

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Conclusion

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