

Trauma Informed Care: Medical Student Training on Responding to Sexual Assault Disclosures

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BACKGROUND

- 1 in 6 women and 1 in 33 men experience attempted or completed rape.
- These statistics disproportionately increase in racially, ethnically, sexually, and gender diverse populations.
- Medical training underprepares students to provide care to people who have a history of sexual assault.

METHODS

- Created a curriculum with a PowerPoint didactics session, and five paper cases for self-paced learning.
- Recruited participants through email and in-person recruitment.
- Collected retrospective pre- and post-survey data from students on self-perceived comfort in providing care.
- Compared overall samples levels of comfort in SPSS.

RESULTS

- Recruited 56 total participants distributed across the four medical student classes.
- Statistically significant increase in group level comfort in 9 areas of care, except silence.
- Students grew most in learning what NOT to say.

DISCUSSION

- Students across all four years did not feel comfortable providing care to sexual assault providers before intervention.
- Students felt more comfortable after having formal didactics, however we are unable to determine actual student competency from this study.
- Comfort with sitting in silence did not significantly improve, suggesting these skills cannot be improved with paper cases alone.
- Further courses including standardized patient interactions are recommended to improve emotional skill, and to determine student skill.

ACKNOWLEDGEMENTS

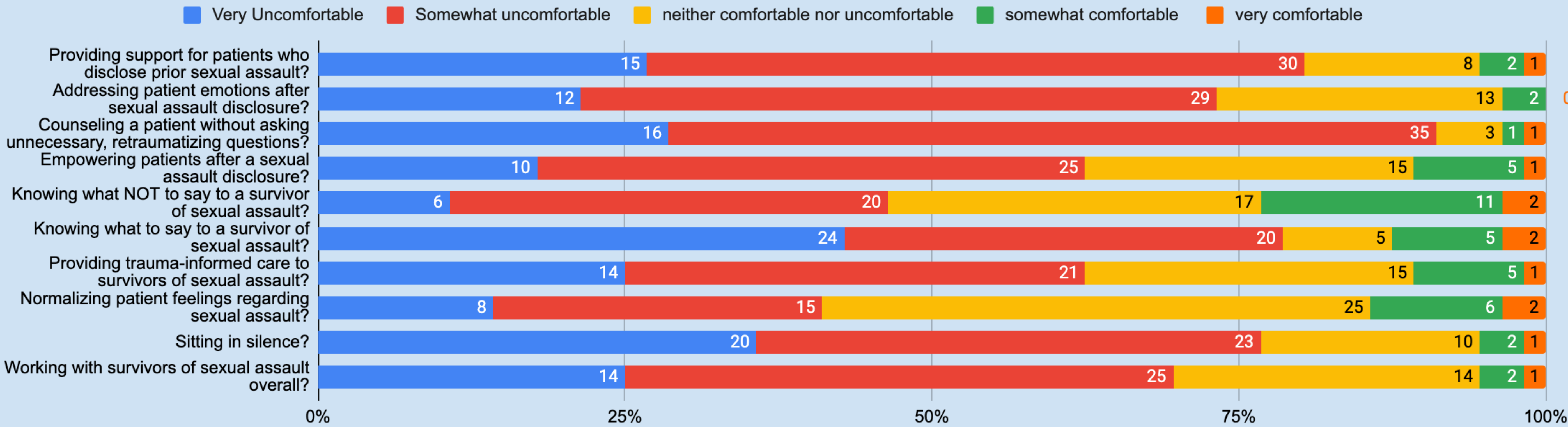
Thank you to Dean Davis for all of your guidance, and to Joshua Deson for statistics consultation.

A self-paced, trauma-informed care curriculum for medical students improved self-perceived comfort in delivering sexual assault care.



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BEFORE you took this course, how comfortable were you at...



AFTER you took this course, how comfortable were you at...

