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# A Survey of Medical Schools' Disability Curricula

HEALTH SCIENCES LIBRARY and INFORMATICS CENTER

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## Introduction

There are increasing numbers of People with Disabilities (PWDs) in the US and worldwide:

- 1 billion (15%) PWDs worldwide and 54 million (19% of the population) in the U.S. <sup>1,2</sup>
- 55.2% of Hispanics with a disability reported fair to poor health as did 50.5% of American Indian or Alaska Natives with a disability. <sup>3</sup>
- Total direct medical cost of disability in the U.S. was over \$260 billion. <sup>2</sup>
- Poverty, poor housing, accessible transportation, lower education attainment, and lower rates of employment all affect PWDs at a disproportionately higher rate. <sup>1,4</sup>

#### Barriers to care for PWDs:

- Communication
- Provider attitudes
- Provider knowledge of disability resources
- Physical barriers
- Physicians as gatekeepers
- Historical trauma forced procedures and institutionalization

Educating physicians to care for PWDs is vitally important to receiving the care they need to overcome barriers, prevent secondary conditions, and maintain and ensure PWDs quality of life. The Institute of Medicine, the World Health Organization, and the Surgeon General, all call on educators to "...develop curricula and competency standards to better prepare professionals to care for people with disabilities." <sup>5,1,6</sup>

Few medical schools currently address the care of patients with disabilities in their curriculum. This poster provides a survey of disability curricula in a sampling of medical schools and a summary of their content and approach.

)	Medical School	Point in Curriculum	Method
	Johns Hopkins <sup>7</sup>	4 <sup>th</sup>	Chronic Care & Disability Clerkship including internet modules, discussion groups, simulation exercises, clinical experience
	Lehigh <sup>8</sup>	3 <sup>rd</sup> & 4 <sup>th</sup>	Discussions with PWDs, trainings, readings
	Mt. Sinai <sup>9</sup>	2 years preclinical	Lectures, discussions with PWDs, simulations, reflective writing
	Northwestern <sup>10</sup>	4 <sup>th</sup>	Neurology Clerkship – 1 week at Rehabilitation Institute of Chicago
	Tufts <sup>11</sup>	3 <sup>rd</sup> or 4 <sup>th</sup>	Standardized PWDs
	Tulane <sup>12</sup>	4 <sup>th</sup>	Disability awareness and skills workshop
	University of Buffalo <sup>13</sup>	All 4 years	Lectures, standardized PWDs, clerkships, primary care elective with PWDs
	University of Colorado <sup>10</sup>	3 <sup>rd</sup>	Musculoskeletal Medicine Clerkship w/ortho & rheum dept
	University of Medicine & Dentistry of New Jersey <sup>14</sup>	All 4 years + 2 week clerkship	Lecture, standardized PWD, CD with instructional material, clerkship
-	University of South Florida <sup>15</sup>	3 <sup>rd</sup>	Ambulatory Care Clerkship – lectures, panel discussions, community and home visits. Partner with PT students
	University of Washington <sup>10</sup>	4 <sup>th</sup>	Chronic Care Clerkship – focus on rehab, geriatrics or palliative care

#### Methods – Literature review

A comprehensive search of the literature was performed on the following databases: PubMed, CINAHL, ERIC, Education Research Complete, Academic Search Complete, and Sociological Abstracts. We queried the University of New Mexico's MEDS database for curricular content related to disabilities. References from identified articles were also scanned.

**Inclusion criteria:** undergraduate medical education, medical schools in the United States, educational offerings focusing on physical disabilities

**Exclusion criteria:** resident training, mental or intellectual disabilities

#### Results

Eleven medical schools (N=141) were identified as providing training in the care of PWDs. Most training occurred in the 3<sup>rd</sup> or 4<sup>th</sup> year with two schools incorporating content across all four years and one during the preclinical years. Three schools utilize PWDs as standardized patients. Six schools use clerkships with PWDs as patients, with three adding readings, lectures, panel discussions with PWDs and home or community site visits.

### **Discussion**

Both the American with Disabilities Act and the Affordable Care Act provide specific mandates to provide better care and access to PWDs. Still, few medical schools' curricula provide content for these priorities. Overall, curricula have become more inclusive to issues surrounding PWDs in recent years, however, providing equitable treatment and quality care to PWDs should be given an increased priority in medical schools' curricula. The future challenge will be to include PWDs in the formation of curricula and to develop competencies that meet the healthcare needs of this growing population.

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