Meeting the Challenge of Abortion as a Topical Area in Medical Education

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BACKGROUND

- Abortions typically occur outside of academic medical centers, in a highly politicized context. As adult learners, students may have well-formed beliefs about abortion. Few schools address the subject in the clinical years and even fewer in the pre-clinical years. Fulfiling the APGO mandate to provide abortion education requires the development of innovative approaches.

METHODS

- Since 2005, our longitudinal, small group, PBL curriculum has included several weeks devoted to unplanned pregnancy in a late adolescent girl. The case objectives cover medical issues, obstetric procedures, patient decision making and social consequences of pregnancy. Since 2012, we have included a framing lecture on legal, ethical and political issues in reproductive health care. In 2013 and 2014, we added examples of women considering abortion in different circumstances.
- In 2012 we introduced a monitored online forum that permitted anonymous posts. Students posted comments about the PBL case(s). After obtaining IRB approval, we conducted three annual surveys, and held one focus group per year for students who had completed their OB clinical rotations. Student experience in their clinical rotations was dependent on the hospital setting.

ETHICS LECTURE – CLICKER QUESTION EXAMPLE

Is there a difference between discarding an embryo which carries a fatal disease and aborting a fetus for similar reasons?

Both strongly disagree

Strongly disagree

SOMEWHAT disagree

SOMEWHAT agree

Strongly agree

Neutral

Access

YES

Participate 140

80.5% 52.4% 80.0%

NO

Participate 19.5% 47.6% 20.0%

RESULTS: QUANTITATIVE

Medical Students Survey Response / Consent Rate (180 Medical Students Per Year)

<table>
<thead>
<tr>
<th>RESPONSES</th>
<th>2014</th>
<th>2013</th>
<th>2012</th>
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<tbody>
<tr>
<td>TOTAL</td>
<td>133</td>
<td>103</td>
<td>140</td>
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<tr>
<td>YES</td>
<td>106</td>
<td>81</td>
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<tr>
<td>NO</td>
<td>27</td>
<td>22</td>
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Encouraging discussion on abortion among peers

Counseling patients with different points of view from your own

FIGURE 1: Rates of participation in Focus Group.

SURVEYS: In all three years, approximately 85% of students indicated support for abortion and contraceptive education and against protection of embryos. 15% held opposite views.

RESULTS: QUALITATIVE

BLACKBOARD DISCUSSION: Students expressed new awareness about abortion laws, desire for medical evidence/unbiased information, appreciation of physician responsibilities, and support for sex education.

CONCLUSIONS

- Combined with a lecture, a multiple case, PBL format was an effective method for presenting abortion as a medical topic with ethical implications. Adding an online forum and a focus group allowed students and faculty to recognize that students hold nuanced views that do not always emerge in class discussion.
- Limited support for ambivalence about actually providing abortions seems to be the norm for preclinical students. Whether this represents continuation of attitudes formed before medical school, and whether clinical experience leads to shifts in either direction are questions for further research.

TAKE-AWAY

- "It’s complicated" Students appreciate the complexity of counseling women with unintended or compromised pregnancies.
- Opinions vary: Millennial students view abortion as more than a medical topic. A substantial minority oppose abortion or contraceptive education, and believe in protecting embryos.
- Controversial topics require innovative educational methods: An open forum with ground rules permits minority voices to be heard and discussed in a professional manner.

REFERENCES:


The topic of abortion should be part of the medical curriculum

I feel better equipped now to discuss abortion with patients

I feel better equipped now to discuss family planning with patients