

Assessing the Need for Trauma-Informed Approaches in Medical Education: Student Confidence in Conducting Sensitive Examinations with Sexual Trauma Survivors

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Introduction

- Experiencing sexual trauma frequently results in Post-Traumatic Stress Disorder (PTSD), with triggers such as physical touch.
- During sensitive patient examinations, these triggers can lead to re-traumatization.
- Although sensitive exams and trauma-informed care are both present in actual clinical settings, there is a noticeable gap in integrating these topics into standard medical education curricula.⁴
- This study aims to evaluate student self-efficacy in conducting sensitive examinations.
- We hypothesize that students will report a lower self-efficacy when completing genitalia examinations on both male and female survivors of sexual trauma in comparison to patients without a history of trauma.

More than 1/2 of women and almost 1/3 men have been victims of sexual violence in their lifetime.¹



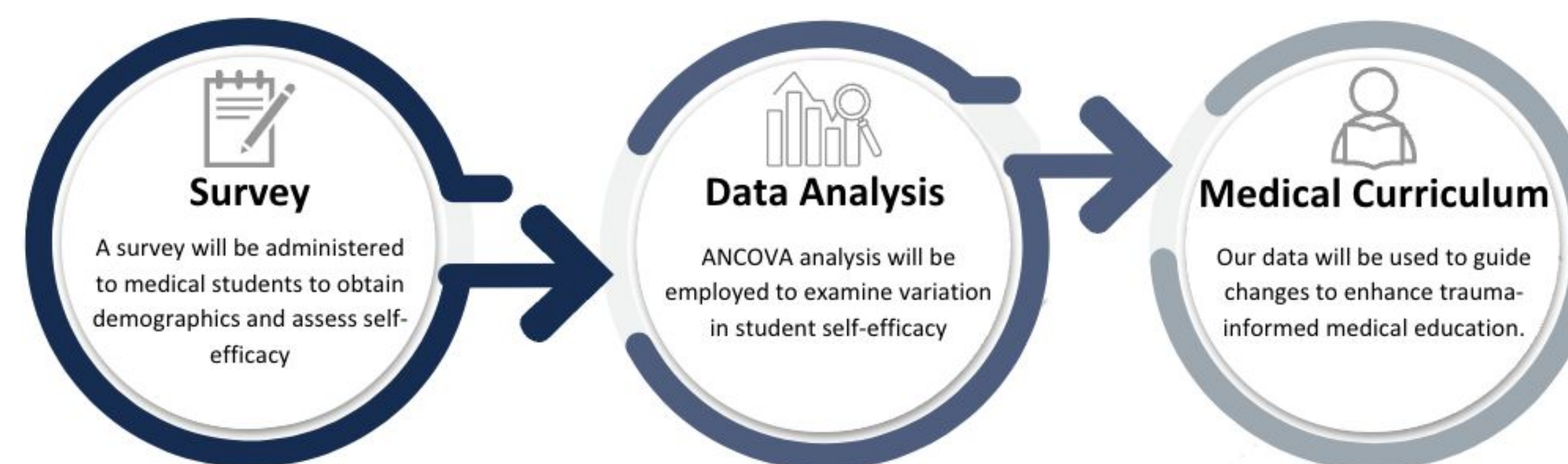
Background on Genitalia Examinations

Female Exam⁵	<ul style="list-style-type: none"> Inspection of the external genitalia Bimanual examination: Palpating the cervix, uterus, and ovaries Rectovaginal examination Speculum examination
Male Exam⁵	<ul style="list-style-type: none"> Inspection of the external genitalia “Milking” of the penile shaft to inspect the meatus Palpation of the penile shaft and scrotum Digital rectal exam, if clinically indicated

Aims and Objectives

- To evaluate the confidence of medical students in performing sensitive genitalia examinations on patients, distinguishing between those with and without a history of sexual trauma.
- To determine the necessity for a more comprehensive integration of trauma-informed care principles in the teaching of physical examinations.

Approach/Process



Using a survey-based cross sectional design, medical students enrolled at OUWB will be recruited. The survey will assess student knowledge and confidence levels in performing sensitive genitalia examinations on patients with and without a history of sexual trauma. Furthermore, students will be asked whether they believe trauma-informed care should be integrated into the curriculum and if they are interested in receiving more training in this area.

Evaluation Plan

The Analysis of Covariance (ANCOVA) will be used to investigate differences in student knowledge and confidence in caring for patients, distinguishing between those with and without a history of sexual trauma (the independent variable). Factors such as age, gender, medical specialty preference, and education level will be included as covariates in the analysis.

Expected Results

It is anticipated that students will demonstrate a higher level of self-efficacy in delivering care to patients without a history of sexual trauma. This outcome will highlight potential educational gaps in trauma-informed care when conducting sensitive examinations and the need for additional training.

Discussion

These outcomes could inform a revision to the existing medical curriculum and prompt the creation of additional courses aimed at enriching student learning. These revisions would lead to the development of a more holistic, trauma-informed educational framework, ensuring students become skilled and proficient clinicians, especially when dealing with complex, real-world clinical situations.

References

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