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Health Advocacy in Medical School: An American Survey on Attitudes and Engagement in Clerkships

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Abstract: Introduction Health advocacy is defined as activities that improve access to care, utilize resources, address health disparities, and influence health policy. Advocacy is increasingly being recognized as a critical component of a physician's role, as understanding social determinants of health and improving patient care are important aspects within the American Medical Association's Health Systems Science framework. However, despite this growing prominence, educational interventions that address advocacy topics are limited and variable across medical school curricula. Furthermore, few recent studies have evaluated attitudes toward health advocacy among physicians-in-training in the United States. This study examines medical student attitudes towards health advocacy, along with perceived knowledge, ability, and current level of engagement with health advocacy during their clerkships. Methods This study employed a cross-sectional survey design using a single anonymous, self-report questionnaire to all second-year medical students at Vanderbilt University School of Medicine (n=96) in December 2020 during clerkship rotations. The survey had 27 items with 5-point Likert scale (15), multiple choice (11), and free response questions (1). Descriptive statistics and thematic analysis were utilized to analyze responses. The study was approved by the Vanderbilt University Institutional Review Board. Results There was an 88% response rate among second-year clerkship medical students. A majority (83%) agreed that formal training in health advocacy should be a mandatory part of the medical student curriculum Likewise, 83% of respondents felt that acting as a health advocate or patients should be part of their role as a clerkship student. However, a minority (25%) felt adequately prepared. While 72% of respondents felt able to identify a psychosocial need, 18% felt confident navigating the healthcare system and only 9% felt able to connect a patient to a psychosocial resource to fill that gap. 44% of respondents regularly contributed to conversations with their medical teams when discussing patients' social needs, such as housing insecurity, financial insecurity, or legal needs. On average, respondents reported successfully connecting patients to psychosocial resources 1-2 times per 8-week clerkship block. Barriers to participating in health advocacy included perceived time constraints, lack of awareness of resources, lower emphasis among medical teams, and scarce involvement with social work teams. Conclusions In this single-institutional study, second-year medical students on clerkships recognize the importance of advocating for patients and support advocacy training within their medical school curriculum. However, their perceived lack of ability to navigate the healthcare system and connect patients to psychosocial resources, result in students feeling unprepared to advocate as effectively as they hoped during their clerkship rotations. Our results support the ongoing need to equip medical students with training and resources necessary for them to effectively act as advocates for patients.

Keywords: clerkships, medical students, patient advocacy, social medicine

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