NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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## **Title**

Difficult Conversations in Family Medicine Residency – Changing the Culture Around Abortion and Other Social Justice Issues

## Priority 1 (Research Category)

**Education and training** 

## **Presenters**

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## **Abstract**

Context: The historic Dobbs V. Jackson Supreme Court decision has made it disproportionately difficult for people of lower socioeconomic status and members of the BIPOC community to access safe and legal abortion services. Giving birth in the United States is dangerous, especially for these communities, and this barrier to access will only worsen the already growing pregnancy related health disparities in the United States. Objectives: To encourage communication about social justice issues including reproductive health and abortion in the family medicine residency setting and to foster an environment of inclusive and open discussion about social justice in medicine. Study Design and Analysis: Pilot, survey-based program evaluation post-intervention. Setting or Dataset: Data was gathered by surveying the 15 family medicine residents at Mayo Clinic family medicine residency - Mankato. Population Studied: Mayo Clinic family medicine residents. Intervention/Instrument: Implementation of a social justice in medicine curriculum with an added focus on reproductive health and pregnancy diagnosis planning, including abortion. Outcome Measures: Survey to collect information about attitudes and knowledge related to social justice issues in the family medicine setting including reproductive health. Results: Our intervention led to discussion about social justice issues including reproductive health and abortion in our family medicine residency. Residents reported improvement in understanding of these social justice issues and our conversations lead to the development of policies allowing Mifepristone use in our clinic and throughout the healthcare organization. Conclusion: Implementing curriculum designed to facilitate discussion on important social justice issues improved residency understanding of these issues and lead to clinical practice change at a small family medicine residency in MN. Further research is needed surrounding the effect of implementing social justice curricula in other family medicine residency programs. In the current setting of increasing pregnancy-related mortality in the U.S., the criminalization of reproductive health care, and given our understanding of the disproportionate violence forced birth has on communities of color, it is more important than ever – and a health equity

imperative – to develop curricula designed to discuss and learn about social justice topics including abortion in family medicine residency programs.

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