

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

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Title

Evaluating the Impact of a Longitudinal Clerkship Lecture on Medical Students' Knowledge and Response to Human Trafficking

Priority 1 (Research Category)

Education and training

Presenters

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Abstract

Context: Healthcare sites provide an opportunity to identify and respond to human trafficking (HT). People who experience HT interact with the healthcare system before, during, and after the period of victimization, yet there remains limited knowledge and intervention among healthcare professionals. Few medical schools include this topic in their curriculum, and it is not standardized in undergraduate medical education. Training students to provide care and respond using a trauma informed approach can help ensure our healthcare sites are places of healing and not re-traumatization. Objective: Assess how a lecture on HT during a 4-week family medicine (FM) clerkship impacts medical student knowledge, skills, and attitudes regarding HT. Study Design: Mixed methods prospective quantitative study. Setting: University of Texas Southwestern Medical School. Population Studied: FM clerkship students. Intervention/Instrument: A 15-item survey distributed prior to, immediately after, and 3 months, 6 months, and 12 months post a one-hour training on HT. Outcome Measures: Trends in knowledge of HT, perceived confidence in caring for patients impacted by HT, and attitudes towards the training over time. Results: Across 16 cohorts, 281 students completed the training. Of these students, 97.5% completed the post-test, 50% completed the 3-month post-test, 25.6% completed the 6-month post-test, and 12.8% completed the 12-month post-test. At baseline, 79% of students had no previous training on HT, 94% felt it was important to receive this training, 68% reported knowing the health consequences of HT, 51% could identify red flags, 22% knew how to screen, and 16% knew referral resources. Knowledge of red flags was 99% post session, 90% at 3 months, and 92% at 6 and 12 months. Screening knowledge was 92% post session, 75% at 3 months, 97% at 6 months, and 75% at 12 months. Knowledge of referral resources was 89% post session, 61% at 3 months, 78% at 6 months, and 61% at 12 months. Trauma informed care (TIC) knowledge was 55% at baseline, 96% post session, 90% at 3 months, 64% at 6 months, and 100% at 12 months. Conclusions: HT lecture implemented during the FM

clerkship increased knowledge and confidence in responding to HT victims, which were retained by most participants one year later. On-going education on HT and TIC is important to maintain knowledge and ensure clinicians are equipped to respond appropriately and avoid re-traumatization in this vulnerable population.

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