

Medical Student Perceptions, Beliefs, and Comfort Regarding Adolescent Sexual Health Topics: A Look at AMS



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Introduction

The U.S. has the highest teenage pregnancy rate of industrialized nations.¹ Almost half of all new sexually transmitted infections occur among adolescents.² Providing sexual health (SH) counseling and testing can reduce risk of adverse SH outcomes.³ Rates of physician counseling adolescents on SH topics ranges from 8-65%.^{3,4,5} The most common reasons cited are inadequate training, provider discomfort, and inadequate time and resources.²

This study aims to examine if service learning groups based on sexual health education, such as Sex Ed by Brown Med, better prepare medical students to ask about SH in pre-clinical years.

Methods

Summer	Survey developed
September	Pre-survey administered
May	Administer post-survey
Future	Compare pre- and post-survey results and changes over time

Demographics

- 42% MS1; 57% MS 2
- 74% MS1 have never conducted SH in clinical setting; 93% < 5 times
- 25% MS2 have never conducted SH in clinical setting; 79% < 5 times
- 68% received formal SH education
- 23% have experience teaching SH

Results

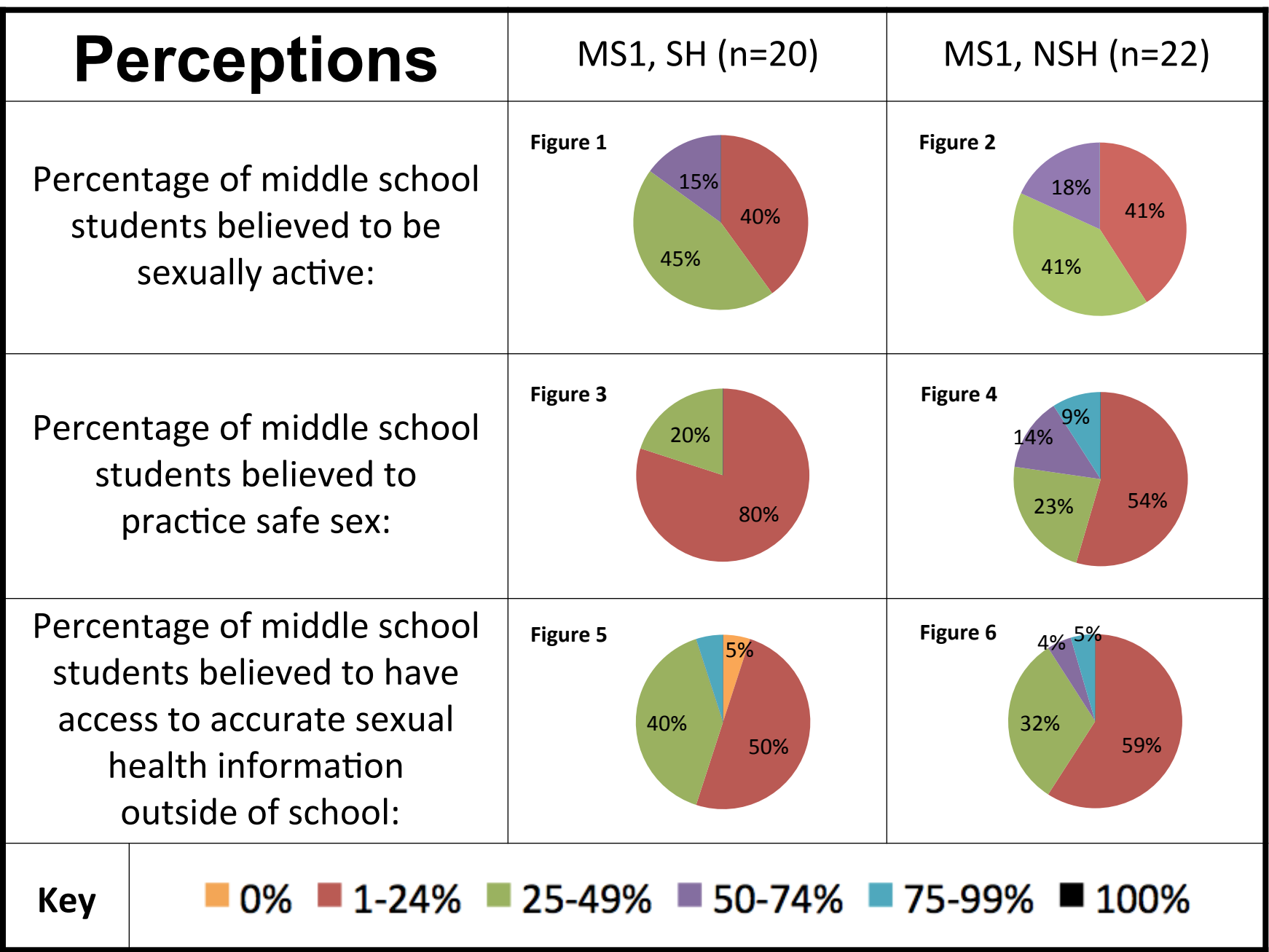
Comfort

How comfortable are you with talking about SH with patients?				
	MS 1 (n=42)	MS 2 (n=58)	MS1, SH (n=20)	MS1, NSH (n=22)
Not at all comfortable	0%	3%	0%	0%
Slightly comfortable	33%	14%	25%	41%
Moderately comfortable	36%	47%	35%	36%
Very comfortable	19%	31%	20%	18%
Extremely comfortable	12%	5%	20%	5%

How comfortable are you with talking about SH with adolescent patients?				
	MS 1 (n=42)	MS 2 (n=58)	MS1, SH (n=20)	MS1, NSH (n=22)
Not at all comfortable	0%	1%	0%	0%
Slightly comfortable	26%	21%	20%	32%
Moderately comfortable	43%	36%	35%	50%
Very comfortable	24%	24%	35%	14%
Extremely comfortable	7%	12%	10%	5%

- 18% of MS1 and 36% of MS2 agree that medical school has prepared them to discuss SH topics in the clinical setting.
- 27% of MS1, NSH and 10% of MS1, SH agree that medical school has prepared them to discuss SH topics in the clinical setting.
- 65% of MS1 think sexual relations before marriage are not wrong at all; 33% belief they're wrong sometimes

Perceptions



Beliefs

- 97% agree or strongly agree that birth control should be available for teenagers regardless of parental consent.
- 23% of MS1, NSH think sexual relations between teenagers are always or almost always wrong versus 5% of MS1, SH

Conclusions

- MS2 feel more prepared and more comfortable to discuss SH topics than MS1.
- MS1 who 1. believe more teenagers are engaging in unsafe sexual behaviors 2. report greater comfort in discussing SH topics and 3. believe medical school is not preparing them adequately to discuss SH topics in a clinical setting elect to participate in SH pre-clinical electives at a greater rate.

Discussion

- Discrepancy in preparedness versus comfort
- Response bias
- Timing of survey
- Compliance over time
- Does exposure change comfort, perceptions, and/ or beliefs over time?

References

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Acknowledgments

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