Enriching the Medical Curriculum: Empowering Women through Health, Education and Wellness

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**Young Parents Program (YPP)**

**Background Information on Pregnancy in Adolescents:** According to the CDC, 273,105 babies were born to women ages 15-19 in 2013

**Medicinal Consequences:**

- Children of teen moms score lower than children of older parents in assessments of health, cognitive ability and behavior.  
- Maternal Health: poor maternal weight gain, anemia and pregnancy-induced hypertension.

**Socioeconomic Consequences:**

- 50% of teenage mothers receive a high school diploma by 22 years of age compared to 90% of women who have not given birth as a young adult.  
- Increased likelihood of single living arrangements and welfare dependency.

**Current Medical Approaches: Prevention and Equitable Care**

- Prevention: Current medical practices emphasize contraception and safe sex practices. However, there remain significant health care disparities regarding the care of teenager mothers.
- Teenage mothers often feel stigmatized, subject to societal surveillance and disregarded by the medical community. They are often fearful of asking questions and advocating for care because their motherhood capabilities may be subject to doubt.

**Future Directions:**

- YWCA Programming
- Forming a longitudinal relationship between young mothers in the YPP program and medical students.
- Medical students serve as advocates, mentors and healthcare navigators for teenage mothers while gaining a deeper understanding of the social determinants of health and learning how to deliver equitable care to all their patients.

**Domestic Violence as a Diagnosis**

**Why do we need to improve the curriculum?**

“Eclipsed only by war, domestic violence has remained at the forefront of violence-related human morbidity and mortality.”

**Domestic Violence is common:**

- 13-30% estimated lifetime prevalence in women.

**Domestic violence is often missed:**

- 6% of internists routinely screen new patients for domestic violence.

**Medical Interview:**

- Use a funnel technique: Broad ➔ Specific
- To assess history of domestic violence:
  - “Have you ever been in a relationship in which your partner frightened you or hurt you?”
  - To assess current domestic violence:
  - “Do you feel safe in your current relationship?”
  - “Is there anyone from a previous relationship who is making you feel unsafe now?”

**Signs and Symptoms:**

- General Symptoms: description of frequent and vague symptoms, anxiety or depression, missed appointments, social isolation.
- Presentation: complicated injury; multiple injury sites; injury during pregnancy; delay in seeking care
- Behavior: Patient describes partner as jealous, controlling, angry. Partner attends appointments, controls discussion, cancels appointments.

**Treatment:**

1. Support your patients
2. Use care not to blame the victim
3. Tell the patient he or she does not deserve to be abused
4. Offer resources and referrals
5. Leave the ultimate decision to the patient

**Resources:**

- YWCA 24 hr. Hotline: 508-755-9030
- Safeplan Worcester: 508-831-2168
- Massachusetts DV Hotline: 508-799-7233(SAFE)
- New Hope Hotline: 800-323-4673(HOPE)
- Worcester DA office DV unit: 508-755-8601

**ENCOREplus**

A Working Model for Empowering Women With Breast Cancer through Emotional & Physical Support and Education

**Physical Support:** weekly 30-minute aquatic exercises designed to increase upper body strength and range of motion

**Emotional Support:** weekly, hourly group sessions

**Average attendance:** 10-12 women

**Participant Overview**

- Age range: 39 to 80
- Varying stages of breast cancer
- >90% white

**Lessons for a Medical Trainee**

1. Cancer support groups are more than a forum for emotional support. Participants serve as each other’s caretakers, educators and companions.
2. The decision to join a support group can be difficult and takes time. However, active participants did not report a delay in buy-in once they joined the group.
3. Minority women may require different forms or variation of the standard ENCOREplus model for support during their cancer treatment and recovery.

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**References:**


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By Mary Oliver

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