Trauma-Informed Care in Pediatrics: An Interactive Module for Clerkship Students

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Background
- Individuals are more likely than not to have at least one adverse childhood experience (ACE)\(^1\)
- Using a trauma-informed lens can prevent the use of language, behaviors, and procedures that may inadvertently re-traumatize patients

Objectives
Create a session for clerkship students to be able to:
1. Explain significance of CDC-Kaiser ACE Study
2. Recognize broad definition of trauma
3. Describe lasting effects of trauma on the body
4. Counsel caregivers about positive parenting
5. Conduct role-play patient interview

Hypothesis
- Significant improvement in knowledge and confidence surrounding the 5 session objectives
- Principles learned will be readily applicable in a wide variety of clinical settings

Methods
- 1-hour session with didactics and role-playing
  - Pre- and post-session quantitative surveys
    - 5 questions, each measured on a 5-point Likert scale with max score of 25
  - 2-week post-session qualitative survey

Results
Average pre- and post-session scores for each objective

Pre
Post

Explain significance
Recognize trauma
Describe effects
Counsel caregivers
Patient interview

Results (cont.)
- 36 students; 24 (67%) completed surveys
  - Pre-session total score = 13.8 ± 3.1
  - Post-session total score = 21.5 ± 1.8
- Highly significant improvement in students’ knowledge and confidence in providing trauma-informed care (t(24)= 12.3, p<0.00001)
- Qualitative comments described use of trauma-informed care principles in:
  - Primary care offices
  - Emergency department
  - Inpatient wards

Conclusions
Highly significant learning gains and rapid application of concepts in a breadth of settings speak to the need and utility of medical school curricula that address trauma-informed care.

Future Directions
1. Test longer-term retention and application
2. Create centralized teaching on trauma-informed care paired with clerkship-specific modules

References