

Community for Antepartum Patients (CAP): Teaching Undergraduates with Inpatient Group Prenatal Experiences

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Background/Purpose: Early clinical exposure has been shown to assist in premedical undergraduate students' decision-making to pursue medicine and to improve their preparedness for medical school.^{1,2} Additionally, though graduate medical trainees are responsible for teaching medical students early in their careers, residents often report feeling underprepared for this role.^{3,4}

Objectives: Provide a mutually-beneficial experiential learning opportunity for both undergraduate students and medical student teaching assistants. Improve undergraduate student knowledge of obstetrics and gynecology, social determinants of maternal and infant health, and the antepartum experience through didactics and patient-facing experiences. Offer undergraduates near-peer mentorship from medical students. Improve teaching skills and confidence among medical student teaching assistants.

Methods: Undergraduate students participated in a year-long, academic course taught by third-year medical students, which consisted of weekly one-hour, seminar-style classes and monthly one-hour, in-hospital group prenatal sessions with antepartum patients. Didactic topics included pregnancy physiology, lactation and breastfeeding, and maternal mental health, with an overarching theme of social determinants. During group prenatal sessions, undergraduates assisted with patient recruitment and session facilitation; topics included breastfeeding, pelvic floor physical therapy, stress management, and more. Additionally, each undergraduate led one class per semester. Feedback surveys were administered to undergraduates and former teaching assistants at seven months into the course and following transition out of the teaching assistant role, respectively.

Results/Outcomes/Improvements or Evaluation: In the past two years, six total undergraduate students participated in the course taught by five total third-year medical students. Undergraduate students reported (1) increased understanding of the obstetrics and gynecology topics, social determinants of maternal and infant health, and the antepartum experience, (2) solidification of their decision to pursue a career in medicine, and (3) an appreciation for the close contact with medical student mentors afforded by the CAP experience. One student related: "no other class I have taken at Duke has provided me with such hands-on knowledge about the field of medicine." Another said: "this year is the first time that everything has really 'clicked' for me... I have taken classes on race and medicine, social determinants of health, immigration and health etc. but I think you get a very different view in the classroom vs. interacting with patients and hearing about their experiences..." Medical student teaching assistants reported increased confidence with teaching and facilitation techniques. One former teaching assistant said: "both my teaching skills as well as confidence serving in a teaching role were improved by this experience." Another said the experience "definitely improved [my] comfort with teaching, including also teaching with patients and facilitating dialogue."

Significance/Implications/Relevance: A year-long academic course incorporating experiential learning with an inpatient group prenatal model has the potential to improve premedical undergraduate student knowledge of reproductive health, understanding of clinical settings, and decision-making regarding medical school. It may also positively impact medical student preparedness for and comfort with teaching

as a resident. Future iterations of the course may benefit from structured training for medical student teaching assistants in adult learning theory and effective teaching strategies.

References:

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