

Improving Resident and Child Wellness through Advocacy



Drs. Michelle Cook, Margaret Connolly, Catie Glatz, Caroline Kirby
Faculty Mentor: Andrew Aigne, MD, MPH



The Hoekelman Center
“Connecting, Advocating,
Researching, and
Educating in our
communities to do what
works for health”

PROJECT SUMMARY

As residents of the URM Pediatric program, we feel the topic of childhood advocacy is underrepresented in our curriculum. The majority of our patients need help with food access, literacy, transportation, and other public health needs. We feel that by incorporating more learning opportunities for child advocacy topics in the curriculum both our residents and their patients will benefit.

BACKGROUND:

Our program has a well-known advocacy track that allows interested residents to pursue their passion for advocacy. For those not in the track, though, there is very little ongoing information about advocacy nor any instruction or demonstration for how that makes advocacy seem accessible. Our project aims to make these activities more accessible to all residents, and make them a continuous part of the program. This will enable residents to be exposed over time, and increase their comfort with advocacy activities. By bringing topics related to child health, public health, community well-being, and legislative action to the resident noon conferences we hope to be able to interest the entire program in advocacy. We will also have guided activities around advocacy to demonstrate that it is not difficult to become an active participant in the legislative process. In doing so, we will also assess how our program affects resident engagement, wellness, and job satisfaction.

GOALS: To create a scheduled curriculum for childhood advocacy in the URM Pediatric Residency program for all residents while simultaneously increasing resident wellness.

OBJECTIVES:

Primary Measurable Outcome:

- Track how many referrals are made to community based organizations.
- Track resident wellness/satisfaction using the Utrecht scale on a quarterly basis
- Track how many residents self-report participation in advocacy efforts
- Track resident self-report of comfort talking about child and public health with their peers, patients, family, and friends

METHODS:

- Sent a pre-survey assessing resident comfort in political advocacy, as well as topics of interest for residents. This will give us baseline data to compare to at the end of our project
- Will assess participation based on how many people attend each noon conference session and how many complete the project at the end of the session.
- Utrecht scale and a survey on resident comfort with advocacy work now for current residents, and then yearly at orientation for incoming interns. We will repeat the Utrecht scale every 3-6 months to monitor program success as well as a way to eliminate confounding factors.
- Call community-based organizations (especially those that come to speak) to ask about change in volume of referrals before and after their participation in the programming.

Results:

Most popular advocacy topics include:

- LARC
- LGBT
- Smoking Cessation
- Housing
- Free Physical Activities
- Summer Slide
- Child Care
- Food Resources
- Obesity
- Autism
- Mental Health
- Domestic Violence
- Transportation
- Refugee

Initial Utrecht Scale Results

-total of 33 responses out of *** Pediatric and Med/Peds residents

-Of the questions evaluating **Vigor** at work: 40%-45% of residents at our program responded “sometimes. A few times per month”; 3%-9% responded “never”; and 0% responded “everyday”

-Of the questions evaluating **Dedication** at work: 35%-45% of residents at our program responded “sometimes. A few times per month”; 0%-3% responded “never”; and 0% responded “everyday”

-Of the questions evaluating **Absorption** at work:12%-33% of residents at our program said “sometimes. A few times per month”, 0% responded “never”, and 3-22% responded “everyday”

Figures



Fig 1. Utrecht Scale to assess job satisfaction

Fig 2. Resident Responses to our initial Utrecht Scale Survey

FUTURE DIRECTIONS:

- Develop workshops for local Pediatricians interested in Advocacy
- Partner with other Pediatric Residencies to expand Dyson Day into a full day poster presentation and advocacy workshop