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### Mind the Gap: People-with-Disabilities Education

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# Mind the Gap: People with Disabilities Education



Kari J. Rezac, DO

**Purpose:** The purpose of developing a diversity, equity, and inclusion curriculum on people with disabilities was to engage in discussion on the social and health disparities and barriers of people with disabilities. In doing so, we delved into understanding key events in the history of United States disability policy and started a discussion on implementable solutions to these barriers with engagement from a panel of individuals living with disabilities.

**Methods:** We developed a series of four mandatory 1-hour lectures for our physical medicine and rehabilitation residents (PM&R), which included traditional lectures, discussions, and a panel of people with disabilities. The sessions were evaluated by anonymous surveys.

**Results:** Residents indicated a strong belief that physicians should understand the influence of disability on a patient in health and clinical encounters in both pre-series ( $M = 4.4$ ) and post-series ( $M = 4.7$ ) surveys. However, before the series, residents felt, on average, only somewhat knowledgeable with inequities of people with disabilities in healthcare ( $M = 2.3$ ) and society ( $M = 2.2$ ). To add, residents felt, on average, only somewhat comfortable ( $M = 2.2$ ) in their ability to tailor their plans of care for patients with disabilities.

# Curricular time devoted to disability-specific education is essential in closing the inequity gap of people with disabilities in medicine and society.

**Results:** Table 1. People with Disabilities Education Series Evaluation Data<sup>a</sup>

Statement or Question	Pre-Series <i>M</i> (SD)	Post-Series <i>M</i> (SD)	<i>p</i>
How knowledgeable do you feel about inequalities in healthcare for people with disabilities? <sup>b</sup>	2.3 (0.9)	3.4 (0.8)	<.001 <sup>d</sup>
How knowledgeable do you feel about inequities in society for people with disabilities? <sup>b</sup>	2.2 (0.9)	3.1 (0.9)	<.001 <sup>d</sup>
How confident do you feel in your ability to tailor your care (or treatment plan) to the needs of patients with disabilities? <sup>c</sup>	2.2 (0.9)	3.3 (0.7)	<.001 <sup>d</sup>

<sup>a</sup>10 residents completed the pre- and post-series surveys

<sup>b</sup>Rated on a 4-point Likert Scale (1= Not at all knowledgeable, 4= Very knowledgeable)

<sup>c</sup>Rated on a 4-point Likert Scale (1= Not confident at all, 4= Very confident)

<sup>d</sup>Denotes statistical significance ( $p < .05$ )

**Results Continued:** Residents felt more knowledgeable about inequities in health care ( $M = 3.4$ ) and society ( $M = 3.1$ ) for people with disabilities. Additionally, residents felt more confident ( $M = 3.3$ ) in their ability to create and tailor treatment plans for patients with disabilities. In the post-series survey, residents rated the usefulness content of this series in relation to their residency education of this series as having a positive ( $M = 3.6$ ), valuable impact on their resident education.

**Discussion:** Medical education of all types should consider devoting additional time to education around people with disabilities. Post-graduate physicians lack the knowledge and confidence to adequately treat and support patients with disabilities. However, based on our results, devoting time to disability-specific education can help physicians become more knowledgeable and feel more comfortable providing appropriate care to their patients with disabilities. This curriculum framework may inspire others to develop similar programs throughout our community bringing greater awareness, better health equity, and better care to the community we serve.