



Medical School Hotline

Childhood Disabilities in Medical Education at the John A. Burns School of Medicine (JABSOM)

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Physicians have essential roles in identifying, treating, and supporting people with disabilities. This is particularly true in childhood, when early intervention and special education programs can lead children with disabilities to happier lives with greater independence. Families expect their physicians to be expert in screening for disabilities, managing children with disabilities, and referring to necessary subspecialists.¹

Also, parents and other caregivers want physicians to be particularly caring and supportive when given the news of their child's diagnoses and conditions. There is an expectation for physicians to be knowledgeable about community resources for children with disabilities and their families. However, many practicing physicians feel they are not adequately trained in these areas.²

The JABSOM and the Center on Disability Studies (Hawaii University Affiliated Program) at the University of Hawaii at Manoa recently completed a three year federally sponsored grant that trained and continues to train medical students in these roles. This project was funded by the Office of Special Education and Rehabilitative Services in the US Department of Education. This agency and national experts such as Charney thought it important that physicians be immersed in and have improved understanding of early intervention (EI) and special education programs.³

The project supported training in each of the four years of medical school. Curriculum supported by the grant is now well established, supplementing that which previously existed. Novel learning environments were developed particularly with the support of faculty and staff from the Department of Pediatrics at JABSOM and Center on Disability Studies.

New activities include a first year medical student experience around children with varying levels of disabilities. Selected student-physicians become involved once a week for a year with children and bond to staff working with these children at several EI programs and schools around the State. With the supervision of teachers and therapists, these student-physicians feed children with difficulty eating and help children with cerebral palsy learn to ambulate. They research the disabilities they observe. They better appreciate the need for physicians to work together with schools and EI programs in coordinating a comprehensive system of care around children with disabilities.

All first and second year students have Health Care Problems (HCPs) involving children with disabilities. The learning issues that they research around these HCPs include the system of medical care around these children, and community resources available around children with disabilities and chronic illnesses.

Third year medical students have participated and continue to participate in an innovative and exciting part of the project to learn about EI programs in Hawaii. EI programs on Oahu (including the State-run Lanakila, Wahiawa, Leeward, and Windward Early Childhood Services Programs; Sultan Easter Seals; United Cerebral Palsy; Waianae Parent and Children Developmental Center; and Kapiolani Mobile Therapy Team) have embraced this need for an in depth orientation of student-physicians to the early intervention system.

In the third year of the JABSOM, about 8-12 students rotate in Pediatrics every 7 weeks (a "block"). Each student-physician in a Pediatric block is assigned to a particular EI program and each is assigned a particular specialty or discipline: occupational therapy, physical therapy, speech language therapy, nutrition, audiology, primary care provider, nurse and physician specialists, public health nursing, behavioral specialist, special education or social work. During a half day during their outpatient clinic experience within the Pediatric block, a student-physician goes to the program and learns about the program in general. They also learn about the specialty or discipline to which they were assigned. Their learning is focused around a specially selected child at the program.

At the end of their block, these student-physicians meet in a colloquium with project faculty. EI program staff and the family of the child selected for the block also usually attend. Sharing of information about the various specialties and disciplines occurs, with each student-physician making a presentation on their selected area. The physician's role in caring for children with disabilities, and physician interaction with EI programs are important areas of discussion. Overview of the system around EI programs (including transition to special education and then to adult programs), federal mandates (such as IDEA, the Individuals with Disabilities Education Act), family centered principles and EI transdisciplinary models are also highlighted.

Fourth year student-physicians interested in pediatrics, family practice, psychiatry and rehabilitation work can take a Pediatric elective where they are immersed in schools and EI programs. Rotations on Oahu, Molokai, Kauai, and the Big Island have been completed in the past. The student-physicians taking this elective better understand the physician role as medical consultant to these programs. They are supervised by project staff including several Developmental Behavioral Pediatrics faculty members and Pediatric residents. They help in problem solving and are liaisons to community physicians around children with mental health, physical and developmental disabilities.

As a result of this month long experience, these fourth year student-physicians become more facile in working with children with autism, mental retardation, cerebral palsy, attention deficit hyperactivity disorder, Down Syndrome, and many other conditions and disorders. They work with children requiring technological supports such as gastrostomy tubes, tracheostomy tubes, assistive devices, wheelchairs, and other ambulatory aids. They learn to understand the strengths and weaknesses of how the medical system interfaces with community resources. The student-physicians give well received inservices on medical topics to administrators, teachers, therapists, and counselors at the schools and EI programs. Positive feedback from school and EI program personnel point to the

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fact that educators desire more information on the health needs of the children they teach.⁴

In many areas of their education, student-physicians at JABSOM have innovative learning opportunities. This is also true around children with disabilities. With these training opportunities, student-physicians are more comfortable with their future crucial roles in supporting families who have children with disabilities. These future physicians are more experienced in collaborating with school and EI program personnel. This exciting curriculum, pioneered at JABSOM and in the State of Hawaii, is proudly being disseminated nationally.

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