

Abstract

NICHE-UCLA: An Inclusive, Intersectional Curriculum to Advance Disability Health Education in Medical Training

Background: Surveys taken of medical students in the U.S. have found low student confidence in treating individuals with disabilities, despite widespread agreement that understanding clinical care in this population is crucial (Hotez, 2022). While disability education may be present in some medical curriculum, it often tends to portray intellectual and developmental disability (IDD) monolithically while ignoring intersectionality (Wickenden, 2023). Medical trainees often report limited training, low confidence, and inadequate preparation to care for patients with IDD (Chardavoyne et al., 2022).

Objectives (Research Question): The present study focused on assessing and increasing positive attitudes of medical students towards patients with IDD. By incorporating aspects of IDD education in relation to clinical care services through an intersectional curriculum, will first-year medical students (MS1) experience a higher endorsement and confidence in disability and intersectionality knowledge and interactions following their first year orientation?

Methodology: MS1 students at the David Geffen School of Medicine at the University of California, Los Angeles participated in educational activities including a screening of *Crip Camp*, a panel with disability advocates, and an LGBTQ+ and disability health integrated case session. Attitudes were assessed using the validated NICHE-MED Attitudes Instrument (Chandan, 2025). All participants (n = 162) completed a pre-intervention survey, and a subset (Comparison Cohort, n = 37) completed both pre- and post-intervention assessments. The surveys utilized a Likert scale to measure responses to statements pertaining to the MS1 students (i.e. "I feel competent to treat a disabled patient"; from strongly agree to strongly disagree).

Results: Baseline attitudes toward patients with IDD were generally favorable. Attitudes varied by demographics and specialty interest, with lower scores among students interested in pursuing specialty care and Hispanic/multiracial identifiers (mean attitude score 70.2 ± 6.3). In the comparison cohort, total attitude scores significantly improved following the intervention (+3.07 pts, $p=0.027$), with the majority of students reporting greater confidence in providing accommodations and feeling more adequately trained in IDD treatment. No domains showed decline.

Discussion (Impact/Contribution): The study findings suggest the pilot curriculum was both feasible and effective in improving MS1 attitudes toward IDD care. This highlights the need for medical education curriculum that increases MS1 attitudes towards patients with IDD and confidence in caring for this group through exposure to IDD populations, increased training in providing accommodations, and further education on co-occurring physical health conditions. Future steps include finalizing the facilitator guide and expanding to additional institutions.