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A Preliminary Assessment of Empathy in USF Morsani College of Medicine First Year Students Using the Jefferson Scale of Empathy: CORE vs. SELECT

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Published In/Presented At

Saba, R. (2015, July 31) A Preliminary Assessment of Empathy in USF Morsani College of Medicine First Year Students Using the Jefferson Scale of Empathy: CORE vs. SELECT. Poster presented at LVHN Research Scholar Program Poster Session, Lehigh Valley Health Network, Allentown, PA.

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A Preliminary Assessment of Empathy in USF Morsani College of Medicine First Year Students Using the Jefferson Scale of Empathy: CORE vs. SELECT Raya Saba B.S., Robert D. Barraco M.D., M.P.H., Jeanne Jacoby M.D., Amy Smith Ph.D.

Background/Objective

BACKGROUND – As a factor of emotional intelligence, empathy is predominantly viewed as a significant attribute in successful physicians and is important in the physician-patient relationship¹. Due to an observed decline in empathy with increased medical training², prior studies suggest that medical institutions are expressing a desire to implement empathy assessment programs into their admission process, and throughout their medical training.^{3,4}

OBJECTIVE – The primary objective of this study is to obtain a preliminary assessment and examine empathy levels among the incoming first year medical students at USF Morsani College of Medicine (MCOM).

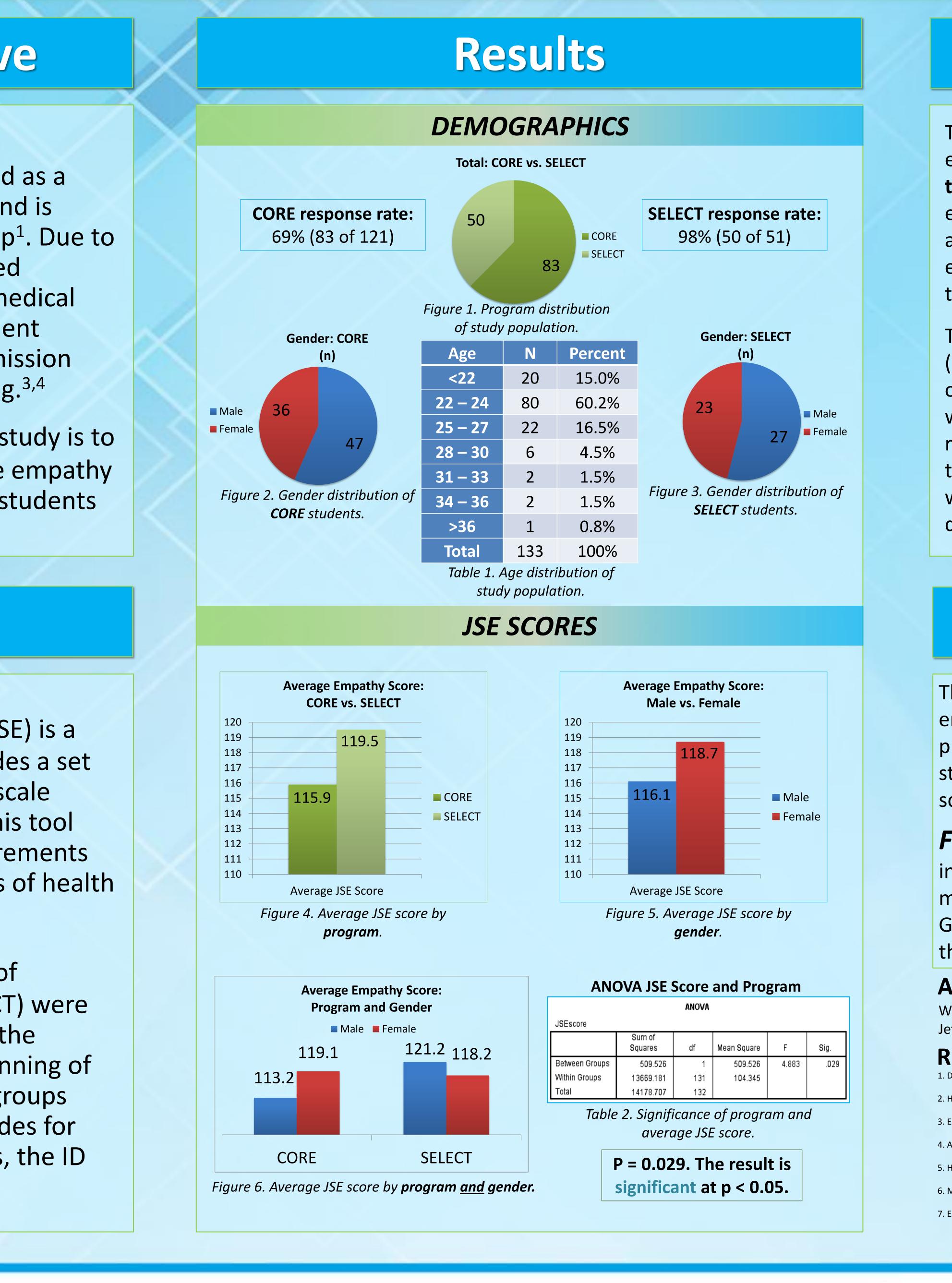
Methodology

DESIGN – The Jefferson Scale of Empathy (JSE) is a self-administered assessment tool that provides a set of 20 items recorded on a seven-point Likert scale (Strongly Disagree = 1, Strongly Agree = 7). This tool was strategically developed to enable measurements of empathy among students and practitioners of health professions.⁵

PARTICIPANTS – All USF Morsani College of Medicine first year students (CORE and SELECT) were administered the Medical Student version of the Jefferson Scale of Empathy (JSE-S) at the beginning of year 1 (July 2014). The participants' student groups (CORE vs. SELECT) were identified using ID codes for further analysis; once categorized into groups, the ID codes were de-identified to ensure privacy.



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The results of this study showed a statistically significant difference of empathy scores between the two cohorts of students. We found that the SELECT students, overall, scored higher on the JSE-S. Further exploring these differences, we found that empathy levels are not affected by gender or age between the two student groups. Although empathy scores did slightly vary by gender as illustrated in Figure 6, they did not vary enough to be considered statistically significant.

The SELECT admission process includes Behavioral-Event Interviews (BEI) with a focus on leadership and emotional intelligence.⁶⁻⁷ The obtained results support the interview process in admitting students with high levels of empathy as reflected on the JSE assessment. These results furthermore allow us to maintain a measurement throughout the next few years during these students' medical training. Doing so, we would have the ability to evaluate the effectiveness of the two different curriculums offered at MCOM.

This preliminary assessment illustrates a base understanding of empathy levels among incoming first year medical students at MCOM prior to beginning their medical education in July 2014. Consisting of students from both CORE and SELECT programs, the SELECT students scored higher than those enrolling in the CORE program.

FUTURE IMPLICATIONS – We recommend continuing this study into a longitudinal study; thus, enabling the institution to track and maintain evaluation of empathy trends among their medical students. Generally, this becomes an initiative to implement different approaches that inclusively intend to develop leaders in medicine.

ACKNOWLEDGEMENTS

We would like to thank the Center for Research in Medical Education and Health Care at Thomas Jefferson University for their assistance in collection and provision of data.

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Discussion

Conclusion

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