

WALK A MILE IN THEIR SHOES: UTILIZING A PATIENT EXPERIENCE SIMULATION TO IMPROVE MEDICAL STUDENT EMPATHY AND PROBLEM SOLVING

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Background: Newer pedagogical practices in undergraduate medical education are trending towards a focus on increasing physician empathy and competency through use of simulations, but these typically focus on simulated clinical encounters rather than on deepening understanding of patient experiences. Studies on illness simulation experiences for medical students have varied results, but these simulations have mostly focused on one specific pathology, such as psychosis or diabetes, rather than on a broad patient experience such as following a medication plan or adhering to physical therapy routines.

Purpose: We hypothesize that an illness simulation experience will increase the ability of first-year medical students to identify, address, and proactively account for barriers that patients may experience with complex medication regimens.

Methods: This curricular intervention was implemented in January 2026. 16 first year medical students, 4 third year medical students, and 1 fourth year student in the University of Colorado Rural Medicine Program completed a pre-intervention survey and then received the curricular element. The curricular element is a medication adherence simulation wherein students act as ‘patients’ for one week with three medications that require, respectively, TID dosing, refrigeration, and to be taken 30 minutes prior to a meal. At the end of the week, students engaged in a guided debrief of the experience followed by the post-survey.

Results: After the intervention, students had increased comfort in working with patients struggling with medication adherence ($df(16)$, $p<0.001$) as well as increased comfort discussing medication adherence with patients ($df(16)$, $p<0.001$). They were more frequently able to identify challenges patients might have taking their medications as prescribed ($p=0.009$ and come up with solutions to those challenges ($df(16)$, $p=0.005$). 82% (14 out of 17) of students stating that they “strongly agree” that the intervention helped them feel more comfortable supporting patients struggling with medication adherence. Post-survey data measuring changes in participant empathy also demonstrated that participants felt that the intervention increased their empathy, with 76% of participants “strongly agreeing” that they felt more empathy for patients struggling with medication adherence.

Conclusions: The one-week medication adherence simulation demonstrated significant improvements in participants’ comfort and ability to support patients struggling with medication adherence. These findings may be useful in justifying an expanded pilot initiative to further explore this effect with a larger participant population.