



Improving Medical Student Knowledge Concerning Opioid Use in Metro Detroit

Ala Addin Sid Ahmed¹, Shabber Syed¹, Abdulmohsen Ghuloum¹, Lana Abdole¹

¹ Medical student, Wayne State University School of Medicine

BACKGROUND

The Detroit metropolitan area is home to Dearborn, MI, where a rapidly growing opioid epidemic remains hidden from public view. The Dearborn community is a predominately Arab population, which presents both unique challenges & opportunities to combat the taboos of opioid use.¹

STUDY AIMS

To analyze the impact of a case-based seminar on the knowledge base and cultural literacy of medical students concerning the opioid crises in Metro Detroit.

INTRODUCTION

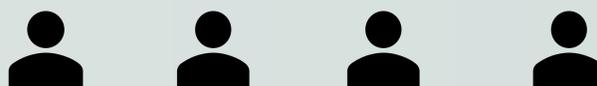
To increase awareness about the opioid epidemic, and to enhance the knowledge base of medical students concerning opioid abuse, the Islamic Medical Student Association (IMSA) at WSUSOM created a seminar around opioid misuse and treatment of substance use disorders (SUDs). Prior to the seminar, participants filled out a presurvey in addition to watching a documentary by Vice on the opioid crisis in Muslim communities.² The seminar featured a discussion by Dr. Edmond Okotcha, a physician working in the heart of the Dearborn opioid epidemic, as well as discussion on two opioid cases that were modified from AAMC Opioids, Addiction and Pain Education cases.³

SURVEY QUESTIONS

Survey Questions For Students:

Answer the following on a scale of 1-5

1. I would be comfortable treating someone with opioid addiction.
2. Opioid addiction is a serious issue that affects many cities in the US.
3. Opioid usage is rampant in the city I live in.
4. I know what to do if a friend/family were using opioids without a prescription.
5. There are many addiction treatment centers in Metro Detroit.
6. I know where to obtain Naloxone in Metro Detroit.
7. Opioids are hard to obtain without a prescription.
8. I am comfortable treating someone from a different culture than myself.
9. Physician misunderstanding of certain customs can lead to medical noncompliance.
10. Opioid addiction is a taboo subject in communities.
11. Health education is difficult to teach in some communities.
12. Language barriers are an issue in healthcare.
13. The opioid crisis is well known in cities like Dearborn.
14. Information about opioids is widely available to the Muslim community of Dearborn.
15. I feel more knowledgeable about opioid usage in ethnic/religious communities.
16. Language barriers are prevalent in treating opioid addiction.
17. I know what to do next to help fight the opioid crisis in communities.



METHODS and ANALYSIS

Participants

- 1st and 2nd year medical students; students received clinic hours for participating.

Data Collection

- Awaiting IRB approval to begin data analysis.
- Qualtrics survey was sent to all attendees, who were not facilitators, before and after the session.
- Distributed via email.

Analysis

- Data will be analyzed using the Qualtrics Survey Software System.
- Deidentification will be done to make the data anonymous.

POTENTIAL IMPACT

- Data from this ongoing project will be used to identify gaps in knowledge and cultural literacy among students in addition to improving future seminars on opioid addiction.
- Better inform medical students of their knowledge base concerning the opioid epidemic.
- Address unique cultural challenges that are crucial to combat the opioid crisis in minority communities.
- Become a new component of the medical school curriculum.

REFERENCES & ACKNOWLEDGEMENTS

1. AlMarri, T. S., & Oei, T. P. (2009). Alcohol and substance use in the Arabian Gulf region: A review. *International journal of psychology*, 44(3), 222-233.
2. Association of American Medical Colleges. *MedEdPORTAL*, www.mededportal.org/opioids.
3. *Opioid Addiction in Dearborn's Muslim Community*. Directed by Sneha Antony, Vice Media LLC., 2019.
4. Acknowledgement to Dr. Okotcha for taking part in the seminar.