Nejat Briefcase: A tool for drug education

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ABSTRACT

Background: On account of the prevalence of psychoactive substances and drug abuse and its diversity of forms and methods of use, along with the reduction in the age of drug abuse, a continuing medical education of physicians with these issues is necessary. Although it is legally forbidden, most physicians have no close contact to these drugs, and this is not effective for training, prevention and treatment of drug addiction. In this regard, offering an educational tool is needed, if in close contact to these drugs. The ‘Nejat Briefcase’ is a tool designed for the purpose of training and familiarization of psychoactive substances and drugs. The aim of this study is to investigate the points of view of the participants in the continuing medical education program, ‘Introduction to types of psychoactive substances and drugs’ and about the Nejat Briefcase, in the Isfahan University of Medical Sciences (IUMS).

Materials and Methods: In this descriptive, cross-sectional study, all the general physicians (108 people) who participated in the continuing medical education program, ‘Introducing types of psychoactive substances and drugs,’ in the Isfahan University of Medical Sciences (IUMS), in 2012 – 2013, were considered. In this program, in order to introduce various types of psychoactive substances and drugs to the physicians, as well as acquaint them with their forms, methods of use, and prices, the new educational tool (Nejat Briefcase), containing various types of psychoactive substances and drugs and the related educational packages, such as, booklets and brochures, was used. A researcher-made, valid and reliable questionnaire was distributed at the end of program to gather the participants’ points of view about the educational program. Data was analyzed by the SPSS and t-test and descriptive statistical tests.

Results and Discussion: The response rate to the questionnaire was 83%. Forty-four people (41%) were women and 64 (59%) were men. The mean total score of the participants’ points of view was 4/58 ± 0/45 (out of 5), which indicated the positive points of view of the participants. Ninety-seven people (90%) were satisfied with the program. Conclusions: On account of the participants’ positive points of view on the Nejat Briefcase and their consent to it, using varied and attractive educational tools for psychoactive substances and drug training and producing tools similar to the Nejat Briefcase are proposed.

Key words: Drugs abuse, continuing medical education, psychoactive substances and drugs, educational tool

INTRODUCTION

According to the fast changes in human knowledge in various scientific fields, renewing and updating of information is needed. Medical education systems are looking for solutions in using new training methods and it is necessary for physicians
to update their own information on the current issues in the health, treatment, and prevention fields. In this regard, participation in continuing medical education is necessary for physicians, be it general physicians or specialists.\[1\]

Prevalence of drug and other addictive substance abuse, reducing the age of drug abuse in Iran and other countries,\[2\] and its diversity of forms and methods of use are among the reasons for the necessity of physicians to be acquainted with the appearance of this substance, its properties, and methods of use. For these reasons, updating the physicians’ information in this regard is emphasized.\[1,4\] In a study conducted in 2012, taking into consideration the addiction costs, training restrictions of physicians and pharmacists, and the low capability of physicians to addiction treatment, it is emphasized that sufficient training and knowledge on addiction-related issues be given to students.\[5\]

Abrams et al., in 2003 observed that 78% of the interviewed physicians expressed enthusiasm and interest to increase their knowledge and education on alcohol, tobacco, and other drug abuse (ATOD) training. Only 29% of them expressed that they had sufficient knowledge and training on drugs. A deficit of teaching materials was one of the restrictive factors in ATOD training.\[6\]

To learn more about psychoactive substances and drugs and for updating information, training programs on drugs and other addictive substances (continuing medical education programs and workshops) have been held for physicians and other health staff in universities of medical sciences in Iran and other countries, for many years. Similar programs are emphasized for medical students, residents, and other health staff in such universities.\[3\] Nevertheless, the experience shows that because of legal forbiddance, many of the people and even physicians have not had any close contact or even observed these drugs and alcoholic beverages. It might be effective for training, prevention, and treatment of the drug addiction.\[5\]

Continuing medical education programs of psychoactive substances and drugs have been held in the Isfahan University of Medical Sciences (IUMS) for many years. These programs include one or two days of educational sessions called, ‘codified addiction training 1 and 2’. Introducing various types of substances and drugs is done in some sessions called, ‘introduction to types of substances and drugs’. This introduction is done by a new method using the Nejat Briefcase as a new educational tool. Educational tools are instruments and equipment that increase the quality of teaching and education. Accordingly, the use of new and varied tools is effective on education quality.\[7\]

The word ‘Nejat’ was composed from the researcher’s name ‘Najafi’ and the two words ‘Amoozesh (education)’ and ‘Tajrobe (experience)’.\[8\] The briefcase was designed by the researcher to acquaint, improve, and train physicians on drugs types, forms, and their methods of use. It is used since 2000, in many universities of medical sciences and education centers for training psychiatrists, psychologists, medical students, teachers, and graders and their parents on drugs and alcoholic beverages.

The aim of this study was to investigate the points of view of the participants in the continuing medical education program on the, ‘Introduction to types of psychoactive substances and drugs’ and about the Nejat Briefcase, in the IUMS.

**MATERIALS AND METHODS**

In this descriptive, cross-sectional study, the points of view of all general physicians who participated in the continuing medical education programs of, ‘Introducing types of substances and drugs’ (part of the continuing medical education program about addiction) and about the Nejat Briefcase were considered. The programs were held in IUMS in the summer of 2012. The inclusion criterion was, there should have been no participation in a similar program with the same lecturer. Accordingly, the sample included 130 people (50 participants in the continuing medical education developments and studies center of IUMS and 58 participants in the program held in Najafabad Hospital affiliated to the IUMS).

At the beginning of these classes, after introducing the lecturer and the learning objectives, a funny video clip was displayed to warm up the class, as the first stage of the teaching and then the lecturer introduced the psychoactive substances and drugs and used Nejat Briefcase as an educational instrument.

The preparation of the Nejat Briefcase: With the permission of the authorities, types of psychoactive substances and drugs (Cocaine, heroin, cannabis, grass, opium, opium pills, amphetamine, and crack) were placed in the briefcase as small packages with the related training booklets and brochures. The briefcase also included types of medications suitable for treatment of addiction to psychoactive substances and drugs (such as, Buprenorphine injections, Ty Ryzazyn pills, Promethazine syrup, Fluoxetine and Naltrexone capsules) and alcoholic beverages [Figures 1 and 2].

Along with verbal introduction and presenting of theoretical information about these substances, their samples were given to the participants for having a close contact with them, touching or even smelling them. In this way, the types of drugs were introduced to the participants using the briefcase and their methods of use, colors, smells, and tastes. Their rates of use were explained. In order to make the learning environment pleasant and increase the learning quality, some accessories such as a doll were also used. Some of the remarkable points were the diversity of the briefcase contents, such as types of psychoactive substances and drugs, booklets and brochures, alcoholic beverages, and educational slides.

At the end of each session, points of view of the participants about the teaching methods and Nejat Briefcase and their consent to it, were collected via a researcher-made
questionnaire. To prepare the questionnaire, some items from the evaluation form of the IUMS re-training courses were used. The validity of the questionnaire was confirmed by reviewing the related texts and using the comments of the medical education specialists and psychiatrists. The reliability of the questionnaire was confirmed by the calculation of the Cronbach’s alpha coefficient (α = 0.9). The questionnaire included 14 items with five options discussing the participants’ points of view on the training program and the lecturer’s quality of teaching. Explaining the learning objectives at the beginning of the session, the lecturer covered the following topics, the sequence and coherence of the provided contents, how to obtain appropriate conclusions, and also introduced appropriate educational resources at the end of the session.

Four of the fourteen items were on the Nejat Briefcase, including, ‘the role of the Nejat Briefcase in learning was more than that of the conventional educational tool (Power Point and slides)’, ‘Sufficient information on how the drugs of abused were used was obtained’, ‘Sufficient information on the costs of the drugs of abused was obtained’, and ‘Sufficient information on the appearance of the drugs of abused was obtained’.

At the end of the questionnaire, in two questions, the participants were requested to express their own specific experiences about the session and the Nejat Briefcase, and what more educational contents they expected. The questionnaires were distributed and gathered at the end of the class.

The questionnaire scale had five options including entirely agree, agree, neutral, disagree, and entirely disagree, and these options were rated with 5, 4, 3, 2, and 1 scores, respectively. Higher scores meant more positive points of view.

The data obtained were analyzed using the SPSS software and descriptive statistical tests (frequencies and percentages).

RESULTS

Of the 130 distributed questionnaires, 108 were analyzed (response rate of 83%). Of this, 44 persons were female (41%) and 64 persons were male (59%). Fifty participants (46%) had participated in the training programs of the medical education development and study centers, and 58 participants (54%) had participated in the Najafabad Hospital Programs. The average age of the participants was 43.55 ± 9.02 years. The average total score of all the questionnaires (participants’ points of view about the training program) was 4.58 ± 0.45 out of 5, indicating their positive point of view. Ninety-seven participants (90%) were in agreement with conducting the program. The average and standard deviation of the Nejat Briefcase items were: ‘The role of Nejat Briefcase in learning was more than that of the conventional educational tool (Power Point and slides)’; 4.74 ± 0.53; ‘Sufficient information on how the drugs of abused were used was obtained’; 4.66 ± 0.59; ‘Sufficient information on the costs of the drugs of abused was obtained’; 4.62 ± 0.69; and ‘Sufficient information on the appearance of the drugs of abused was obtained’; 4.61 ± 0.66.

According to Table 1, the maximum average and standard deviation was for the item, ‘The lecturer had sufficient scientific knowledge over the provided contents’, and minimum average and standard deviation was for the item ‘Appropriate educational resources were introduced at the end of the session’. The items of ‘The role of Nejat Briefcase in learning was more than that of the conventional educational tool (Power Point and slides)’, ‘Sufficient information on how the drugs of abused were used was obtained’, ‘Sufficient information on the costs of the drugs of abused was obtained’, and ‘Sufficient information on the appearance of the drugs of abused was obtained’ discussed the role of the training tool (Nejat Briefcase) in the participants’ quality of learning. Among them, the items of ‘The role of Nejat Briefcase in learning was more than that of the conventional educational tool (Power Point and slides)’ and ‘Sufficient learning about the costs of the trained drugs was obtained’ had the maximum and minimum averages, respectively. The average

Table 1: Averages and standard deviations of the participants’ points of view about the teaching method and the Nejat Briefcase

| Questions                                                                 | Averages and standard deviations |
|---------------------------------------------------------------------------|----------------------------------|
| ‘The lecturer was well-introduced at the beginning of the class’          | 4.55 ± 0.67                      |
| ‘Appropriate warmer was used at the beginning of the class’               | 4.45 ± 0.77                      |
| ‘The learning objectives were clearly introduced at the beginning of the class’ | 4.53 ± 0.70                      |
| Total score                                                               | 4.51 ± 0.59                      |
| ‘The lecturers speech was eloquent and expressive’                       | 4.75 ± 0.52                      |
| ‘The lecturer had sufficient scientific knowledge over the provided contents’ | 4.78 ± 0.45                      |
| ‘The provided contents were related to the program topic’                 | 4.66 ± 0.58                      |
| ‘The provided contents had the required sequence and coherence’           | 4.59 ± 0.58                      |
| ‘Participation in the discussions were possible for participants’          | 4.63 ± 0.57                      |
| ‘The role of the Nejat Briefcase in learning was more than that of the conventional educational tools (power point and slides)’ | 4.74 ± 0.53                      |
| Total score                                                               | 4.69 ± 0.38                      |
| ‘Sufficient learning on the ways to use the drugs was obtained’           | 4.66 ± 0.59                      |
| ‘Sufficient learning about the costs of the drugs was obtained’           | 4.62 ± 0.69                      |
| ‘Sufficient learning about the observations of the drugs was obtained’    | 4.61 ± 0.66                      |
| ‘Appropriate discussion and conclusions were presented at the end of the class’ | 4.46 ± 0.77                      |
| ‘Appropriate educational resources were introduced at the end of the class’ | 4.03 ± 1.01                      |
| Total score                                                               | 4.48 ± 0.63                      |
and standard deviation scores of the female and male points of view were 4.57 ± 0.46 and 4.56 ± 0.46, respectively. On the basis of the statistical t-test, no significant differences were found between the two averages.

DISCUSSION

The study discussed the points of view of the participants in the continuing medical education program on 'Introduction to types of substances and drugs' in IUMS, about the teaching method, and the Nejat Briefcase as an educational tool.

Ninety percent of the participants had positive points of view about the program and expressed their consent to undergo the training sessions. Their positive point of view could have been because of the presentation a new educational tool. As the use of the Nejat Briefcase led to the participants getting involved in the training, it could lead to their satisfaction. The teaching was also effective and to their satisfaction. For example, the high scores of the participants for, ‘Explaining the learning objectives’ and ‘use of the session warmer’ items could be because of the lecturer’s prior teaching skills and the proper application of these items. The participants had positive points of view about the use of proper session warmers (displaying a funny video clip at the beginning of the session). Mollabashi et al.’s, quote from Dover, emphasized the effective role of using proper warmers and explaining the learning objectives at the beginning of the session. [9]

Among the questionnaire items, ‘scientific knowledge of the lecturer’, ‘eloquence and expressive speech,’ and ‘the educational role of the Nejat Briefcase,’ had maximum averages, respectively. The high average of the item, ‘the role of the Nejat Briefcase in learning was more than that of the conventional educational tool (Power Point and slides)’ could indicate the positive points of view of the learners about the Nejat Briefcase. As the use of the various senses had an effective role in learning, this educational tool, which made the participants use their senses, could make learning more pleasant and easy. [10] The learners were able to learn about the contents provided on the drugs more easily through close observation or even by touching and smelling them, and thus, had positive points of view about the learning. It was obvious that the various senses had a specific role in learning and the learners could learn the course materials in a better manner and more easily via close observation and with various educational tools. Educational tools could make education more realistic, scientific, and pleasant, as they enabled the use of various senses. [7]

In this regard, the positive role of different and varied educational tools, [12] new teaching methods, especially participatory and workshop methods, [11] simulators, [12] and playing games, [13] in continuous training programs were approved.

The high averages of the ‘scientific knowledge of of the lecturer’ and ‘eloquence and expressive speech’ indicated the agreement of the participants on these skills of the lecturer.

From another perspective about the results, the participants had positive points of view about increasing their acquaintance with drugs. According to the results, a high average for ‘Sufficient information on how the drugs of abused were used was obtained’ was obtained, indicating the participants’ agreement with the training and increasing acquaintance with drugs. The reason could be the application of a new training tool instead of the conventional tool, such as, images and slides. It could be evidence for the claim that in educating graders, medical students, physicians, and other related learners, on drugs, the use of new tools such as internet, [14] SMS, [15] educational videos, and so on, are needed instead of the conventional tools.

The results of the Barron et al.’s study on a one-week addiction training program, using a combination of new and conventional educational tool, represented the participants consent with the combined training program rather than conventional training programs for increasing the acquaintance with drugs and helping the treatment of drug addicts, [16] which confirmed the results of our study.
The positive points of view and 90% satisfaction of the physicians indicated their lack of awareness about psychoactive substances and drugs, their need to get the related education, and the necessity of holding more training programs for them.

One of the limitations of the study was the lecturer’s awareness of the questionnaire contents that could have affected the manner in which the lecturer taught. The other limitations were the participation of only general physicians in continuing medical education program of IUMS and the study time limited to the first simister of 2012 and definite hours. It should be noted that a high total average for the questionnaires could also be due to the other skills of the lecturer. Hence the participants’ consent could not be fully considered as relating to the Nejat Briefcase. It was also another limitation to generalize the results of the participants’ consent. Therefore, similar studies on other continuing medical education programs, and training other learners such as students, masters, graders, teachers, and so on, using Nejat Briefcase, are suggested.

The affordability, uniqueness, attractiveness, and effectiveness of the Nejat Briefcase, make it an appropriate educational tool in the learning process. With regard to the role played by the Nejat Briefcase in increasing the learning quality of the physicians, providing similar tools to educate on other issues such as emergency and disasters (floods, earthquakes, chemical attacks, etc.) is suggested.

CONCLUSIONS

According to the positive points of view of the participants about the program and about the Nejat Briefcase as an educational tool, providing similar tools to educate on other issues as well as other learners is suggested.

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