Understanding Experiences of Simulation for Behavioral Health Students Working with Families Impacted by Opioid/Substance Use

In 2023, 48.5 million people living in the United States (U.S.) suffered from a substance use disorder (SUD), among which 5.7 million suffered from an opioid use disorder (OUD).[1] With the increasing rates of opioid overdoses in the U.S., a need exists to expand and train the behavioral health workforce to help support prevention and treatment among families impacted by OUD. Simulation training among health professions students provides low-risk training that can facilitate translation of classroom education into field application.[2] Simulated patients (SPs) are individuals who are trained to represent clients and provide training and education experiences for health professionals.[3] For SUD education and workforce development, simulation and the use of SPs may provide an opportunity to practice skills and navigate complex situations while getting real-time feedback and support in a low risk environment. Though minimal research exists examining the implementation of simulation among healthcare professionals for families impacted by SUDs. The Interdisciplinary Training Initiative for Children, Adolescents and Families Impacted by Opioid Use Disorder (ITI) was developed to train family therapy and mental health counseling students in prevention and recovery support for families impacted by OUD and other SUDs. Students participated in didactic training modules and webinars exploring SUD prevention, treatment, and recovery support. Simulation was utilized with SPs for students to apply knowledge and skills developed from the training modules and webinars.

The present project analyzed post-simulation focus groups among 82 participants, to examine changes in reported experiences and attitudes in working with families impacted by OUD/SUDs. Focus group questions examined lessons learned from the simulations, social location and therapeutic process, and changes that participants would incorporate into their sessions. Thematic analysis was used to analyze focus group content following six steps: 1) familiarization with the data; 2) generation of initial codes; 3) search for themes; 4) review of themes; 5) define and name themes; and 6) write up. Each focus group was transcribed and checked for accuracy. Data was coded using NVIVO v14.[5] The results indicated four themes: 1.) benefiting from simulations, 2.) learning from others, 3.) challenges in simulation, and 4) social location on perception and attitudes of therapy. The findings support the implementation of simulation among health professionals for SUD

training and workforce development, which provides insight into potential ways to improve the use of future simulations.

Literature Cited

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