Background

- 60.1 million Americans engage in high risk alcohol use and 24.6 million use illicit drugs. Nurses play a crucial role in early identification and access to care for patients with alcohol or drug (AOD) related problems. Yet nurses typically report negative attitudes, poor motivation, and low self efficacy when working with AOD affected patients.
- Stigma, or the fear of being stigmatized is a source of chronic stress for people with AOD problems, resulting in significant barriers to identification of and access to care for affected patients.
- Research shows that health care professional training on substance abuse and addiction can result in improved attitudes and practices.

Aim

The aim of this poster is to describe the development and preliminary outcomes of a community health clinical practicum designed to improve BSN students’ attitudes and therapeutic commitment for working with AOD affected patients.

The Clinical Experience

Community Health BSN students complete and reflect upon clinical education experiences on substance abuse and addiction (media, readings, expert speakers, workshops, and field trips). Selected topics include:
- Neuroscience of addiction and recovery
- Adverse childhood events and trauma
- Fetal alcohol spectrum disorders
- Screening, brief intervention and referral to treatment (SBIRT)

Students incorporate this knowledge into their practice of community health nursing skills with clients of a substance abuse treatment center for women with their children. Students assess the community needs, provide a tailored educational activity each week, and regularly integrate activities to evaluate the efficacy of their teaching. Students also shadow clients in their daily schedule of classes and group therapy. The combination of educational preparation, shadowing, and working directly with clients promotes self-efficacy and improved attitudes.

Evaluation

To measure changes in attitudes, motivation and self-efficacy, students complete 2 validated instruments as confidential web-based surveys on the first and last clinical class days each semester: the Short Alcohol and Alcohol Problems Perception Questionnaire (SAAPPQ) and the Drug and Drug-related Problems Perception Questionnaire (DDPPQ). Respondents rate their level of agreement on a seven item Likert scale, from 1 (strongly agree) to 7 (strongly disagree).

Paired T test and Wilcoxon Signed Ranks test* analysis showed significant improvements in total scores and all subscales except motivation (SAAPPQ) and task-specific self esteem (DDPPQ).

<table>
<thead>
<tr>
<th>Construct</th>
<th>S-AAPPQ</th>
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<th></th>
<th>DDPPQ</th>
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<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>Change</td>
<td>Sig 2 Tailed</td>
<td>Mean</td>
<td>Change</td>
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<tr>
<td>Role Adequacy</td>
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<td>p = .033</td>
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<td>p = .192</td>
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<td></td>
<td>p = .003</td>
<td>-20.125</td>
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</table>

Discussion

- 90 BSN students have completed the described community health clinical practicum. One of the unique aspects of this practicum is that students can meet objectives of a required course in a setting that provides them with AOD knowledge, thereby enriching their overall curriculum and preparing them to address patients with AOD health issues.
- BSN students who participated in this practicum demonstrated significantly improved therapeutic commitment for working with AOD affected patients, suggesting reduction in stigmatizing attitudes.
- Lack of significant change in the subscales of motivation (SAAPPQ) and task specific self esteem (DDPPQ) may be related to the fact that pre-test scores were fairly high so there was not much room for change.

Conclusion

A gap exists between current nursing education and the skills nurses actually need to care for AOD affected patients. Addressing this gap through incorporation of education on AOD related issues into the spectrum of BSN clinical training has potential to address the quality chasm in early intervention and access to care, as well as improve outcomes for AOD affected patients by reducing stigma and discrimination.