An Examination of Nursing Staff Attitudes Toward Pregnant Patients with Active Substance Abuse and Addiction
Megan Isberg RN-BC, BSN

BACKGROUND
- Psychiatric diagnoses have been associated with negative attitudes from health care providers.
- Attitudes toward a diagnostic group can influence clinical behavior, and have been contributed to lower ratings of provider likeability.
- Judgments made regarding those diagnosed with co-occurring disorders may result in failure to recognize addictions as a treatable chronic condition.
- Inpatient psychiatric and women’s health units are seeing an increase in patients with active substance abuse during pregnancy.
- Opioid abuse in Tennessee is escalating.
- Opioid use disorder complicates around 54,000 pregnancies per year in U.S. (2012).
- Opioid use in first trimester of pregnancy increased from 8 to 20% between 2005-2009 in the state of Tennessee.
- Patients who health care providers attribute to having frustrating diagnoses are seen as less attractive patients, and can lead patients toward feelings of helplessness.
- There has been a demand in educational needs among health care providers.
- Education models and curricular interventions have been found to aid shifting attitudes in a more positive frame, impacting patients and their treatment.
- There are few studies evaluating the correlation and impact of health care providers’ negative attitudes on direct patient care.

CLINICAL QUESTION
What are nursing staff attitudes and regard toward caring for pregnant patients with active substance abuse and addiction?

METHODS
- Principle investigator obtained permission to use Medical Condition Regard Scale (MCRS).
- An anonymous survey was distributed through Research Electronic Data Capture (REDCap) software, to nursing staff at Vanderbilt Behavior Health Inpatient Units (VBH) and Vanderbilt University Medical Center Labor and Delivery Units (VUMC L&D).
- Nursing staff were asked to complete the survey regarding feelings about caring for pregnant patients, greater than 20 weeks gestation, with active substance abuse and addiction.
- Institutional Review Board (IRB) approvals were secured prior to the initiation of the study.

MODEL
- The MCRS is a non-condition-specific scale designed to capture biases, emotions, and expectations generated by medical condition descriptors.
- MCRS scores are reliable, and the scale is a valid instrument for assessing regard for any medical condition.
- MCRS uses a six-point Likert scale: 1 = strongly disagree, 2 = disagree, 3 = not sure but probably disagree, 4 = not sure but probably agree, 5 = agree, and 6 = strongly agree.
- Items reflect three themes: the degree to which respondents find patients with a given medical condition enjoyable, treatable, and worthy of medical resources.
- MCRS scale is useful for investigations of attitudes toward medical conditions in educational and clinical settings.

RESULTS
- Sample size included total of 52 participants: 27 nurses from VBH, and 25 nurses from VUMC L&D.
- SPSS software was utilized in order to analyze study data.
- Statistical significance was found on 8 accounts.

<table>
<thead>
<tr>
<th>Item</th>
<th>Mann-Whitney U</th>
<th>P-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients like this irritate me.</td>
<td>168,000</td>
<td>.003</td>
</tr>
<tr>
<td>I enjoy giving extra time to patients like this.</td>
<td>199,500</td>
<td>.010</td>
</tr>
<tr>
<td>Working with patients like this is satisfying.</td>
<td>130,000</td>
<td>.000</td>
</tr>
<tr>
<td>I feel especially compassionate toward patients like this.</td>
<td>174,500</td>
<td>.002</td>
</tr>
<tr>
<td>I can usually find something that helps patients like this feel better.</td>
<td>192,500</td>
<td>.005</td>
</tr>
<tr>
<td>There is little I can do to help patients like this.</td>
<td>179,500</td>
<td>.002</td>
</tr>
<tr>
<td>Insurance plans should cover patients like this to the same degree that they cover patients with other conditions.</td>
<td>212,000</td>
<td>.015</td>
</tr>
<tr>
<td>Treating patients like this is a waste of medical dollars.</td>
<td>206,500</td>
<td>.009</td>
</tr>
</tbody>
</table>

CONCLUSION
- There is a continuing need to implement educational trainings to all specialties of nursing on the disease process of dual diagnoses and patient first language.
- Collection of data is ongoing and includes survey of patients who were admitted to both VBH and VUMC L&D to further explore whether or not negative attitudes and beliefs influence patient care.
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