ABSTRACT

Background: The Substance Abuse and Mental Health Services Administration recently funded grants to train non-physician health professionals to conduct alcohol and drug use screening and brief intervention (SBI). Prior to training advanced practice registered nursing (APRN) students in SBI, we collected baseline survey data and compared results to identical measures collected from first year medical residents.

Methods: APRN students (N = 291) and first year medical residents (N = 182) at 6 nursing schools and 6 residency programs completed a survey measuring attitudes and beliefs about addressing alcohol and/or drug misuse and current SBI practices.

Results: Respondents ranked, on a scale of 1 to 10, the level of importance and their level of confidence in performing 9 components of drug SBI. APRN students rated 8 of 9 importance items significantly higher than medical residents. Only 1 confidence item differed: residents reported higher confidence than APRN students in advising at-risk patients to stop or reduce drug use.

Respondents also ranked the level of importance placed on reasons for and barriers to addressing drug use in patients. APRN students scored significantly higher on all 8 items related to positive outcomes associated with drug SBI (e.g. improving family relationships, reducing healthcare costs). APRN students also scored significantly higher on 4 of 9 items measuring barriers to performing drug SBI (e.g. inadequate training, uneasiness discussing drug use). Medical residents scored higher on only 1 barrier item related to preferring to diagnose and treat patient’s primary health issues rather than give preventative advice such as drug SBI.

Conclusions: Compared to medical residents, APRN students placed more importance on addressing patients’ drug use and the potential positive outcomes associated with SBI. While SBI training efforts may be more readily accepted among APRN students, perceived barriers could limit SBI implementation. Future studies should assess the ability of training programs to translate positive attitudes into increased SBI behavior.

BACKGROUND

The Substance Abuse and Mental Health Services Administration (SAMHSA) has devoted significant resources to train health professionals to perform alcohol and drug screening and brief intervention (SBI).

As one of the few recipients of both a residency training grant and a health professionals training grant from SAMHSA, we are in a unique position to compare two very different groups of trainees.

This study compares baseline survey data collected from advanced practice registered nursing (APRN) students to identical measures collected from first year medical residents.

METHODS

Study Sample

APRN students (N = 291) at 6 nursing schools, and first year medical residents (N = 182) at 6 residency programs

Study Design

• Baseline survey data collected before students received screening and brief intervention training.

• Respondents ranked, on a scale of 1 to 10, the level of importance and level of confidence in performing 9 components of drug SBI.

• Respondents ranked, on a scale of 1 to 5, the importance placed on both positive reasons and negative reasons or barriers to addressing drug use in patients.

Outcomes of Interest

The baseline differences between APRN students’ and medical residents’ attitudes and beliefs toward addressing unhealthy drug use.

RESULTS

ASPECTS OF ADDRESSING PATIENTS’ DRUG USE: LEVEL OF IMPORTANCE

APRN students rated 8 of 9 importance items significantly higher than medical residents. Only 1 confidence item (not shown) differed: residents reported higher confidence than APRN students in advising at-risk patients to stop or reduce drug use.

APRN students scored significantly higher on all 8 items related to positive reasons for performing drug SBI.

APRN students scored significantly higher on 4 of 9 items measuring barriers to performing drug SBI.

Medical residents scored higher on only 1 barrier item: preferring to diagnose and treat patients’ primary health issues rather than give preventative advice on drug use.

CONCLUSIONS

• Compared to medical residents, APRN students placed more importance on addressing patients’ drug use and the potential positive outcomes associated with SBI.

• SBI training efforts may be more readily accepted by APRN students, but perceived barriers could limit SBI implementation.

• Future studies should assess the ability of training programs to translate positive attitudes into increased SBI behavior.