



Attitude of Nurses Towards Substance Abuse Patients

A Literature Review

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Bachelor's thesis

August 2023

Bachelor of Healthcare (Nursing)

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**Attitude of Nurses towards Substance abuse Patients
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Jyväskylä: Jamk University of Applied Sciences, August 2023, 48 pages

Degree Programme in Nursing. Bachelor's thesis.

Permission for open access publication: Yes

Language of publication: English

Abstract

Background – Nurses play a vital role in patient assessment and care, being the first set of healthcare professionals patients encounter. Sometimes, these patients may present with substance use disorder (SUD) in addition to other medical conditions. Having been classified as a global health concern, substance abuse is associated with various health and social consequences. In such cases, nurses occupy a vantage position in motivating substance abuse patients towards a healthy lifestyle, as they have more frequent contacts with patients than other healthcare professionals. Thus, the approach nurses adopt during such encounters may affect the quality of care and patients' recovery process.

Aim: the aim of the research was to explore the attitude of nurses in providing nursing care for patients with substance abuse disorder. The purpose of the study was to create awareness on the effects of nurses' approach to care of substance abuse patients, and to improve professional competence in substance abuse nursing care.

Methods: The study was conducted using the literature review methodology. The Data were collected from CINAHL, Medline, and PubMed healthcare databases (N = 7), from selected articles published between 2013 - 2022. The Data were analyzed using the content analysis tool for quantitative and qualitative studies.

Findings: The attitudes exhibited by nurses towards substance abuse patients were categorized into three main categories: professional approach; negative disposition which included prejudices, emotional behaviours, and overt behaviours; as well as mixed feelings.

Conclusions: Nurses attitudes ranged from positive influencing approach to negative behaviours which had significant impact on the quality of care delivered to SUD patients. Various factors such as work experience, age, and cultural stereotypes influenced the nurses' attitudes. Knowledge and professional development in substance abuse care led to a more positive approach. In addition to personal factors, environmental components in the workplace such as heavy workload, lack of time, and limited resources were identified as barriers to providing quality nursing care to substance abuse patients.

Keywords/tags (subjects)

Attitudes; substance abuse; patients; nurses, substance use disorder

Miscellaneous (Confidential information)

N/A

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1 INTRODUCTION

Substance abuse has developed into a global issue, with adverse effects that potentially harm both the individual user, family, and the society at large. The impacts extend beyond public health concerns, as it has the tendency to breed social and legal issues. Thus, it requires multiple forms of interventions and strategies from different sectors in the society to address the challenges it raises. With regards to the public health concerns, various aspects such as substance abuse treatment, challenges of vulnerability and dependence, and strategies for harm reduction in abusers are issues being combated globally. (World health organization, 2019.) Substances in this regard are alcohol and illicit drugs that have been categorized as such under international frameworks.

Several factors have been identified as the driving force behind substance use becoming an issue of global concern. Janicijevic, Kocic, Radevic, Jovanovic, and Radovanovic (2017) viewed urbanization, young population demographic, and literacy rate as socio-economic factors that have influenced the abuse of alcohol and illicit drugs. Also, biological risk factors for substance abuse have been identified. Parental genes, developmental problems, and race/ethnic group of descent have been shown to increase the risk of vulnerability to substance abuse (Potenza, 2013). These factors predispose the persons to the health and social effects of substance abuse.

Furthermore, there is a link between substance abuse and an increased risk for comorbid diseases such as hepatitis, HIV, and liver diseases. This increases the frequency for healthcare needs by persons with substance abuse problems. In this regard, the nurse as part of the healthcare team, have a vital role to play in patient assessment and management of mental and physical health comorbidities (Imkome, 2018). Also, being in more contact with patients, nurses occupy a vantage position in identifying and providing access to treatment for substance abuse patients (Bowman et al., 2017). Thus, the approach the nurses adopt while providing care may significantly affect the quality of care, and the patient's recovery process (Chozom, Neuhann, & Krahl, 2021).

Therefore, the aim of the research is to explore the attitude of nurses in providing nursing care for patients with substance abuse disorder. The purpose of the study is to create awareness and improve professional competence in substance abuse nursing. The result of the study would show the relationship between nurses' attitude and the nursing care provided, the effects of nurses' attitude on substance abuse patients, and factors influencing such attitudes.

2 BACKGROUND

2.1 Definition and Classification of Substance Abuse

The term substance abuse has been used interchangeably with drug abuse in literatures. However, the use of the term substance abuse appears more suited to qualify the act, as it includes the abuse of other things that are not categorized as drugs. There is no generally accepted definition of substance abuse. Early studies defined it in relation to the negative effects it produces, or the purpose for which it was consumed. The definition by John and Griffin (1990), viewed substance abuse as "the excessive use of a drug in a way that is detrimental to self, society, or both" (p.922). But for the purposes of this study, the definition put forward by the World health organization would be adopted. According to the World health Organization (WHO, 2021, Substance abuse), substance abuse is defined as "the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs". Psychoactive substances have been categorized to include the range of substances that affect different psychological processes that the body naturally undergoes. These mental processes include "cognition, emotions, consciousness, and perception". (WHO, n.d). This definition is more encompassing as it covers the use of substances that are not limited to drugs.

The use and abuse of these range of psychoactive drugs have increased tremendously over the years. Statistics indicate that there are about 270 million people who use substances globally. About 13% of this population have substance abuse disorders, and thus requiring medical treatment. (UNODC, 2021). The increase in the abuse of substances, correlates to an attendant increase in the incidents of deaths directly or indirectly attributable to substance abuse. The Global burden of diseases study (2017) showed that 11.8 million deaths occurred as a result of substance abuse in the preceding year.

Criteria for diagnosis for substance abuse is provided in the International classification of diseases (ICD) as published by the World health organization, and the Diagnostics and statistical manual for mental disorders (DSM) published by the American psychiatric association. The ICD-11 (11TH edition) outlines a list of diseases that are categorized as disorders resulting from the use of substances. The classification includes fourteen psychoactive substances made up of medication groups, drugs, alcohol, and caffeine. The manual defined substance use disorders as including disorders resulting from a single or repeated use of psychoactive substances. A primary diagnosis for substance use

disorder can be made when one of the following conditions is present; "episode of harmful psychoactive substance use, harmful pattern of psychoactive substance use, and substance dependence" (ICD-11, 2022, Disorders due to substance use). The DSM-5 gives more elaborate criteria for the diagnosis of substance use disorders. It lists ten classes of drugs associated with substance use disorders; however, caffeine is exempted from use in the diagnosis of substance use disorder. A diagnosis of substance use disorder can be made under the manual where at least two of the symptoms of substance use has been reported. The manual contains 11 criteria for diagnosis, grouped into four categories of "uncontrollable urge to use, physical dependence, social problems, and risky use". Substance use disorder is further classified according to the level of severity; from mild (2-3 symptoms) to severe (6 or more symptoms).

From the two diagnostics manuals, marked differences in the criteria and qualifications for the diagnosis of disorders resulting from substance use is evident. While primary diagnosis under the ICD-11 is based on the pattern of use, the DSM-5 has criteria bothering on use, dependence, and the social effects of the use of substances. Furthermore, the exemption of caffeine in the diagnosis of substance use disorder in the DSM-5 negates its inclusion in the list of psychoactive substances that lead to substance use disorders. Akin to this, the DSM-5 has been criticized for labelling and diagnosing normal human and physiological behaviours as medical conditions (Pickersgill, 2014). Having a definite definition of substance abuse becomes difficult when there are uncertainties about what should be labelled as substances, thereby making it probable for normal substance use to be diagnosed as a mental disorder.

2.2 Effects of Substance Abuse

The essential features of substance abuse are the cognitive, behavioural, and physiological effects it produces (DSM-5,2013). Various studies have examined the diverse effects of substance abuse. Substance abuse has a negative effect on the different aspects of the life of the individual, the family, and has an indirect effect on the community/society. On the direct effects on the abuser, substance abuse has a negative effect on the different aspects of the life of the individual, as it controls the mental process. It affects the psychological health of the individual by presenting issues with self-image and interpersonal conflicts. According to Hasan (2019), substance abuse impacts on the individual's social relationships, leads to diminished self-esteem, and increases the tendency to engage in domestic violence. Also, there is an established link between substance abuse and cognition.

It has been shown to impair memory, and cause reduction in concentration which leads to poor academic performance in students (Gunjan, Tomar, & Singh, 2020).

Socially, the perception of the society about persons with substance abuse disorders may lead to stigmatization, with the ripple effect being loss of social connections, means of livelihood, and other social dysfunctions. (Sahu & Sahu, 2012.) Thus, substance abuse affects the quality of life of the individual as it impinges on the ability to maintain employment, housing issues, and limited finances increases the tendency to engage in crime (Daley, 2013). Furthermore, the negative consequences on health is the most pronounced effect of substance abuse on the individual. The effects may be a direct consequence of the substance abuse such as respiratory diseases caused by smoking, or complications of drug use such as hepatitis and HIV contracted from sharing of unsterilized needles (Fox, Oliver, & Ellis, 2013). These complications prompt the individual to seek medical treatment in situations when there is the presence of both mental disease and physical disease.

Substance abuse by an individual affects the family members directly and indirectly. According to Shamsaei, Baanavi, Hassanian, Cheraghi (2019), the impact of an individual's substance abuse disorder on the family may include stigma which affects others who are not members of the immediate family. The effects of having a family member with a disorder due to substance use depends on the status and role of the individual within the family unit. Having an adolescent in the family with a substance use disorder affects the family differently from where the member of the family with a disorder due to substance use is one of the parents. (Lander et al., 2013.) The result of the study by Dykes and Casker (2021) showed that substance abuse by adolescents have financial, physical, and emotional effects on other members of the family. Also, there is evidence to support the fact that families with an individual with a substance use disorder have poorer mental health status and are at a higher risk of mental health stress due to increased stress level within the family (Shamsaei et al., 2019).

On the other hand, the condition of a parent with substance use disorder affects the family in several different ways. In families with such circumstances, the children risk experiencing domestic abuse, child neglect, and limited family resources for their upkeep (Lipari & Horn, 2017). Thus, they are likely to sustain more physical injuries and show signs of poor health conditions due to abuse

and neglect. Also, there is evidence to show that substance abuse by one parent affects the psychological health of the children in the family. It has been linked to behavioural and developmental problems. The effects on child development affects learning and academic performance, as well as having social impacts on the children within the family unit. (McGovern et al., 2018.) Furthermore, child neglect due to substance abuse by the parent influences the behaviour of the child. According to Lakshamama and Kalavati (2018), one of the negative effects of having a parent with alcohol abuse problems is the increased likelihood of the child abusing alcohol later in life.

Furthermore, the society is affected negatively in several respects by individual substance abuse. The report of the International narcotics control board (2013) categorized and analyzed the effects of substance abuse on the society under "health, public safety, crime, governance, and productivity" (p.1). The report observed that resources are required to implement policies and programmes to prevent substance abuse, as well as interventions aimed at harm reduction and rehabilitation. Evidence suggests that it is more cost effective to implement programmes aimed at prevention and rehabilitation, than to treat the health issues that arise from substance abuse. With respect to public safety, substance abuse has the tendency to endanger public safety with increased rates of accidents, low quality of life for inhabitants of drug zones, as well as environmental degradation. Also, the use and sale of substances have been linked to increased incidents of crime, as there is the desire of the users to sustain the habit or the sellers to protect their business. Lastly, substance abuse leads to decreased productivity in the society where most of the abusers are unfit to work (INCB, 2013). This increases the burden on the welfare system to cater for these group of people.

2.3 Nursing Attitudes

There is no universally accepted definition and explanation of attitudes as the concept has evolved over the years in the different academic fields. Early definitions perceived attitude as mental elements that influence or affect human behaviour. According to Cacioppo and Berntson, (1994) "attitudes guide human interaction with the physical environment by determining the motivation to approach or to avoid". Thus, it can have the effect of influencing the individual's decisions at that particular point in time. In defining an attitude, elements of responses to behaviours and actions such as emotion, overt behaviour, and cognition are evaluated. (Eagly & Chaiken, 1998 as cited in Jones & Eiser, 2014.) There are two ambits to attitude, ranging from positive to negative by which things are labelled, which in turn influences human action (Jones & Eiser, 2014). Therefore, within

this range of classification, attitude may be at either end of the spectrum as positive or negative and can also be in the middle of the range as neutral. The attitude of nurses in patient care have been evaluated within this ambit.

Several studies have examined the attitude of nurses towards substance abuse patients. According to Van Bockel et al. (2013), there is a general negative attitude towards patients with substance use disorders among nurses. The result of the study by Diabes et al. (2017) identified negative attitudes of stigmatization, avoidance, and discrimination based on social class among nurses. Stigmatization was based on the societal perception that substance abuse increases the tendency for involvement in criminal activities. Also, Biancavelli et al. (2019) found that patients with a history of substance abuse received poor treatment and were referred to with derogatory terms by nurses and other hospital staff. On the contrary, the study by Chu (2013) indicates that the attitudes of nurses towards patients with substance use disorder is neutral. At the other end of the spectrum, findings from the study by Taraftar and Gupta (2018) on the attitude of nurses working in general wards towards substance abuse patients showed that nurses have a positive attitude to care. Research has shown the need for nurses to have a positive attitude in patient care. The attitude of the nurse towards patient care have an effect on the treatment process. A negative or positive attitude can influence the willingness of individuals to adhere to treatment, as well as the rate of recovery (Fegghi & Malekzadeh, 2014).

2.4 Factors Influencing Nurses' Attitudes Towards SUD Patients

Several factors have been identified to influence the attitude of nurses towards patients. According to Finkelman (2017) the attitude of nurses towards patients are influenced by internal factors such as lack of professional confidence, insecurity, and role confusion. Failure to deal with these internal factors lead to victim-mentality which translates to the aggressive image held of nurses. Again, research has shown that giving proper professional nursing care is affected by heavy workload, poor working conditions, shortage of staff, and poor remuneration (Yau et al., 2012). The impact heavy nurses' workload has on nurses' attitude towards patients was identified in the result of the study by Haskins et al. (2014). These factors are of general application to nurses in all areas of specialization, and to all category of patients. However, some researchers have published studies focusing solely on factors influencing the attitude of nurses towards substance abuse patients.

The study by Chomoz et al. (2021) identified nurses' frustration from frequent re-admission of the same patients as one of the factors that affect nursing attitudes to patientcare. With such patients, there is a tendency to reduce the quality of care, or to apply avoidance mechanism as the nurses perceive efforts at treatment as being futile. The study also identified the length of experience of the nurses, and lack of knowledge and skills about substance abuse care as factors influencing attitudes towards patients with substance use disorder. Findings showed that nurses with more years of experience with patients with substance abuse problems have better knowledge about caring for such patients, thus portray a more positive attitude to patientcare. Furthermore, the intoxicated state and aggressiveness of some patients towards the nurses at the point of admission influences the nurses' attitude to care when treatment is commenced.

The imposition of norms and values by the society has an influence on nursing practice with regards to discrimination and stigmatization (Woody,2022). Substance abuse patients are disproportionately affected by societal these societal norms and values. Research has shown that the attitude exhibited by nurses could stem from societal stereotypes about substance abuse, and this affects the quality of care (Sleeper & Bochain, 2013). Several sociological elements and components could be seen to influence nurses' attitudes as social beings, and products of a social environment. Feldman (1999) as cited in Diabez et al. (2017), opined that human attitudes are influenced by perception, culture, religion, and individual life experiences. Furthermore, the study by Diabez et al. (2017) observed that the personal beliefs of nurses, societal perception as portrayed in the media, and childhood and upbringing of the nurses have been identified as major factors influencing nurses' attitude to substance abuse patients.

2.5 Nursing Roles and their Influence on nurses' Attitudes

The preamble to the International Council of Nurses code of ethics (2012) provides the four fundamental responsibilities of nurses to "promote health, prevent illnesses, restore health, and alleviate suffering". Nurses working with substance abuse patients provide various nursing interventions at each stage of care. The nurses are involved in the physical and mental health triage at the point of admission, make nursing assessments, provide nursing care, and conduct health promotion through patient education (Public health England, 2017). Nurses provide round the clock care for patients.

The primary care nurse is the first member of the healthcare team a patient encounters at the hospital, therefore, an empathetic initial nurses-patient relationship is essential to achieve a responsive treatment (Tarafdar & Gupta, 2018).

The role of a nurse in patient assessment and care is fundamental to providing nursing care. Thus, knowledge and nursing skills in these areas are vital. For patients with substance use disorder, nurses' knowledge of substance abuse care is necessary to identify the condition, as making an early assessment of the condition is essential for providing nursing interventions (Tarafdar & Gupta, 2018). Providing patient education constitute part of health promotion aimed at minimizing harm. According to Woody (2022), nurses are well suited to educate patients about the risks associated with substance abuse, and initiate adopting healthy behaviours. A behavioural change has the potentials to reduce the risks of harm associated with substance abuse.

2.6 Nursing Care and the Harm Reduction Principle

Various principles have been propounded to justify providing equitable healthcare services to certain groups of patients with risky health behaviours. The application of these principles is viewed as being for the greater good of the society. Although the patients are the primary beneficiaries, the community is the ultimate beneficiary as the safety of public health is ensured. For substance abuse patients, the principles of harm reduction have been applied in nursing care. Harm reduction International (n.d, what is harm reduction) described harm reduction as "policies, programmes, and practices that aim to minimise negative health, social, and legal impacts associated with drug use, drug policies, and drug laws". The Organization defines the approach with particular application to substance abuse solely. However, the definition by Hawk et al. (2017) adopts a general approach to the application of the harm reduction principle to health. The authors defined harm reduction as "interventions which aim to reduce the negative effects of health behaviours without extinguishing the health behaviour permanently" (p.1). This definition is more suitable as harm reduction approach has been applied to other aspects of health behaviours other than substance abuse. With respect to substance abuse, a fundamental attribute of the harm reduction approach is the focus on the reduction of harm from substance abuse, rather than achieving reduction of use.

Several varying principles underlying the harm reduction approach have been identified. The result of the study by Hawk et al. (2017) identified and analysed six principles of harm reduction: humanism which underscores the respect of the right to dignity of human person; pragmatism, with the idea that it is impossible for all patients to adopt healthy behaviours, hence the goal of the approach is to support the patients to make healthy choices and not abstinence; Individualism which views every patient as a unique being with unique health behaviour, and as such requiring nursing interventions tailored to their needs; autonomy whereby patients are allowed to make their own care plan and receive treatment according to their own pace; Incrementalism which acknowledges any improvement the patient makes towards living a healthy lifestyle; and accountability wherein patients are held responsible for their treatment choices but without terminating treatment when they make wrong choices. The principles of harm reduction outlined by harm reduction International (n.d) contain similar elements as above, with the inclusion of the use of evidence-based practices, and the harm reduction approach being based on inclusivity and equitable access to health services.

Harm reduction approach has been viewed as being beneficial to both substance abusers and the community. Several characteristics of the approach have been identified to aid in the implementation of harm reduction interventions. According to Kerber, Donnelly, and Cruz (2020), providing safe environment for substance abusers at risk of harm, enlightening substance abusers about safe use through patient education, and providing access to supplies are essential to achieving harm reduction. This approach is an alternative to the traditional abstinence approach to curtailing substance use. In implementing the harm reduction approach, the substance abuse patients are at the centre of any policy or initiative as success cannot be achieved without their corporation (Denis-lalonde et al., 2019). However, the approach has been criticized as encouraging continuous substance use and poses an increased risk to the society, notwithstanding the evidence-based benefits of its implementation (Hawk et al., 2017).

3 AIM AND PURPOSE OF THE STUDY

The aim of the research is to explore the attitude of nurses in providing nursing care for patients with substance abuse disorder. The purpose of the study is to create awareness and improve professional competence in substance abuse nursing. Thus, the study would answer the question, "what are the attitudes of nurses towards substance abuse patients? "

4 METHODOLOGY

4.1 Literature Review

Literature review methodology was adopted to seek answers to the research question in the study. The methodology was used in the study as it is suitable for various scope of research, depending on the aims of the research. A review of relevant literature on existing knowledge about an area of research is essential for all studies irrespective of the research methodology adopted. However, for research questions whose aim is to provide a general overview of existing knowledge about a research area, literature review is the appropriate methodology to be applied (Snyder, 2019). Thus, a literature review serves the purpose of filling the gap in knowledge by synthesizing already existing information on the topic of research. Again, for a literature review to be appropriately used in a research, the standard to be met include conducting a comprehensive search, the method for selecting articles should be unbiased, and articles selected for the study should be recent and relevant to the research. (Vijayamohanen,2020). These standards were adopted and applied in answering the research question in the study.

Furthermore, the six-stage method of conducting literature reviews formulated by Templier and Pare (2015) was applied in the research. First, the topic for the research was chosen, background review of literature on the subject of research was conducted, and the aim and research question for the research was formulated. The next stage was the conduction of the literature search from selected Databases using the PICO (Population, Interest, Context) framework for conducting literature search. At the third stage, all literature was screened for inclusion using the criteria chosen for inclusion and based on their relevance to the topic of research. The fourth step involves evaluating the quality of the articles selected with an assessment tool. At the fifth stage, the data that was used in answering the research question was extracted from the selected articles for the study. The final stage of the literature review involved analysing the data, discussing the findings of the research, and drawing a conclusion from the analysis and discussion.

4.2 Literature Search Process

The Data search for the study was conducted from CINAHL Ultimate, PUBMED, and MEDLINE electronic databases. The PICOS (Population, Interest/Intervention, Context, and Study) framework for

formulating eligibility criteria for inclusion of studies in a research, and to answer a research question was applied in the data search (See Table 1 below).

Table 1: PICOS framework

Population	Nurses in all healthcare facilities
Interest	Attitudes towards substance abuse patients
Context	Healthcare facilities where nurses provide nursing care
Study characteristics	Peer reviewed, full text, English language, free access, published between 2013-2022

The selection criteria for the included studies were formulated before the search was conducted. The studies included in the review were those that had population of nurses and excluding all other healthcare professionals; researched on the attitudes towards substance abuse patients and excluded other categories of patients; the work-settings included all healthcare facilities and settings where nurses deliver care; and only studies that were published in English language, peer reviewed, and conducted between 2013 and 2022 were included in the review as shown in Table 2 below.

Table 2: Inclusion and Exclusion Criteria

INCLUSION CRITERIA	EXCLUSION CRITERIA
<ul style="list-style-type: none"> ❖ Nurses generally including registered nurses, midwives, and practical nurses. ❖ Attitudes of nurses towards substance abuse patients ❖ All healthcare facilities where nurses provide care ❖ Studies that were conducted in English language between 2013 and 2022, peer reviewed, contains abstract, are full text, free access to JAMK University of Applied Sciences students, and answer to the research question. 	<ul style="list-style-type: none"> ❖ All other healthcare professionals other than nurses ❖ Attitudes towards other categories of patients ❖ All specialized healthcare settings where nurses do not provide care to substance abuse patients, including paediatric wards ❖ Studies that were conducted before 2013, published in languages other than English, are not peer reviewed, are not freely accessible to JAMK UAS students, and do not answer to the research question.

The data search was conducted using the Boolean search mode (AND/ OR) and suggested key-search words and phrases as shown in the table below.

Table 3: Study search terms

Nursing OR nursing staff OR nurse	AND
Attitudes OR perceptions OR opinions OR thoughts OR feelings OR beliefs	AND
Substance abuse OR substance use OR drug abuse OR drug addiction OR drug use	AND
Patients OR service users OR clients	

4.3 Data Selection and Appraisal

The data search from CINAHL Ultimate, PUBMED, and Medline generated a total of 240 articles with the application of all inclusion criteria and limits. During the screening of the data, 22 duplicates were eliminated. The remaining 218 articles were screened based on title and having an abstract, and a further 204 articles were eliminated. Full text screening was done for the remaining 14 articles and 7 articles were eliminated, as they did not conform to all the inclusion criteria since they contained participants from other healthcare professions or did not answer to the research question. After the final full text screening, the 7 articles used for the study were selected. The selection process is shown in the PRISMA flowchart (fig.1) below.

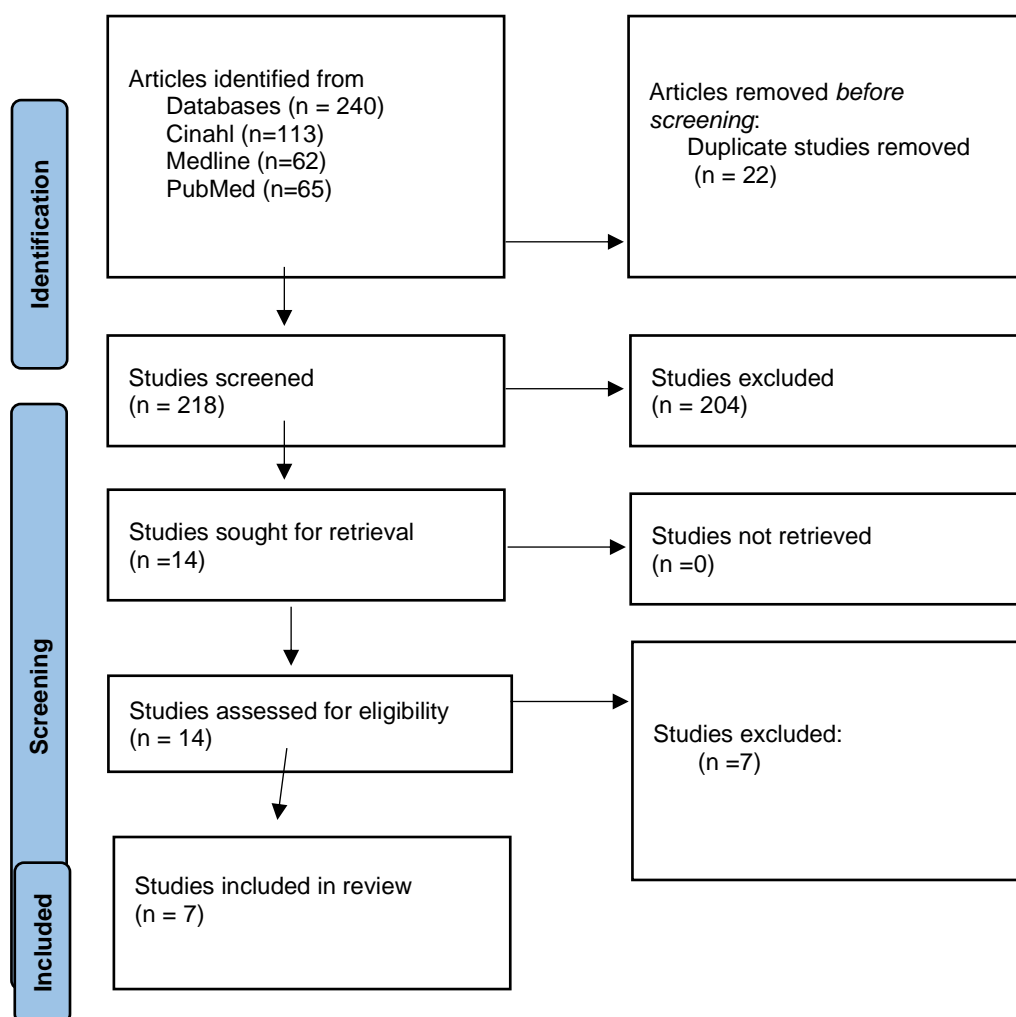


Fig.1: PRISMA flowchart

The quality of the studies used in the research were assessed using the Joanna Briggs Institute (JBI) critical appraisal tool. The purpose for appraising the articles used as data for a study is to assess the reliability of the data, and to identify any likelihood of bias in the research process (Moola et al.,2020). For the quantitative studies, the JBI checklist for cross-sectional studies contains 8 components for scoring a research. The scores for each aspect of the study is labelled as 'Yes', 'No', 'Unclear', or 'Not applicable'. The quantitative studies used in the research were assessed using the cross-sectional checklist, and the minimum score was a 6 out of the 8 components. This qualified the articles to be included in the research as they were assessed to be of good quality. For the qualitative studies, the JBI critical appraisal checklist for qualitative research was used to assess their reliability. The checklist contains 10 components for critiquing qualitative studies. The minimum score for the qualitative studies included in the research was an 8, hence they were assessed to be of good quality. Results of the Data appraisal are shown in Appendix 2.

4.4 Data Analysis

The data for the research was analysed using content analysis tool. This is a research tool used to extract facts and ideas from the research data in order to draw a conclusion that answers to the research question (Polit & Beck, 2006). Content analysis is unique as it can be applied to analyse data in both quantitative and qualitative research. In qualitative studies, it is used to conceptualize texts and provide deeper understanding about the phenomena of the participants being studied (Kleinheksel et al., 2020). To achieve this, data are synthesized into themes and concepts. On the other hand, quantitative content analysis is used to analyse empirical data where the aim is to study the mean, mode, and frequency of a phenomena, in order to draw an objective conclusion (Kleinheksel et al.,2020).

For the research, the four stages of conducting content analysis as propounded by Bengtsson (2016) was applied. At the first stage (decontextualization of data), the data would be read multiple times in order to make meaning of the text, and individual ideas would be assigned codes. In analysing the data for this study, the result/findings in the eight articles used were read over several times to understand and relate them to the research aim, and ideas that were deemed relevant to the research question were colour coded. The second stage is the 'recontextualization phase', where the texts would be re-read alongside the coded units, to identify useful ideas that answer to the research question but were omitted at the first stage. All the results in the literature selected for the

data analysis were re-read while focusing on the parts that were not coded at the first stage, to find ideas that are relevant but were omitted initially. During the third stage (Categorization phase), the coded units were summarized and then categorized into broad categories and subcategories based on similar themes. Similar ideas from the coded units at the previous stages were summarized in short sentences and grouped into three broad categories of 'professional approach', 'negative disposition' and 'mixed feelings' based on their central ideas. Further subcategories were created from ideas with similar themes in the three main categories mentioned above. The last stage is where the analysis was written. See Fig 2 and 3 below for content analysis process and sample of the data analysis.

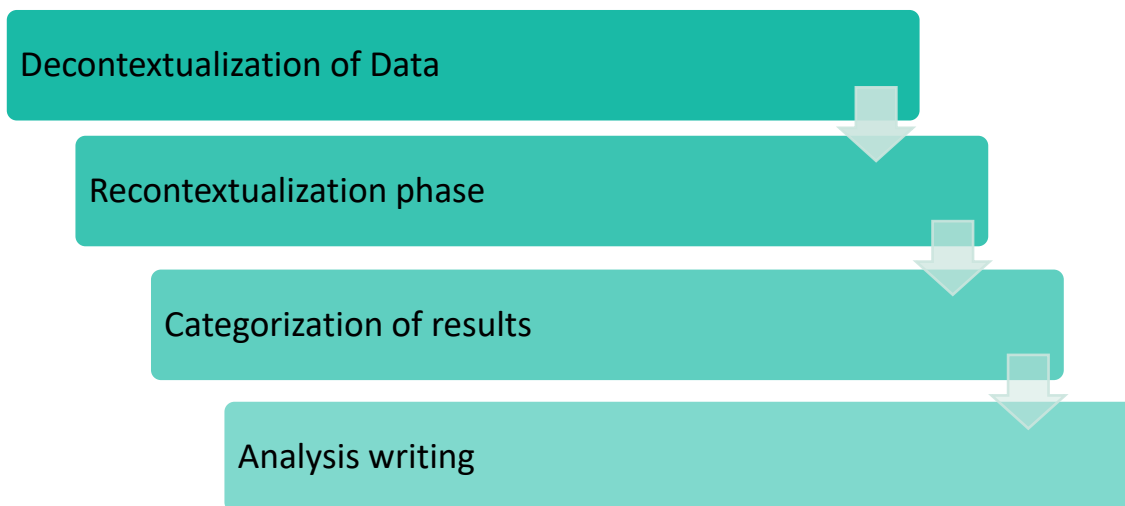


Fig 2: Data analysis process (Content analysis)

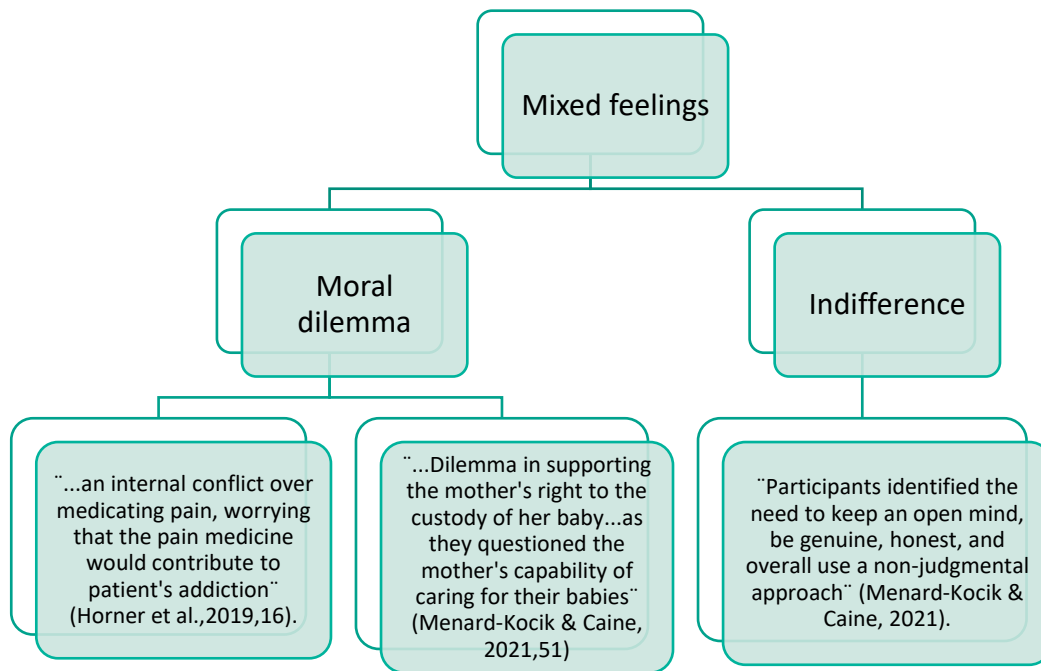


Fig 3: Sample of data analysis

5 FINDINGS

Out of the seven articles used in the data analysis, four were qualitative research while three of the articles were conducted using cross-sectional quantitative research methodology. The studies were published as follows: United States of America (n=1), Canada (n=2), Spain (n=1), Taiwan (n=1), and Scandinavia (n=2). Nurse's attitudes towards substance abuse patients were divided into three main categories of professional nursing approach, negative disposition, and mixed feelings. The main categories were further subdivided into six sub-categories. Professional approaches were described as therapeutic relationship and commitment to care. Negative disposition included subcategories of prejudices, overt behaviours, and emotional behaviours, while mixed feelings were subcategorized into moral dilemma and indifference. The main categories and subcategories are illustrated in fig 4 below.

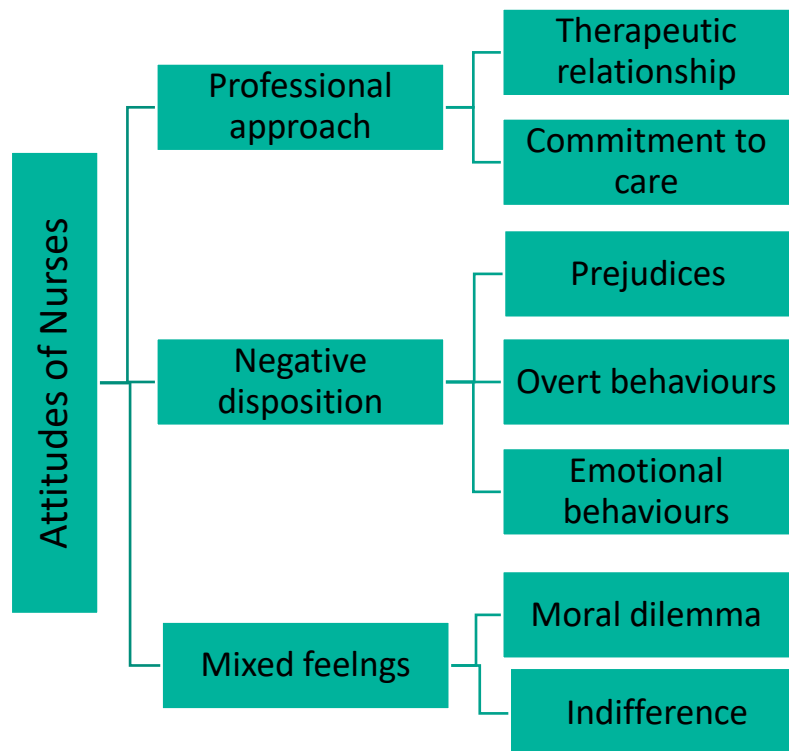


Fig 4: Main categories and subcategories of the findings

5.1 Professional Approach

Therapeutic Relationship – Formation of a therapeutic nurse-patient relationship was shown to be affected by nurses' attitude to patient care (Menard-Kocik & Caine, 2021). A positive attitude was essential to create an enabling environment to form a therapeutic nurse-patient relationship and to provide quality nursing care (Lundahl et al., 2013). In some of the studies (Yu-ping & Mei-Sang, 2021; Lundahl et al., 2013; Molina-Mula et al., 2018), nurses' attitudes towards substance abuse patients were reported to be pragmatic. Addressing the patient as a normal human in a respectful manner (Hakala et al., 2021), and being open minded and honest during conversations (Menard-Kocik & Caine, 2021) was an effective professional attitude to build relationship of trust. Relatedly, adopting a calm approach enabled the nurses to create a secure atmosphere for effective communication (Lundahl et al., 2013).

Findings further showed that a positive attitude involved being physically and emotionally present (Hakala et al., 2021), having the ability to listen, and to understand the patients' perspective or opinion of their condition (Lundahl et al., 2013). Having a positive perception about substance abuse patients and treating them like other normal patients at the first meeting, fostered open communication for building of nurse-patient relationship (Hakala et al., 2021). A non-judgmental approach was expressed to be essential to empathize with the patients, in order to provide the required client-centred sensitive care (Menard-Kocik & Caine, 2021).

Commitment to Care- Nurses expressed optimism in the ability of the patients to recover fully from substance abuse, and to adopt a healthier lifestyle thenceforth. Having belief and faith in the patients' recovery process increased the nurses' commitment to provide nursing care (Hakala et al., 2021.) Adopting this approach entailed that nurses ought to be self-motivated in order to achieve successful rehabilitation of the patients (Lundahl et al., 2013). Also, accepting the reality that this category of patients requires more care than other patients elicited sympathy, thus influencing the nurses' dedication to help the patients effect behavioural change (Menard-Kocik & Caine, 2021). Believing in the possibility of patients' recovery was viewed as a motivating factor and coping mechanism for nurses delivering nursing care to substance abuse patients (Hakala et al., 2021).

5.2 Negative Disposition

Prejudices - Findings from some of the studies showed that nurses were reported to exhibit a judgmental attitude at first meeting with patients with substance use disorder (Horner et al., 2019; Menard-Kocik & Caine, 2021). Having a preconceived negative perception about substance abuse patients before meeting them made delivering nursing care more challenging (Menard-kocik & Caine, 2021). The presence of personal bias and stereotype about patients in this category often led to an unfriendly first encounter with the nurses (Horner et al., 2019). Where personal bias evoked negative feelings due to the patients' behaviour, nurses' commitment to care became diminished. In such instances, lack of motivation to deliver nursing care to substance abuse patients was linked to the negative preconceived perception about their lifestyle choices. (Hakala et al., 2021.)

Nurses reported being uncomfortable while providing care for substance abuse patients (Molina-Mula et al., 2018). The nature of their disease warranted that nurses take extra safety precautions (Horner et al., 2019), even though nurses were of the opinion that such patients should be treated

like other patients with regular diseases (Molina-Mula et al., 2018). Nurses request for additional security measures were linked to stereotypes due to previous violent experiences (Horner et al., 2019). Also, personal bias and stereotypes were shown to have induced lack of belief in the ability of substance abuse patients to effect lifestyle changes, hence nurses' lack of motivation to provide care (Hakala et al., 2021).

Emotional behaviours - Emotional behaviours such as stereotype, bias, (Horner et al., 2019), anxiety, fear of aggression (Hakala et al., 2021), frustration (Lundahl et al., 2013), and personal discomfort (Molina-mula et al., 2018) were expressed by nurses while dealing with patients with substance use disorder. Nurses' stereotypical attitude stemmed from the societal stigma attached to substance abuse patients (Horner et al., 2019), which has made providing nursing care for people in this category challenging for nurses (Menard-Kocik & Caine, 2021). Also, the inability to meet the needs of the patients and to effect the desired lifestyle changes contributed to the feeling of frustration by the nurses (Lundahl et al., 2013, Hakala et al., 2021). The feeling of anxiety and fear of violence was raised by the uncertainty in the patients' behaviours under the influence of substances (Molina-mula et al., 2018).

Overt Behaviours - These entailed physical actions taken by nurses to express the emotional feelings evoked when dealing with patients with substance use disorder. Stereotype and nurses' feeling of frustration were directly linked to dismissive attitude, apathy towards patients' recovery (Menard-kocik & Caine, 2021), non-commitment towards helping the patient achieve lifestyle changes (Hakala et al., 2021), and inaccurate pain assessment and management (Horner et al., 2019; Lundahl et al., 2013). When nurses expressed fear of aggression, extra safety and security precautions were taken while delivering care to the patients (Horner et al., 2019).

5.3 Mixed Feelings

Indifference - In some of the findings, nurses reported having a mixed attitude towards substance abuse patients. Their neutral attitude was attributable to environmental factors such as the nature of the hospitals, and increased exposure due to constant contact with substance abuse patients (Chu & Galang, 2013). Having patients with repeated visits to the health facility induced a feeling of apathy in the nurses about providing futile nursing interventions (Hakala et al., 2021). Adopting a

non-partisan viewpoint about substance abuse helped nurses to provide nursing care to such patients without emotional involvements (Horner et al., 2019). Although substance abuse patients have been acknowledged as requiring complex care, findings showed that some nurses were unconcerned about addressing the elementary factors behind the substance abuse (Menard-Kocik & Caine, 2021).

Moral Dilemma - The dilemma between adopting a professional attitude when providing nursing care, as against the negative feelings of frustration due to substance abuse patients' repeated visits to the hospital evoked a mixed attitude from the nurses (Hakala et al., 2021). Nurses expressed emotional struggle about whether to medicate such patients with opioids, assessment of the severity of pain (Honer et al., 2019), and whether or not to blame the patient for their condition (Menard-Kocik & Caine, 2021). The difficult situations which the nurses reported in some of the findings resulted in conflicting decision-making in nursing care (Menard-Kocik & Caine, 2021). Nurses expressed the dilemma of striving to balance the fear of contributing to patients' addiction against the nursing obligation to provide relief to ill patients (Horner et al., 2019). These situations raised ethical concerns for some nurses about the propriety or otherwise of the nursing decisions made (Horner et al., 2021; Lundahl et al., 2013).

6 DISCUSSION

The findings of the literature review established that nurses' attitude played a role in the formation of a therapeutic nurse-patient relationship. Delivering effective nursing intervention to patients with substance use disorder requires a conducive atmosphere and a therapeutic nurse-patient relationship. To achieve this, nurses have to adopt a gentle and calm disposition, while trying to understand the patients' situation. (Bove et al., 2020). The attitude of the nurses in interacting with such patients affects the building of a therapeutic relationship. Being sensitive, present, and open-minded towards the patients, helps to maintain the trust and alliance between the nurse and patients (Bove et al., 2020). A trusting and non-judgmental relationship between the nurse and the patient has been shown to improve the recovery outcomes (Renbarger et al., 2020). Thus, nurses' attitudes have significant impact on the ability of the patient to recover, and to adopt healthy lifestyle options.

Another finding of the study was that nurses have varied attitudes towards substance abuse patients, which affected the nature and quality of care. Providing quality care is contingent on the nurses' approach in dealing with the patients. This entails interacting with the patients without any preconceived perception about substance abuse. (Bove et al., 2020.) Negative attitudes from the nurses affects the interaction with the patient, and by extension the approach to nursing care (Haight et al., 2018). Instances of its effect on the quality of nursing care was evident in the under-management of pain in such patients (Livingston et al., 2012), avoidant or dismissive attitude towards matters concerning the patient, and indifference to the achievement of the care goals for the patient's recovery (Hakala et al., 2021).

Again, negative behaviours exhibited by substance abuse patients contributed to the stereotypical attitude of nurses (Anandan, 2021). Being defensive and rude (Horner et al., 2019), providing false information to the nurse, being uncooperative and defiant (Menard-kocik & Caine, 2021), and patients' repeated visit to the hospital (Hakala et al., 2021) affected the attitude of the nurses toward the patients. Avoiding negative emotions from the provocative behaviours of substance abuse patients by adopting a professional attitude was expressed as a means of limiting the negative effects of nurses' attitudes (Hakala et al., 2021). The stigma associated with substance abuse experienced by the patients in hospitals has a negative impact on nursing care. As a result of stereotyping, the patient's pain may be under-medicated due to the inability of nurses to distinguish substance cravings from actual pain. (Horner et al., 2019.) Also, nurses' attitude had a direct effect on the formation of nurse-patient relationships (Menard-Kocik & Caine, 2021), and the quality of care that is delivered. A positive attitude is required to provide effective care, as a negative attitude has the tendency of inhibiting patients' recovery.

In addition to the attitudes of nurses and their effects on quality of care, the findings highlighted various factors that influence the attitude of nurses towards substance use disorder patients. The behaviour of the patients contributed a significant part in determining the attitude nurses exhibit during interactions with the patient. Being hostile to nurses has the tendency to alienate the nurses and necessitate taking extra safety precautions when dealing with this group of patients (Renbarger et al., 2020). This fear of aggression affects the willingness of the nurse to care for the patient. Also, making repeated visits to the healthcare facilities due to failure of the patients to adopt lifestyle changes, evokes the feeling of resignation and apathy amongst nurses with regards to the patients'

conditions (Bove et al.,2020). The demotivation to provide nursing care affects the quality of care the patient would receive.

From the result of the study, attitude of nurses towards substance abuse patients were expressed to be influenced by factors such as age, work experience, number of courses on substance abuse undertaken in school (Yu-ping & Mei-sang, 2021), work environment, frequency of contact with substance use disorder patients (Chu & Galang, 2013), and personal bias and stereotype of nurses (Menard-kocik & Caine, 2021). Nurses with long work experience with substance abuse patients and have worked in psychiatric institutions, showed more positive attitude towards the patients (Yu-ping & Mei-sang, 2021). Increase in empathy and compassion towards substance abuse patients were related to being in constant contact with such patients (Chu & Galang, 2013). Also, undertaking continuous professional development courses on substance abuse had significant influence on the attitude of nurses (Yu-ping & Mei-sang,2021). These corroborate the findings in the study by Hsiao et al., 2015) which showed that variable factors such as age, length of experience in substance abuse care, experience in psychiatric inpatient facilities, and the level of empathy they possess affects the perception of nurses about such patients. Thus, the presence of these factors and the degree to which they exist, has significant influence on the attitude of nurses towards substance abuse patients.

Additionally, the ability of nurses to adopt a non-judgmental attitude during interactions with substance abuse patients were shown to be riddled with challenges. The presence of personal bias and prejudices affected the attitude of the nurses towards such patients (Menard-Kocik & Caine,2021). Setting aside these stereotypes while dealing with the patients have been shown to be challenging, thereby precluding nurses from delivering quality care (Recto et al.,2020). From the results of the study, burnout due to the additional care demands of substance abuse patients, and the emotional burden it put on nurses affected the provision of quality care. Stressful encounters with such patients evoke negative emotions which lead to the formation of a negative attitude to nursing care. (Horner et al., 2019.) Also, the moral dilemma faced by nurses made providing nursing care to substance abuse patients challenging, thereby requiring effective professional guidance as coping mechanism (Lundahl et al., 2013). Findings from other research corroborate the effect of moral di-

lemma on nurses. The study by Bove et al., (2020) concluded that nurses struggle with a moral dilemma whether to strive to affect positive changes in a patient's lifestyle or to resign to the fact that the patients would not get better, made providing care for substance abuse patients challenging.

Akin to this, heavy workload and lack of time were noted to be a barrier to effective nursing care. This category of patients has been viewed to be demanding and require more attention than others. (Recto et al., 2020.) Dedicating more time and attention to the patients would have made providing nursing care easier, as closeness aids in building trust and a therapeutic relationship (Renbarger et al.,2020). However, notwithstanding a positive attitude and a motivation to effect a change in lifestyle for substance abuse patients, nurses are oftentimes unable to provide effective care due to lack of time. Additionally, the study showed that nurses' Inadequate knowledge of substance abuse care are related to ineffective treatment outcomes in patients (Anandan, 2021). Lack of knowledge and training on substance abuse and its care impacts on the ability of some nurses to understand and relate to the condition of the patients (Clarke et al.,2015). Negative attitudes of some nurses have been linked to inadequate knowledge about substance abuse (Recto et al.,2020).However, the ability to improve on professional knowledge of substance abuse was shown to be limited by resources available and the way care is organized in the institution (Menard-kocik & Caine, 2021). Thus, in addition to personal nursing characteristics, external factors affect providing effective nursing care for substance abuse patients.

6.1 Ethical Consideration

Ethics in research are moral and legal guidelines that govern the conduct of the researcher, while undertaking a research process. The standards differ when there are human participants in the research. The guidelines on the ethical principles to consider while conducting a research involving human participants provides for the protection of the participants from harm (TENK,2019). Thus, the researcher is under an obligation to conduct the research in a manner that would not be prejudicial to the participants. In nursing research, ethics is viewed as the moral principles which the researcher is obligated to follow, in order to protect the rights and welfare of the participants (Priyadarshini, 2020). This involves respecting the participants' right to autonomy, dignity of human person, and privacy.

In studies with patient group from special categories with diminished mental capacity, the legitimacy of the consent given is oftentimes questioned. The capacity to understand the aim of the research and what they are consenting to, may be impaired by the effects of the substance abuse (Anderson & McNair, 2018). Therefore, the voluntariness of the consent could be affected by the impaired decision-making ability of the participants during the research. Since obtaining informed consent is a pre-requisite for the use of participants in a study, the absence thereof has the tendency to nullify the results of the research as not obtained ethically.

These positions are true with primary research (quantitative & qualitative studies), but of limited application in research conducted using literature review research methods. In literature reviews, data is accessed from published articles in publicly accessible Databases, thus there is no use of the primary participants' personal data. However, the ethical considerations in literature review method have been found where data was collected from primary studies that did not comply with ethical guidelines. Also, the presence of subjectivity in the selection process of articles during data collection, could lead to researcher's bias influencing the results of the study. (Vergnes et al., 2011.) Hence, the issue of reliability and transparency of the research. All the articles used for the literature review analysis were conducted ethically as approval was obtained from the ethics committee of the various institutions and organizations where the researches were conducted. Also, informed verbal or written consent were stated to have been obtained from the participants, as well as the option to withdraw at any stage of the process.

Again, it is recommended that ethical principles should be followed at all stages of the research, until the end of the study (TENK,2019). This ensures the continuous protection of the rights of the participants. Where research is conducted as part of an institution, the researcher is under obligation to comply with the guidelines for conducting research in that institution as well. Although the guidelines are provided by Law or Regulation, it is the duty of the researcher to guarantee that the study is conducted in an ethical manner. This study being a literature review, made use of only secondary data from recommended Databases. In order to ensure that the research was conducted ethically, only peer-reviewed articles from credible Databases were used. Also, in complying with the University's guidelines for conducting research, the research was conducted in an objective manner with proper referencing of ideas of other authors.

6.2 Validity and Reliability

The goal of a researcher is to produce valid and reliable results at the end of the study. It is the duty of the researcher to make certain the validity and reliability of the Data throughout the research process (Bengtsson, 2016). Credibility of the results of a study is an important issue to be considered in research. For the study, all articles used for the analysis were selected from reliable and accessible evidence-based databases recommended by JAMK University of Applied sciences. The knowledge-base in the articles selected for the literature review are relevant, as all the studies were conducted between 2013-2022. To ensure reliability, only peer-reviewed articles were used in the research analysis.

Furthermore, proper documentation of the research process would ensure reproducibility of the research, which increases its credibility. The process for data search, inclusion and exclusion criteria for selected articles, and data analysis process were clearly stated and explained. Reporting the step by step strategy used in conducting the data search makes the research process transparent (Saif-Ur-Rahman,2022). This ensures the ability of readers to replicate the results of the study by following the same research process applied. Also, the use of multiple sources in explaining the phenomena strengthens the research. (Nowell et al., 2017.) This shows that the subject has been thoroughly on previously, and the conclusions arrived at in the various studies are based on wide evidence.

However, research has shown that there could be elements of bias in the selection of articles for a literature review. This bias emanates from the search criteria which limits the articles available for inclusion in the study (Borges de Almeida & Garcia de Goulart, 2017). For the research, only articles available in English language, full texts, and are free for JAMK UAS students were included. This excluded studies that did not match the search criteria that could have answered to the research question, thereby posing a potential limitation in the conclusions of the study. To minimize the selection of studies bias, the selection criteria for eligible articles for the study were clearly stated and the conclusions reached from the research were based on the articles selected. Thus, the research having followed the process for conducting a literature review, ethical principles based on the university's guidelines for conducting research, generated valid and reliable results.

6.3 Conclusions

The research studied the attitude of nurses towards substance abuse patients through a literature review. Nurses' attitude towards substance abuse patients were found to include positive influencing approach, negative behaviours, and ambivalence which affected the quality of care delivered to the patients in various dimensions. The attitudes ranged from positive, neutral, to negative behaviours during nursing care. Having a vital role in effecting lifestyle changes in this category of patients, it was necessary to identify the factors that influences nurses' attitudes. The cultural stereotypes, work experience, age, and frequency of interaction with substance abuse patients determined the perception nurses had about substance abuse patients. Also, barriers such as lack of knowledge and experience in substance abuse care, burnout from the stress of the job, and limited resources to improve knowledge in the healthcare facilities affected the attitude of nurses to nursing care of substance abuse patients. Undertaking courses on substance abuse as part of professional development influenced the attitude of nurses towards a more positive approach.

Furthermore, several factors were reported to have significantly influenced the shift in nurses' attitudes from predominantly negative in the past, to a neutral or positive perception about substance abuse patients. Having previous experience in psychiatric wards, undertaking courses on substance abuse in nursing school, and long experience in providing care for such patients enabled less stereotyping. A neutral or positive attitude aided in the formation of a good nurse-patient relationship, which paved way for providing effective nursing care and reducing the harm of substance abuse to the patient and the society. Providing additional training on substance abuse was recommended as a means to address the issues of stereotype towards substance abuse patients, and to increase the knowledge of nurses about substance abuse care.

Lastly, the conclusion of the study was made based on data retrieved from the seven articles used for the analysis. It does not provide exhaustive conclusion on the attitude of nurses towards substance abuse patients, and the effects they produce. Most of the literatures dealt more on the negative effects of the attitude of nurses on the nursing care delivered to substance abuse patients. There was little to no distinction between the effects of a positive nurses' attitude and those of a neutral nurses' attitude. Further research could be conducted on the effects of neutral attitudes of nurses on the quality of care provided to substance abuse patients.

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Appendices

Appendix 1. Critical Appraisal (JBI)

CRITICAL APPRAISAL FOR QUANTITATIVE STUDIES

	YES	NO	UNCLEAR	N/A	TOTAL
1. Were the criteria for inclusion in the sample clearly defined?					
Chu, C., and Galang, A. (2013).	+				
Molina-Mula et al. (2018)	+				
Chang, Y., and Yang, M. (2013).	+				
2. Were the study subjects and the setting described in detail?					
Chu, C., and Galang, A. (2013).	+				
Molina-Mula et al. (2018)		+			
Chang, Y., and Yang, M. (2013).	+				
3. Was the exposure measured in a valid and reliable way?					
Chu, C., and Galang, A. (2013).	+				
Molina-Mula et al. (2018)	+				
Chang, Y., and Yang, M. (2013).	+				
4. Were objective, standard criteria used for measurement of the condition?					
Chu, C., and Galang, A. (2013).	+				
Molina-Mula et al. (2018)	+				
Chang, Y., and Yang, M. (2013).	+				
5. Were confounding factors identified?					
Chu, C., and Galang, A. (2013).	+				
Molina-Mula et al. (2018)	+				
Chang, Y., and Yang, M. (2013).	+				
6. Were strategies to deal with confounding factors stated?					
Chu, C., and Galang, A. (2013).	+				

Molina-Mula et al. (2018)			+		
Chang, Y., and Yang, M. (2013).	+				
7. Were the outcomes measured in a valid and reliable way?					
Chu, C., and Galang, A. (2013).	+				
Molina-Mula et al. (2018)	+				
Chang, Y., and Yang, M. (2013).	+				
8. Was appropriate statistical analysis used?					
Chu, C., and Galang, A. (2013).	+				
Molina-Mula et al. (2018)	+				
Chang, Y., and Yang, M. (2013).	+				
TOTAL SCORES					
Chu, C., and Galang, A. (2013).					8/8
Molina-Mula et al. (2018)					6/8
Chang, Y., and Yang, M. (2013).					8/8

CRITICAL APPRAISAL FOR QUALITATIVE STUDIES

	YES	NO	UNCLEAR	N/A	TOTAL
1. Is there congruity between the stated philosophical perspective and the research methodology?					
Horner Et al. (2019)	+				
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				
2. Is there congruity between the research methodology and the research question or objectives?					
Horner Et al. (2019)	+				
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				

3. Is there congruity between the research methodology and the methods used to collect data?					
Horner Et al. (2019)	+				
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				
4. Is there congruity between the research methodology and the representation and analysis of data?					
Horner Et al. (2019)	+				
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				
5. Is there congruity between the research methodology and the interpretation of results?					
Horner Et al. (2019)	+				
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				
6. Is there a statement locating the researcher culturally or theoretically?					
Horner Et al. (2019)		+			
Hakala et al. (2021)		+			
Menard-kocik and Caine (2021)		+			
Lundahl et al. (2013)			+		
7. Is the influence of the researcher on the research, and vice- versa, addressed?					
Horner Et al. (2019)			+		
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				
8. Are participants, and their voices, adequately represented?					

Horner Et al. (2019)	+				
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				
9. Is the research ethical according to current criteria or, for recent studies, and is there evidence of ethical approval by an appropriate body?					
Horner Et al. (2019)	+				
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				
10. Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data?					
Horner Et al. (2019)	+				
Hakala et al. (2021)	+				
Menard-kocik and Caine (2021)	+				
Lundahl et al. (2013)	+				
TOTAL SCORE					
Horner Et al. (2019)					8/10
Hakala et al. (2021)					9/10
Menard-kocik and Caine (2021)					9/10
Lundahl et al. (2013)					9/10

Appendix 2. Description of data

No	Authors, Year, Country	Title	Aims of study	Participants, sample size	Methodology	Main findings
1.	Horner, G., Daddona, J., Burke, D.J., Cullinane, J., Skeer, M., Wurcel, A. (2019). U.S. A	“You’re kind of at war with yourself as a nurse”: Perspectives of inpatient nurses on treating people who present with a comorbid opioid use disorder.	Aim was to study the attitudes, perceptions, and training needs of nurses in the inpatient setting when caring for patients who have opioid use disorder.	N= 22 (Females = 16; males =6); age= 18 - 64	Qualitative method (one-on-one interviews with semi-structured questions).	Participants reported the presence of stigma against patients, feeling of burnout, emotional struggle in pain management, need for additional education on substance abuse treatment
2.	Molina-Mula, J., González-Trujillo, A., Margarita Simonet-Bennassar, M. (2018). Spain	Emergency and Mental Health Nurses’ Perceptions and Attitudes towards Alcoholics.	to assess nurses’ attitudes and perceptions in emergency and mental health services towards alcoholic patients	N= 167 (females = 123; males =44)	Cross-observational study using questionnaire. Applied Seaman-Man-nello scale for measuring nurses’ perception and attitude to alcohol use.	76% of participants agreed that alcoholics should be treated like other patients with regular diseases. Less than half of the participants are either uncomfortable or neutral in

						treating alcoholics.
3.	Lundahl, M., Olovsson, K.H., Ronngren, Y., Norbergh, K. (2013). Sweden	Nurse's perspectives on care provided for patients with gamma-hydroxybutyric acid and gamma-butyrolactone abuse.	To describe registered nurses' views and experiences providing care for gamma-hydroxybutyric acid and gamma-butyrolactone abuse inpatients in a psychiatric unit.	N= 15 (females = 11; males =4); Age =28 - 58	Qualitative studies with semi-structured one-on-one interview.	Participants reported feelings of frustration, anxiety due to inability to achieve desired outcomes. Also, the manner of building therapeutic relationship, taking safety measures due to fear of violence, self-motivation to remain committed to caring, and improving knowledge and skills about substance abuse care.
4.	Hakala, T., Kylma, J., Makel, K., Noppari, E., Koivunen, M. (2021). Finland	Caring for alcohol-intoxicated patients in an emergency department from the nurses' point of view –	to describe nurses' skills to care for and attitudes towards the care of patients with alcohol	N= 20, n=17 (with 1 – more than 10 years' work experience)	Qualitative research with essay-style written opinions and experiences.	Participants reported showing lack of commitment to care due to pa-

focus on attitudes and skills. intoxication in emergency departments (EDs) patients' attitude to change, and nurses' personal beliefs. Commitment to care improved when nurses have a positive perception about intoxicated patients and believed in their ability to change.

5. Menard-Kocik, J., and Caine, V. (2021). Canada
 Obstetrical Nurses' Perspectives of Pregnant women who use Illicit Substances and Their Provision of Care: A Thematic Analysis.
 to explore obstetrical nurses' perspectives toward caring for pregnant women who use illicit substances in a large inner-city hospital in Western Canada
 N=18 (years of experience = (0 – more than 30yrs)
 Qualitative design with semi-structured interview method.
 Participants described the challenges with providing care to substance abuse pregnant women. Also, they reported the presence of stigma and discrimination against such patients, while acknowledging the importance of a

						non-judgmental attitude.
6.	Chang, Y., and Yang, M. (2013). Taiwan	Nurses' Attitudes Toward Clients with Substance Use Problems.	to examine nurses' attitudes and factors associated with nurses' attitudes toward clients with substance use problems	N= 492 (pre-dominantly females). Age = 21 – 50 years. Work experience = 3months – 27years.	Quantitative studies (cross-sectional design with questionnaires)	Participants reported having moderately positive attitudes. Training in substance abuse care, length of work experience with substance abuse patients, and age influenced nurses' attitudes.
7.	Chu, C., and Galang, A. (2013). Canada	Hospital Nurses' Attitudes toward Patients with a History of Illicit Drug Use.	To describe the attitudes of RNs toward patients with illicit drug use in a large urban general internal medicine unit and to identify the factors contributing to these attitudes	N= 73 (90% of participants = women). Years of experience = 0- 36years.	Quantitative research with survey method.	Majority of the participants reported having a neutral attitude which stemmed from frequent contact with substance abuse patients. Inadequate academic knowledge of substance abuse care

was cited as a challenge to providing effective care.