



# Addressing the opioid epidemic

Funding and access to care are crucial to solving substance use disorders.

**THE WORD** *crisis* can be defined in several ways. But when looking at the extent of opioid dependency, misuse, and abuse in the United States, the definition that seems most relevant at this time is “an unstable or crucial time or state of affairs in which a decisive change is impending—especially one with a distinct possibility of a highly undesirable outcome.”

Right now, we’re at a crossroads. Many federal lawmakers on both sides of the aisle recognize the importance of addressing opioid use disorder and illicit use. But to effectively tackle monumental issues like the opioid epidemic, programs and services designed to address it must be funded sufficiently and be accessible to all those in need. Recent federal legislation has made more funds available to states to help with prevention and the tracking of overdoses, but it’s a tiny step toward the greater investment that’s needed.

As RNs and patient advocates, we witness the effects of opioid use disorder, deaths, and heartache. We know that any pared-down approach, including Medicaid cuts that restrict access to health care for millions, will lead to that “undesirable outcome.”

## Interdisciplinary recommendations

The Centers for Disease Control and Prevention reports that every day 91 Americans die from opioid overdoses and more than 1,000 people are treated in emergency departments for misusing prescription opioids. As many as one in four people receiving prescription opioids in primary care settings to address non-cancer-associated, long-term pain struggles with addiction.

A report from the National Academies of Sciences, Engineering, and Medicine concluded that “years of sustained and coordinated effort will be required to contain the current opioid epidemic and stem its harmful effects on society.” Developed by an interdisciplinary committee that included our nurse colleague Linda Burnes Bolton, DrPH, RN, FAAN, the report includes the Academy’s recommendation that actions be taken to expand access to opioid use disorder treatment. Among other strategies, the Academy also recommended investing in research to better under-

stand the nature of pain and to develop nonaddictive alternatives.

## Nursing action

As part of a larger battle over access to affordable health care, I joined other nurses and U.S. Senators at a June press conference on Capitol Hill to speak out about protecting the essential health benefits guaranteed under the Affordable Care Act. I highlighted, among other items, ANA’s call for preserving affordable, quality insurance coverage for inpatient and outpatient care to evaluate, diagnose, and treat mental health conditions or substance use disorders.

In fall 2015, ANA and more than 40 other stakeholders committed to a 2-year national effort to educate advanced practice registered nurses and other healthcare professionals about opioids and safe prescribing practices. At a 2016 ANA discussion session on opioid dependence and overdoses, nurses, not surprisingly, emphasized the importance of prevention and erasing the stigma of addiction and mental illness.

And because we truly believe that having healthy nurses is instrumental to having a healthy nation, we also looked within. ANA recently endorsed a joint position statement by the International Nurses Society on Addictions and the Emergency Nurses Association that, in part, calls for adopting alternative-to-discipline approaches to treating nurses and nursing students with substance use disorders. Further, ANA’s Substance Use Disorder in Nursing Workgroup, which includes members from our state and affiliated specialty nursing organizations, helps update our substance use disorder policy and resources.

## Advocating for recovery

Finally, I want to specifically speak to recovery, which is one of this month’s focused topics for ANA’s Year of the Healthy Nurse. We all must continue to advocate for a well-funded, comprehensive approach to the opioid epidemic to ensure people from all socioeconomic and geographic backgrounds have equal access to quality, affordable preventive care and treatment. That’s how individuals will recover, and that’s how our nation will recover from this crisis.



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