

Substance Use Disorder: A Gap in Nursing Education

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The 2024 Gallup Poll identified the nursing profession as the most honest and ethical profession for the 23rd year in a row. Including nursing, 23 professions were ranked according to Americans' perceptions about each profession's honesty and ethics. The poll results indicated that three out of four Americans ranked nurses as number one of the 23 professions including doctors, police officers, clergy, and grade-school teachers (Saad, 2025). The ethical aspect of nurses' behaviors is further enhanced by their code of ethics, which is a guide that governs professional and ethical behaviors in interactions with patients (ANA, 2025).

The nursing profession adopted the American Nurses Association (ANA) Code of Ethics and recognizes the value of the ten provisions within the code, which outline ethical care of patients and communities. The first provision states, "The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person" (ANA, 2025 para 1). Unfortunately, patients with substance use disorder (SUD) believe they do not receive the same care as medical patients who do not have a SUD (Garpenhag & Dahlman, 2021). This population of patients faces stigma and bias from healthcare workers, including nurses. This behavior is a direct contraindication to the ANA code of ethics.

Nurses and nursing students both report that they do not feel knowledgeable about caring for patients with SUD (Albayati et al., 2021). Nurse educators believe they do not have the knowledge or skills to teach SUD effectively. Nursing education provides limited learning opportunities for students related to SUD (Crook et al., 2024; Dion & Griggs, 2021). The literature over the last 50 years has documented the lack of adequate SUD content in nursing curricula (Farrell, 2020). Adequate education about SUD as a treatable disease, with a focus on stigma, bias, and the negative health outcomes this population experiences, would be an important

first step. When patients and nurses develop a positive, trusting relationship, effective medical treatment and improved health outcomes will occur (Dion & Griggs, 2021).

According to the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5-TR), substance use disorder is the repeated use of drugs or alcohol that causes negative consequences like physical dependence, social problems, and health problems (Hartney, 2024). Preliminary data released from the Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics shows there were 107,543 overdose deaths in the United States during 2023 (CDC, 2024). There were 527 deaths related to overdose in Delaware in 2023 (Delaware Division of Forensics, 2024). These numbers are staggering and do not include patients who live with the disease and experience comorbidities that require hospitalization. These comorbidities include chronic diseases such as hypertension, chronic obstructive pulmonary disease, diabetes, and infections. Another important aspect of this disease is the effect it has on families. SUD is a health crisis that could be improved by nurses who have a better understanding about the treatment of SUD and the bias and stigma attached to it.

The Delaware Board of Nursing (DEBON) has identified the significance of this gap in knowledge and has mandated additional SUD education. Consequently, registered nurses in Delaware are required to complete three SUD continuing education (CE) credits of the required 30 every two years (Division of Professional Regulation, 2022; Zickafoose, 2018). Nurses have a duty to provide equitable and knowledgeable care to all patients, including those with SUD. When nurses are knowledgeable about the indications of SUD, the pathophysiology, and can identify their own biases, they are likely to expand their knowledge to include the understanding that SUD is a disease and is treatable (Zickafoose, 2018).

Implementing sufficient time about the topic of SUD in nursing curricula would better support the code of ethics that nurses promised to uphold. Moreover, the identified gap in nursing education may add to the number of instances of stigma and bias that currently exist in healthcare settings. Nurses who have not identified their own bias and prejudice toward this population lack the necessary compassion to provide the needed care for this marginalized population. Patients with SUD are often reluctant to share information about their condition due to fear of bias and discrimination from healthcare professionals, including nurses (Barenie et al., 2023). As a result, patients with SUD continue to experience negative health outcomes (Crook et al., 2024).

Unfortunately, patients with SUD continue to face discrimination and shame in general, and the stigma remains when they are admitted to a hospital for medical treatment. Stigma directed toward patients with SUD by healthcare staff and providers affects the physical and mental health of this marginalized population (Dion & Griggs, 2021). Additionally, patients who experience SUD stigma during hospitalization are likely to leave the hospital before their medical treatment is complete (Connery, 2024). This leads to unnecessary readmissions within 30 days and increased morbidity. SUD is a treatable disease that needs additional awareness and understanding (Cleveland Clinic, 2024). Providing nurses with education about first-person language could begin the facilitation of a stigma-reduced environment from the first interaction with the patient (ASAM, n.d.). First-person language puts the patient first rather than their disease. The language "reflects an accurate, science-based understanding of SUD" (ASAM, n.d., p.1). This language should be utilized when speaking with patients, their family, and healthcare colleagues.

Nurse educators have the duty to provide comprehensive education about SUD. This

education should include not only SUD content threaded throughout the curriculum but also real-life experiences during clinical rotations. Additionally, nurse educators should seek out learning opportunities to improve their own SUD knowledge and skills. Nursing students have the duty to effectively learn about the multifaceted care of patients with SUD and explore their own bias about this population. Practicing nurses have the duty to obtain SUD education that will improve the care they provide for this population. This enormous public health issue affects patients' health outcomes and quality of life. Nurses are present in nearly all healthcare settings. If nurses obtained the knowledge and skills necessary to care effectively for patients with SUD, they could make a significant difference in the health outcomes of this at-risk population.

The following link is a valuable resource provided by the American Society of Addiction Medicine (ASAM) to help with the understanding of first-person language, stigma, and bias, along with a healthy understanding of terms to add and to remove from current vocabulary related to patients with SUD. Please click on the link and begin the journey of SUD learning. This population of patients needs nurses who care to learn about their treatable disease and how to improve their health outcomes. Nurses can be effective in caring for patients with SUD. https://www.asam.org/docs/default-source/default-document-library/nidamed_wordsmatter3_508.pdf?sfvrsn=5cf550c2_2 ■

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