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The prevalence of substance abuse within the nursing profession

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The prevalence of substance abuse within the nursing profession

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Comments

The purpose of this thesis is to gain a holistic view of the prevalence of substance abuse within the nursing profession. This thesis is based on an extensive review of the literature which covers the history and prevalence of substance abuse, contributing risk factors to substance abuse, impacts on patient care, corrective actions, and preventive measures. The prevalence of substance abuse among nurses was first documented in the 1980s, with the current number of nurses with substance abuse ranging from 5-20% (Luurila et al., 2022). Multiple electronic databases were searched for literature published between 1982-2022. Findings indicated risk factors for nurse substance abuse to include the following: family history and genetic predisposition, history or current diagnosis of mental illness, occupational stressors such as exhaustive work conditions and working in high-stress nursing specialties, and direct, convenient access to controlled substances. Quality of care can be negatively impacted when a nurse is under the influence of a substance and patient outcomes can be jeopardized through neglectful practice and unintended errors. This review identified methods to mitigate substance abuse among nurses which include policy from healthcare administration and licensing bodies, effective coping strategies, and addressing modifiable risk factors.

THE PREVALENCE OF SUBSTANCE ABUSE WITHIN THE NURSING PROFESSION

By

Kaylie Paige Cox

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with Departmental Honors in Nursing

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Table of Contents

Abstract	4
Literature Selection and Methods	6
Literature Review Framework	6
Prevalence of Substance Abuse	6
Contributing Factors	8
Family History.....	8
Mental Health.....	9
Occupational Considerations.....	10
<i>Workplace Conditions</i>	<i>10</i>
<i>Nursing Specialty</i>	<i>11</i>
Access.....	12
Patient Care.....	12
Corrective Action.....	13
Early Correction Methods	14
Current Correction Methods.....	14
Preventative Measures	16
Discussion.....	17
Limitations	19
Conclusion	19

References..... 21

Abstract

The purpose of this thesis is to gain a holistic view of the prevalence of substance abuse within the nursing profession. This thesis is based on an extensive review of the literature which covers the history and prevalence of substance abuse, contributing risk factors to substance abuse, impacts on patient care, corrective actions, and preventive measures. The prevalence of substance abuse among nurses was first documented in the 1980s, with the current number of nurses with substance abuse ranging from 5-20% (Luurila et al., 2022). Multiple electronic databases were searched for literature published between 1982-2022. Findings indicated risk factors for nurse substance abuse to include the following: family history and genetic predisposition, history or current diagnosis of mental illness, occupational stressors such as exhaustive work conditions and working in high-stress nursing specialties, and direct, convenient access to controlled substances. Quality of care can be negatively impacted when a nurse is under the influence of a substance and patient outcomes can be jeopardized through neglectful practice and unintended errors. This review identified methods to mitigate substance abuse among nurses which include policy from healthcare administration and licensing bodies, effective coping strategies, and addressing modifiable risk factors.

Keywords: nurses, substance abuse, illicit drug use, nursing profession, substance abuse disorder, prevalence

The Prevalence of Substance Abuse Within the Nursing Profession

The topic of substance abuse resonates with many people around the globe because of one's exposure to the topic either through media, a friend or family member struggling with addiction, or their own personal battle. The substances abused generally consist of alcohol, illicit drugs, or even prescribed medications that are misused. In 2019, the percent of individuals over 12-years of age, in the United States, with any illicit drug use was 13% (Centers for Disease Control and Prevention [CDC], 2022). Furthermore, in a survey conducted by the CDC (2020), it was found that one in 10 participants reported either starting or increasing substance use during the COVID-19 pandemic. Luurila et al. (2022) reported that around 5%-20% of nurses are suffering from a substance abuse disorder. It is becoming increasingly difficult to ignore the substance abuse epidemic and how it affects the daily lives of people around the world, and that includes registered nurses.

When working in the healthcare setting, healthcare providers are exposed to different patient populations with various diseases and disorders. It has been reported that on average, patients with substance use disorders have a hospitalization rate ranging from 5%-31% (Armoon et al., 2021), making it quite likely that a healthcare provider will have a patient that experiences a substance abuse disorder. Nurses may have to assist a patient going through alcohol withdrawal or may have to provide emergency interventions to a patient suffering from an opioid overdose. Nurses are vital in providing education and guidance for those with substance abuse disorders. In the role of a caregiver, such as a nurse, it can be difficult to place one's self into the other person's position and it may seem impossible to see one's self going through the same situation. The reality, however, anyone can develop a substance abuse disorder, including healthcare professionals such as nurses.

The purpose of this thesis is to gain a holistic view of the prevalence of substance abuse within the nursing profession. This thesis is based on an extensive review of the literature which covers the history and prevalence of substance abuse, contributing risk factors to substance abuse, impacts on patient care, corrective actions, and preventive measures.

Literature Selection and Methods

All literature was found through electronic database searches using Ovid, ProQuest, Wolters Kluwer, Elsevier, and sources provided by Eastern Michigan University's online library access and the Centers for Disease Control and Prevention. Peer-reviewed studies and scholarly articles were targeted for this literature review. When researching the topic, it was found that information on the history of substance abuse within the nursing profession was limited.

Sources with a publication date between the years 1982-2022 were selected. This period contains the most activity and research related to substance abuse within nursing and allows for history of the subject to be reviewed. The key search terms used were prevalence of substance abuse in nurses, substance abuse in nursing, substance abuse prevention, and nurse discipline for substance abuse. Sources ranging from literature reviews, quantitative studies, qualitative studies, and mixed methods studies were used.

Literature Review Framework

A thematic framework was used to organize the contents of this literature review. This format allows for the findings of this review to be organized into patterns, which are displayed as different sections within this paper.

Prevalence of Substance Abuse

Before exploring the details of substance abuse within the nursing profession and its impacts on both patients and nurses, it is important to look at the prevalence of nurses who abuse

substances within the nursing profession. This information gives a bigger picture in the occurrence of substance abuse disorders among nursing and can help with comparison to the general population, as well as demonstrate the seriousness of this condition within nursing.

Historical Background

After conducting a literary search related to substance abuse among nurses, it was found that the report of addiction among nurses first began to appear around the 1800-1900s, and the existence of addiction among nurses has been recognized for over 100 years (Heise, 2003). According to an article from Occupational Health Nursing (Finley, 1982), experts during that time estimated that the number of chemically impaired nurses was at around 40,000 and in a survey of the State Boards of Nursing, 35 of the 37 participating boards stated that drug addiction was an increasingly serious issue among the nursing community. Finley also noted that it was estimated that during this time alcohol was the most abused compared to other substances, by a ratio of 18:1. In comparison, in 2008 it was estimated that 5% of registered nurses abused alcohol and 3% depended on the use of other drugs (Epstein et al., 2010). Furthermore, in 2009 the number of employed nurses identified with substance abuse problems in the United States and its territories was 17,085 and it was also reported that, on average, 128 nurses per nursing board each year were identified and potentially disciplined for alcohol and other substance abuse problems (Monroe et al., 2013).

Substance abuse among nurses has grown since the 1980s, much like how substance abuse for the general population has increased over time. A study conducted by Kunyk (2013) found that the prevalence of substance abuse among nurses was similar to that of the general population. Smith (2013) noted that approximately 8% of nurses struggle with substance abuse which can affect their ability to practice patient care safely. In 2016, it was found that 348 nurses

were actively participating in programs for substance-abuse-related offenses in the Texas Peer Assistance Program for Nurses (Mumba et al., 2019). This represents only the number of participants in one program, which implies that this number could be much higher when adding all the programs throughout the country as well as those nurses who are suffering from substance abuse disorders that have not yet been reported or have yet entered into rehabilitation programs.

As previously noted, 5%-20% of nurses are suffering from a substance abuse disorder (Luurila et al., 2022). When looking at the type of drug use by nurses with substance abuse disorders, it was found that prescription drug misuse was higher among nurses compared to the general population, and that the primary substances abused were opioids. It was found that alcohol was the second most abused substance, followed by stimulants, opioids, and cannabis being the least abused substance (Salani et al., 2022).

Contributing Factors

Individuals afflicted with substance abuse do not just develop this habit overnight. When it comes to abusing any substance, there is a myriad of factors that contribute to the development of addiction and substance abuse disorders. There are both biological and modifiable risk factors as well as lifestyle choices that can put someone at an increased risk of substance abuse. Nurses have different aspects of both their personal lives and their career choice that can increase their risk for substance abuse. The following section highlights contributing factors such as family history, mental health, occupational stressors, and access to opioids.

Family History

Genetics play a role in one's growth and development, and each individual inherits different traits from their biological parents. Although addiction and substance abuse may appear to be a learned behavior, this is simply not the case. There have been many studies around the

heritability of addiction, and it has been shown that there are significant genetic influences related to drug addiction. Using both classic genetic approaches as well as molecular approaches of studying specific genes, studies have shown that addiction is heritable, and that there are specific addiction-related behaviors that are associated with specific genes that are passed down through biological parents (Wang et al., 2019). When looking at twin studies that explore the heritability of substance abuse, it was found that substance abuse has a heritability of approximately 60%-80% (Sommers, 2018). Therefore, nurses who have biological family members with a history of substance abuse and addiction may be more susceptible to addiction-related behaviors. Being genetically prone to addiction-related behaviors can contribute to a nurse developing an addiction when using legal substances such as alcohol, or contribute to a nurses desire to start using substances compared to those without a family history.

Mental Health

Mental health can affect someone just as much as physical health, and it has a key role in a person's coping abilities and how they manage life stressors. The number of individuals diagnosed with mental illness is on the rise. Having a mental health illness can negatively affect one's ability to handle everyday life, which may increase one's risk for developing unhealthy coping mechanisms to try and manage emotions. It has been estimated that 20.6% of adults ages 18 and older experience some form of mental illness, with 5.2% experiencing serious mental illness that interfered or limited one or more major life activities. (Substance Abuse and Mental Health Services Administration, 2020). In addition, it was reported that individuals with mental illness had an increase of substance use compared to those who do not have mental illnesses. According to the Substance Abuse and Mental Health Services Administration (2020), it was estimated that 42.4% of people who used illicit drugs also struggled with mental illness, while

only 16.6% of people who used illicit drugs did not have a diagnosed mental illness. The issue expands past illicit drugs use as well. When looking at other substances such as marijuana, opioids, excessive alcohol consumption, and cigarette use, the percentage of individuals with a diagnosed mental illness were using these substances more than those without mental illness (Substance Abuse and Mental Health Services Administration, 2020).

Nurses have been found to be more likely to have mental health issues than other occupations. Previous studies have suggested that nurses have high rates of anxiety and depression compared to the public in general, and it has been reported that 50% of nurses experience burnout (Handzel, 2022). While burnout may not be considered a mental illness, it can increase a nurse's risk for developing depression, anxiety, PTSD, suicidal ideation and suicide (Handzel, 2022). Because nurses have a higher prevalence of mental health issues, they may be at higher risk of developing substance abuse disorders. Studies have found that people with a mental health disorder such as anxiety, depression, and PTSD may use drugs or alcohol as a form of self-medication, and that the effects of these mental illnesses may enhance the rewarding effects of substances in the brain, making it more likely someone with mental illness to continue using substances compared to those without mental illness (National Institute of Mental Health, 2021).

Occupational Considerations

Workplace Conditions

Nurses have a unique position where they are exposed to difficult situations and working conditions, which can lead to various stressors. It is common practice that nurses are required to work 12-hour shifts, sometimes rotating between day and night shift. The shortage of nurses in the workforce has further exaggerated workload factors such as high nurse-patient ratios, use of

point-of-care technologies, and stressful working conditions (Phillips, 2020). These conditions could lead to feeling burnt out and exhausted, leading to nurses developing a high level of stress. Nurses are also exposed to a variety of patient populations dealing with severe complications, with some nurses witnessing patients affected by terminal illness, trauma, and/or violence. It has been found that those nurses who are frequently exposed to high stress situations such as caring for terminally ill patients or emergencies, have made nurses more exposed to stress compared to others (Biganeh et al, 2021). This high level of stress that nurses experience can put nurses at an increased risk of turning to substances to relieve stress, making nurses more susceptible to substance abuse. There is a significant association between stress and the motivation to abuse addictive substances, which can make individuals more likely to develop addictive behaviors and drug abuse (Sinha, 2008).

Nursing Specialty

Nurses have the flexibility to work in a variety of patient-care settings, ranging from inpatient acute care hospital settings to home health care. Each practice setting and specialty area presents perks and challenges, and some of these practice settings can ultimately lead to certain specialties being considered more difficult than others. It was found that nurses who worked in jobs with high levels of physical or psychological strain were 50-60% more likely to use marijuana, cocaine, and psychoactive medications than nurses in lower strain jobs (Ross et al., 2017). In a recent study, it was found that nurse who work in home health, long-term care, medical/surgical, and hospice nursing were found to have higher instances of substance abuse than those in different specialties (Mumba & Kraemer, 2019). With research noting how nurses practicing in stressful specialty areas being at higher risk for developing substance abuse, awareness, education, and mitigation strategies are imperative to prevention.

Access

Nurses are responsible to administer medications as ordered, therefore, nurses independently retrieve controlled substances such as narcotics and opioids. This increases a nurse's access to opioids compared to other healthcare providers. It has been found that the level of nurses' workplace access to drugs correlates with their prevalence of abusing the drugs that they have access to (Ross et al., 2017). While the general population has a high incidence of alcohol substance abuse, nurses are found to have a higher incidence of dependence on controlled substance due to their increased access towards these substances (National Council of State Boards of Nursing [NCSBN], 2018). Since controlled substances are only legally obtained through a valid prescription, nurses with dependence on opioids may rely on other mechanisms to obtain such substances. When nurses who use substances that they are unable to easily obtain on their own, many turn to getting them in the workplace, leading to narcotic discrepancies (NCSBN, 2018).

Patient Care

Nurses are one of the professions that directly interacts with patients, and they are expected to provide effective, quality care to individuals to help improve their overall health. Nurses must be alert and be able to make clinical decisions quickly, as a patient's condition can change at any time. Critical thinking and sound clinical judgement paired with empathy and compassion are necessary to be able to provide care to patients.

Unfortunately, when an individual is intoxicated or inebriated by alcohol or other illicit drugs, their judgement can become severely impaired. When an individual consumes any type of drug, those drugs interfere with the way neurons in the brain send, receive, and process signals via neurotransmitters, causing abnormal messages to be sent between the neurons at an altered

pace (U.S. Department of Health and Human Services, 2022). These altered messages are what lead to the many different effects of substances, which ultimately impair judgement and one's ability to make clear, rational decisions. Therefore, it is suggested that when anyone is under the influence of drugs, they do not drive or go to work as performance is altered.

When nurses report to the workplace under the influence, it can cause a great deal of complications. Intoxication impairs judgement, which may impact a nurse's ability to think critically and make sound clinical-decisions with a clear mind, such as experienced with sobriety. According to the Massachusetts Nurses Association (MNA, 2011), a nurse under the influence of substance exhibits poor judgement, has difficulty completing their job responsibilities, can exhibit forgetfulness or drowsiness, and has a higher incidence of drug discrepancy and reports of poor pain relief by patients assigned to them. This can lead to a hazardous situation for the patient and may put them at risk of further complications or even death. Nurses under the influence of illicit substance contribute to unsafe patient care environments and create patient safety concerns such as medication errors, increased risk for hospital acquired infections, and reduced patient satisfaction.

Corrective Action

Registered nurses must abide by licensing rules and regulations within their state of practice, which include not practicing while under the influence of illicit substances, especially those substances which are illegal. Act 368 of the Michigan Public Health Code (1978) states that obtaining, possessing, or attempting to obtain or possess a controlled substance or drug without lawful authority; or selling, prescribing, giving away, or administering drugs for other than lawful diagnostic or therapeutic purposes is considered prohibited activity which can lead to corrective action. The Michigan Public Health Code (1978) also states that a violation of

general duty that consists of any conduct, practice, or condition that impairs or may impair the ability to safely engage in practice may lead to corrective action. It has been found that around 2% of nurses are disciplined annually, with substance abuse disorder being one of the main reasons for disciplinary action towards nurses (Luurila et al., 2022). Each state board has a unique system for complaints to be filed against registered nurses. This system allows for the reporting of substance abuse, which may ultimately lead to nurses who are reported going through the disciplinary process. Disciplinary action against nurses who have abused substance has evolved over time. In the next section, both early disciplinary methods and modern-day disciplinary methods are explored.

Early Correction Methods

Early in history, there was a stricter approach to dealing with drug and substance abuse within the nursing profession. In some instances, nurses who had a substance use disorder may have been arrested, charged with a crime, and convicted of both state and/or federal violations (Brent, 2018). Once found guilty, nurses would have to face the board of nursing within their licensing state. Furthermore, Brent noted how during the 20th century, if a nurse was found to be abusing substances they would be found of violating the state nurse practice act, which would result in swift removal from practice. A nurse's license would be immediately suspended without any offering of treatment for their condition (Brent, 2018). In addition, Brent reports that without any focus on treatment for their substance abuse disorder, nurses were not able to petition the board for a license renewal, ultimately removing them from the practice indefinitely.

Current Correction Methods

While nurses may still be convicted criminally and lose their license for substance abuse in the current day, there has been a shift in how substance abuse in nurses is managed. There is

now more of a focus on treatment of abuse rather than purely punishment. Nurses experiencing substance abuse may be eligible to participate in alternatives to discipline, otherwise known as Alternative Disciplinary Principles (ADPs) or Alternative Treatment Principles (ATPs). These ADPs/ATPs would require the nurse to seek treatment for their substance abuse while still allowing them the chance to keep their nursing license (Brent, 2018). The benefit of this shift in treatment rather than punishment not only allows for nurses to improve their health and remain within the profession, but it also may not affect their future employment. When nurses undergo a disciplinary action, it is required that disciplinary action is reported to the National Practitioner Data Bank (NPDB), where the disciplinary action will be viewable to the public. Alternatives to discipline programs are confidential and will not be disclosed to anyone, which allows for the substance abuse to remain private rather than negatively affecting one's career (Shuster, 2021).

Substance abuse disorder and addiction are both diseases, and those suffering from these conditions have the best chance of improving by receiving treatment. Because the previous correction methods mainly focused on legal action and punishment of nurses who abused substances, nurses were not given the proper tools for substance use cessation. The previous punitive approach may have made nurses who are currently struggling with substance abuse afraid to be honest about their struggles due to fear of losing their license. With the current approach revolving more around rehabilitation, it allows for nurses struggling with substance abuse to receive proper help they need. While some nurses may still have their license revoked and receive punishment depending on individual circumstances, the focus today is to treat the substance abuse, which helps improve the overall health and wellbeing of the nurse. This focus on treatment may encourage nurses who are struggling silently to reach out for help since they no

longer need to fear that they will lose their license outright and have healthy alternatives available so that they can continue their nursing career.

Preventative Measures

While focus on treatment of substance abuse for nurses is important, putting preventative measures in place to discourage nurses from developing substance abuse disorders is also necessary. There is no one way to prevent substance abuse and effective prevention strategies can differ depending on age, location, occupation, as well as a myriad of other factors. There are both universal and selective prevention interventions that can assist in prevention of the development of substance abuse disorders. Universal prevention interventions work to prevent health issues across all populations, while specific interventions are designed for specific populations and communities (U.S Department of Health & Human Services, Office of the Surgeon General, 2016).

One main strategy for preventing substance abuse is by implementing different policies that would reduce the availability of substances (U.S. Department of Health & Human Services, Office of the Surgeon General, 2016). These already exist with age limits for substances such as alcohol and marijuana, and the outright ban of harmful substances such as heroin and other non-prescription opioids.

Another way to prevent substance abuse is to reduce any risk factors that increases a person's risk for developing substance abuse disorders. While nurses with family history of addiction cannot change their genetic predisposition, nurses can work towards developing positive coping strategies to deal with stress. Some common coping strategies for managing stress are: problem-focused coping, emotional-focused coping, and wellness-focused coping (Ponte, 2020). Problem-focused coping is when a person directly confronts a stressor and tries to

find a solution to that stressor while emotional-focused coping has a focus around regulating reactions towards stressors (Ponte, 2020). Both are essential for nurses. Wellness-focused coping has eight dimensions of focus: physical, intellectual, financial, environmental, social, occupational, and emotional, and the goal of wellness-focused coping is to perform acts of wellness related to these different dimensions (Ponte, 2022). For example, in the physical dimension exercise is a tool used to relieve stress. Along with this, it's important for nurse leaders and healthcare administration to assist in creating policies that work towards providing proper staffing and implement strategies to reduce nurse burnout in order to further reduce stress within the workplace. Understaffing in the nursing profession exacerbates emotional, physical, and personal stressors in the workplace, and by making efforts to ensure proper staffing, these stressors can be alleviated to some extent (Ohio Nurses Association, 2017). Thus, reduction in stress and development of coping behaviors can assist with preventing nurses from turning to substances. Nurses with mental illness can also seek treatment for their mental health, which may decrease their chance of using substances to cope with their mental health issues.

Discussion

Substance misuse and substance abuse disorders have been an issue for generations, and prevalence has only increased among the general population over time. The first documentation of substance abuse among nurses was documented within the 1980s with 5-20% of nurses experiencing substance abuse (Luurila et al., 2022). This focus on substance abuse prevalence among nurses starting within the 1980s and not during a different time may be due to the "War on Drugs" in President Nixon's era, making the general public more aware of substance abuse and creating the desire to explore substance abuse further, both in the general population and within specific professions. Genetic predisposition from biological family members can affect

anyone, making nurses with family history of addiction at increased risk for developing addiction and to display addiction-related behaviors. Nurses suffering from mental health illness exhibited more substance use than those without mental health illness, implying a correlation between mental illness and substance abuse. Occupational stressors such as nursing specialty, and a variety of nursing workplace conditions contribute to nurses developing high levels of stress, increasing their risk of substance use. With easy access to controlled substances, nurses could begin abusing drugs and develop substance abuse disorders more readily. Drug impairment can lead to dangerous situations in the healthcare setting, causing patients to be put in harm's way. In the past, nurses were mainly punished for being caught abusing substances, but the narrative has since shifted to promoting treatment programs to assist nurses struggling with substance abuse and/or addiction. By using a variety of preventative strategies, the number of nurses who develop substance abuse disorders can be reduced.

Overall, substance abuse among nurses is a serious issue. It is important that this issue was highlighted in order to reduce the prevalence of substance abuse among nurses by opening discussions for prevention, treatment, and destigmatizing substance abuse in the profession. Acknowledgement, coupled with education about different risk factors, can make nurses and other healthcare professionals more aware of the development of substance abuse disorders and how to manage if they begin to misuse substances later on.

Nurses regularly provide treatment for others suffering from substance abuse with compassion and understanding. Likewise, nurses suffering with substance abuse should be treated similarly to those outside of nursing who are struggling with the same issue. Treatment and prevention programs, while now gaining more focus for assisting nurses with substance abuse disorders, are still not where they need to be. It is important that nurses with substance

abuse are recognized and provided resources for treatment and rehabilitation, without disrespect and fear of punishment. The acknowledgement, prevention, and treatment of substance abuse among nurses can greatly impact the nursing profession in a positive way, and it can lead to an improved healthcare environment for both patients and the healthcare team.

Limitations

This literature review has potential limitations. There is a lack of available, reliable data and statistics about the prevalence of substance abuse dating before the year 2010. This could be due to the lack of reporting of nurses with substance abuse in the past or there wasn't a perceived need to record this data previously. There is also a lack of current research specifically revolving around nurses as a population affected by substance abuse. This means that the research currently available may be outdated as substance abuse among nurses has changed over time. In many sources used for this literature review, only nurses within the United States were considered, which limits the amount of data that could potentially be considered when compared to data in other countries.

Conclusion

Substance abuse is an unfortunate disorder that continues to affect many nurses during their career. There have been documented cases of nurses with substance abuse for decades and those numbers continue to rise. It is important to be able to recognize contributing factors that impact whether or not a nurse decides to turn to substances and what puts them at increased risk. Being aware of job stressors, mental health status, and family history can help nurses recognize whether they're at risk of developing substance abuse.

Patient care is a top priority in the role of a nurse. When nurses are under the influence of substances, the standard of care for their patients can drastically diminish due to being impaired,

putting both the lives of their patients and their license to practice nursing at risk. Substance abuse is a serious breach of nursing license regulations and can lead to corrective action. In the past, most corrective action has been focused on punishment rather than rehabilitation, but that has changed and evolved. By now focusing on rehabilitation, it allows for nurses to receive assistance for substance abuse rather than merely facing punitive consequences. It is important to work towards efforts that limit the access to illicit substances and work with nurses to change modifiable risk factors to prevent them from developing substance abuse disorders. By focusing on these areas, we can reduce the number of nurses turning to substances within their profession.

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