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Emergency Nurses' Perceptions and Attitudes Toward Pregnant IV Drug Users

ABSTRACT

Negative attitudes toward socially stigmatized populations can significantly affect the quality of healthcare available to such individuals, yet the mechanisms of bias in this context remain poorly understood. This study aims to build on existing knowledge through an investigation of attitudes and perceptions of emergency nurses toward pregnant IV drug users, a group whose psychological and physical health is severely at risk, particularly in light of the potential bias and intense scrutiny they face. The substantial rise in neonatal abstinence syndrome cases within the past decade demonstrates that exploratory research related to drug use among pregnant persons is vital and timely. This project will use an electronic survey to explore how North Carolina emergency nurses view their pregnant patients who are using IV drugs and how their perceptions may affect treatment. A non-probability, purposive sampling strategy will be used to identify survey respondents. The primary objective of the research is to explore emergency nurses' attitudes and perceptions of pregnant IV drug users as well as their general knowledge of IV drug use and pregnancy, and to assess opportunities for education and intervention. The student researcher hopes to facilitate public discourse on health inequalities affecting pregnant persons using drugs, as well as potentially improve standard protocols practices and implementations for pregnant IV drug use patients.

INTRODUCTION

The United States has experienced a significant escalation of drug-related deaths from prescription opioids, heroin, and fentanyl, as well as an increase in methamphetamine use in the past 30 years. This escalation of drug use includes an increase in pregnant IV drug users. Between 2000 and 2009, opioid use among women who gave birth increased in the United States from 1.19 to 5.63 per 1,000 hospital births per year (Patrick, et al. 2012). The exploration of the lived experience of pregnant IV drug users is imperative to our understanding of the various ways they experience stigma, obstacles, and legal barriers, in this case, within the healthcare sector. For example, antenatal care; pregnant drug users frequently reported a fear of negative or judgemental attitudes from health professionals (NICE, 2010). One explanation for poor pregnancy outcomes was that pregnant women using substances did not seek out or continue contact with maternity services (Lewis, 2011). Therefore, this research is crucial in understanding stigmatizing practices mothers face. The author hypothesizes a need for added training programs and implementation of protocols and guidelines for the identification and management of pregnant IV drug user patients who present in the emergency department.

DESCRIPTION OF RESEARCH

Attitude of an individual consists of three components: cognitive, affective and behavioural, and the Individuals' behaviours are influenced by their feelings (affective) and beliefs (cognitive), which are

influenced by external factors, such as education and experience (Crano and Prislin, 2008). These affective and cognitive beliefs influence perception of patients and implementation of care. It is crucial that this survey explores the attitudes and perceptions of emergency nurses who care for pregnant IV drug users. There are two reasons for the choice to survey emergency nurses: 1) Overdoses require emergency services, and overdose rates have skyrocketed in recent decades, thus, emergency health professionals' perspectives are critical to explore, and 2) When a patient enters a hospital's emergency department it is typically a nurse who determines and prioritizes their care. Therefore, nurses play an important role in the identification and management of a patient's care, which may have longer term implications for their psychological and physical health.

The attitudinal portion of the survey will be modeled after the Substance Abuse Attitude Survey (SAAS) with questions catering to the topics of pregnancy, neonatal care, neonatal abstinence syndrome, Child Protective Services (CPS), and other topics that relate to drug use and pregnancy. Given the focus on exploring feelings, attitudes, and perceptions, a five-point Likert scale is most appropriate for this research. Likert questions will include: personal, professional satisfaction in their work with pregnant drug users, personal attitudes toward pregnant people who use drugs, perceptions of personal characteristics of pregnant IV drug users, lastly, and most importantly, nurses' perception of pregnant drug user's willingness to seek medical help for their substance use. Other questions with these themes may also be added.

Previous research (López et al., 2012) has determined that some health professionals have difficulties identifying drug dependency as an illness. Therefore, assessment of general knowledge of substance use and substance use disorder is important to include in the survey. Previous research (Burlew, 2013) also determined age, sex, ethnicity, and professed religion, and education influenced participants attitudes toward drug users, so the inclusion of demographic questions are key to understanding attitudes toward pregnant drug users.

The survey will be disseminated to three hospitals, two urban and one rural, electronically (more will be surveyed if more participants are needed). SurveyMonkey will be deployed as it is the most convenient way for participants to complete the survey. It should be noted that SurveyMonkey is the platform utilized by Dr. Hewitt in her research, so understanding and use of this survey tool will be used without difficulty.

Sample survey questions are included (See Appendix A).

FEASIBILITY OF RESEARCH

Given the vast disruptions caused by the CO-VID 19 pandemic, it is important the author share steps and clarifications to conduct this research in a way that aligns with the current state of the country and healthcare system.

Due to the burden CO-VID 19 has created for medical professionals, it is important to demonstrate sensitivity to their workload and feelings at this time. The author does not want to further burden health professionals nor conduct research that cannot reach its full data-mining potential. The author has discussed these concerns via phone with emergency department supervisors across North Carolina. The hospitals contacted thus far include:

- Mission Hospital Asheville
- Atrium Health Cabarrus

- Vidant Medical Center

All three emergency department supervisors stated that their triage is not overwhelmed with patients. Each supervisor confirmed that a survey of emergency nurses would not be obtrusive during this time. Furthermore, the Institute for Health Metrics and Evaluations estimated April 13th was the peak number of deaths for North Carolina, so it is reasonable to speculate that emergency departments in North Carolina will not be encumbered with cases in the future. Therefore, the author is hopeful that the CO-VID 19 pandemic will not introduce insurmountable barriers for this research.

I would like to conclude with a more personal note:

We are currently witnessing a health crisis across the country. It is clear many people are struggling. As someone who has worked with people who use drugs, I can attest that people who use IV drugs are particularly suffering as social/health services are limited during this time. It is absolutely imperative that healthcare equity research is prioritized, as this pandemic will create undue pressure on the United States economy and healthcare system for the unforeseeable future. The lives of people who use drugs and pregnant individuals who use drugs are only worsening. It is our duty to provide as much support possible to mitigate these issues and research is an important step in that process.

TIME PERIOD

May-June: Survey preparation

June-August: Survey dissemination

August-December: Analysis of data.

January-May 2021: UNC Asheville Undergraduate Research Symposium Spring 2021 presentation and submissions for publication.

BUDGET WITH JUSTIFICATION

The author is requesting the maximum stipend of \$1500 to assist with basic living expenses during Summer 2020.

ADDITIONAL FUNDING

The author is not seeking additional funding for this research. However, Dr. Hewitt has agreed to fund expenditures related to dissemination of the survey.

HUMAN SUBJECT FORM

(Attached below)

PUBLICATION OUTLET

The author intends to submit this research to UNC Asheville's Journal of Undergraduate Research, as well as a peer-reviewed scholarly journal in public health. This research will be presented at the UNC Asheville Undergraduate Research Symposium in Spring 2021.

IRB APPROVAL

The student researcher is currently working with Dr. Hewitt to finalize the IRB application and will submit no later than April 30th. Should revisions to the proposal be requested, the student researcher

will cooperate fully with the Institutional Review Board to ensure utmost respect and ethical treatment of human participants in the study.

[CONSENT FORM]

You are being asked to take part in a research study about attitudes toward pregnant IV (Intravenous) drug users. Please read this form carefully and ask any questions you may have before agreeing to take part in the study.

What the study is about: The purpose of this study is to learn about the opinions emergency nurses have toward drug use and pregnancy.

What we will ask you to do: If you agree to be in this study, you will complete a survey. The survey will include questions about pregnant women and drug use. We will ask you about your thoughts and views on these issues. The survey will take between 10-25 minutes to complete.

Risks and benefits:

We do not anticipate any risks to you participating in this study. You may find some of the questions and topics to be sensitive. You are free at any point to skip questions you are not willing to answer.

The benefits to you will include providing us data to analyze and voicing your opinions on IV drug use and pregnancy.

Your answers will be confidential. The records of this study will be kept private. In any sort of report we make public we will not include any information that will make it possible to identify you. Research records will be kept in a locked computer file; only the researchers will have access to the records.

Taking part is voluntary: Taking part in this study is completely voluntary. You may skip any questions we ask that you do not want to answer.

If you have questions: The researchers conducting this study are Dr. Hewitt and Mr. Wallace. Please ask any questions you have now. If you have questions later, you may contact Dr. Hewitt at lhewitt@unca.edu. You can contact Aidan Wallace at awallac2@unca.edu or (828) 747-9535. If you have any questions or concerns regarding your rights as a subject in this study, you may contact UNC Asheville's Institutional Review Board (IRB) at irb@unca.edu or access their website at <https://irb.unca.edu/>.

You will be given a copy of this form to keep for your records.

Statement of Consent: I have read the above information, and have received answers to any questions I asked. I consent to take part in the study.

Your Signature _____ Date _____

Your Name (printed) _____

In addition to agreeing to participate, I also consent to having the interview tape-recorded.

Your Signature _____ Date _____

Signature of person obtaining consent _____ Date _____

Printed name of person obtaining consent _____ Date _____

This consent form will be kept by the researcher for at least two years beyond the end of the study.

RESOURCES

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Appendix A

Sample Survey Questions:

Intravenous drugs: the use of heroin, fentanyl, methamphetamine, cocaine, ecstasy, ketamine, PCP, or prescription drugs (i.e Vicodin) administered directly into the vein via syringe.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Pregnant people who use IV drugs during pregnancy care about the health of their fetus					
Pregnant people who use IV drugs actively seek medical treatment					
Pregnant people who use IV drugs want to stop using drugs					
Pregnant people are not aware of the health problems associated with IV drugs during pregnancy (birth defects, neonatal abstinence syndrome, etc.)					