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Opioid Use Disorder and Harm Reduction: An Educational Initiative

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Purpose: The Center for Disease Control (CDC, 2016) reports a 200% increase in the rate of overdose deaths involving opioid pain relievers and heroin. In addition to a greater emphasis on safe prescribing of opioids for chronic pain, harm reduction strategies lower the risk of death through overdose prevention, recognition and response (Ko, 2017; Dowell, 2106; Obley, 2015). Additionally, opioid drug use disorders are frequently comorbid with psychiatric disorders (Grant, 2016). The purpose of this poster is to provide nurse practitioners (NP) with the skills to educate persons in harm reduction who are dependent upon opioids, along with their friends and family members, in the use of naloxone to reverse overdose and prevent death. The development and evaluation of a pilot online educational module for nurse practitioner students was created. The educational initiative is easy to embed in an online course and is potentially generalizable to nurses of all levels of practice and in a variety of practice settings.

Methods: In the Family Nurse Practitioner (FNP) and Psychiatric Mental Health Nurse Practitioner (PMHNP) programs, students are required to complete a module for “Opioid Harm Reduction”. Through a multimethod educational approach students receive the fundamentals in opioid overdose prevention, recognition and response, and harm reduction strategies. In the 2016 fall semester, at the beginning and after completion of the module, students were surveyed regarding confidence, understanding, and relevance of opioid harm reduction in preparing for their specialties.

Results: The results of the module survey included a total of 27 participants in the FNP and PMHNP programs. Five areas were looked at and the percentages of the essential components of harm reduction were compiled. Results showed a significant difference before and after the module in knowledge of overdose symptoms, confidence of teaching harm reduction, confidence in providing emergency care, relevance of topic to practice, and confidence in ability to reduce opioid use while treating pain in patients. Prior to the activity, the majority of students (96%) agreed or strongly agreed that opioid harm reduction was relevant to their practice prior to the activity. In addition, 41% expressed a lack of confidence in their ability to teach opioid harm reduction to patients and 48% expressed a lack of confidence in their ability to provide emergency treatment to patients experiencing overdose. Following the activity, the increase in opioid harm reduction knowledge and confidence increased for all knowledge and skill areas. The greatest areas for growth were a 14-fold increase in the number of students who strongly agreed that they would be able to reduce opioid use among patients with chronic pain, a 5-fold increase in the number of students who strongly agreed that they would be able to teach harm reduction to patients with opioid use disorders, and a 4-fold increase in the number of students who
strongly agreed that they would be able to provide emergency treatment to patients with opioid overdose. All of the students indicated that they would recommend use of the module in the future.

**Conclusion:** The module is an innovative strategy to address the opioid epidemic by educating nurse practitioner students in harm reduction strategies. Post-graduate NP students found the online harm reduction module helpful for gaining competency in recognizing opioid overdose and administering intranasal naloxone to prevent harm. Students indicated an intent to utilize harm reduction strategies in their own NP practices and an interest in further discussion. The module was low cost and easy to develop with the help of an online instructional designer. The built in pre-post surveys were useful in planning future learning modules. The educational initiative is generalizable to other advanced practice and generalist nurses. This type of online harm reduction education may have a community impact that can be strengthened by state and county initiatives, public service announcements, local trainings and easy access to naloxone.

**Title:**
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**Abstract Describes:**
Completed Work/Project

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Poster

**Applicable category:**
Academic

**Keywords:**
Educational strategies, Harm reduction and Opioid use disorder

**References:**


Abstract Summary:
There is a gap in the nursing education system for harm reduction strategies among users of opioids. Education and research for nurses and nurse practitioners in prevention, treatment, and effective responses to rapidly reverse opioid overdoses are essential to fighting the opioid epidemic.

Content Outline:
Introduction
1. Opioid use disorder
   1. Problem
2. Gap in educational initiatives
3. Increase in the rate of overdose deaths involving opioid pain relievers and heroin
4. Educational module for nurse practitioner students
   5. Principles of harm reduction
      1. Easy to embed in an online course
5. Naloxone – key component of harm reduction
   6. Methods
1. Online 1.5 – 2 hr. self-paced and interactive module on harm reduction
2. Evaluation:
   Pre/post survey of online module
Outcomes
1. Successful in bolstering confidence of nurse practitioner students to take steps to prevent harm from opioid overdose
2. Knowledge of overdose symptoms
3. Ability to teaching harm reduction
4. Confidence in providing emergency care
5. Relevance of topic to practice
6. Reduce opioid use while treating pain in patients
Conclusions/Implications
1. Strategy addresses opioid epidemic by educating nurse practitioner students in harm reduction strategies
2. Online harm reduction education may have a community impact
   1. Strengthened by state and county initiatives
   2. Local trainings & easy access to naloxone
3. Generalizable to nurses
   1. All levels of practice
   2. Variety of practice settings