

**Title:**

Integrating Alcohol-Use-Related Content in Nursing Curricula

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**Session Title:**

Addressing the Global Burden of Alcohol Use in Nursing Curricula

**Slot:**

J 12: Saturday, 29 July 2017: 1:30 PM-2:45 PM

**Scheduled Time:**

1:30 PM

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**Keywords:**

alcohol use, brief intervention and screening

**References:**

Broyles, L. M., Rosenberger, E., Hanusa, B. H., Kraemer, K. L., & Gordon, A. J. (2012). Hospitalized patients' acceptability of nurse-delivered screening, brief intervention, and referral to treatment. *Alcoholism: Clinical and Experimental Research*, 36(4), 725-731.

Platt, L., Melendez-Torres, G. J., O'Donnell, A., Bradley, J., Newbury-Birch, D., Kaner, E., & Ashton, C. (2016). How effective are brief interventions in reducing alcohol consumption: Do the setting, practitioner group and content matter? Findings from a systematic review and metaregression analysis. *BMJ Open*, 6(8), e011473.

Savage, C, Dyehouse, J, & Marcus, M. (2014). Alcohol and health content in nursing baccalaureate degree curricula. *Journal of Addictions Nursing*, 25(1), 28-34.

**Abstract Summary:**

There is a strong evidence base for alcohol screening, brief intervention, and referral to treatment (SBIRT). Nurses are in key roles to deliver these clinical strategies. However, there is little content addressing the continuum of alcohol use to alcohol use disorder. Innovative curricula are needed.

**Learning Activity:**

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
1. Articulate the process for universal alcohol screening and interventions across populations and settings.	Describe screening tools. Summarize literature related to alcohol screening. Provide examples of nurse-delivered screening.
2. Consider what alcohol-use-related content can be integrated into nursing curricula.	Describe learning modules that have been effectively integrated in prelicensure and graduate nursing curricula.
3. Examine curricular map used to guide infusion of modules into discrete courses.	Provide examples of course objectives, module and module objectives.

**Abstract Text:**

**Purpose:** There is a strong evidence base for alcohol screening, brief intervention, and referral to treatment (SBIRT). Screening is an essential first step for nurses in detecting persons who are at-risk because of alcohol consumption. Based on the risk level, evidence-based interventions can be feasibly delivered by nurses and such interventions are acceptable to patients (Broyles, et al, 2012). Findings across studies including various providers on alcohol-related outcomes following interventions reveal that interventions delivered by nurses had the most effect in reducing quantity of alcohol consumption (Platt et al., 2016). For those persons who could benefit from alcohol specialty treatment, nurses are in key roles as the most trusted healthcare providers who have the most sustained contact with patients to refer them to treatment and facilitate their access to, and linkage with treatment.

The purpose of this presentation is to illustrate how faculty in a nursing school have integrated alcohol-related content in prelicensure and master's curricula. The curricular map will be used to demonstrate how specific teaching/learning modules have been integrated across the nursing curricula.

**Methods:** Curricular mapping has been completed to guide the placement and timing of teaching/learning modules related to alcohol and other substance use. Learning objectives were developed for multiple educational modules, including screening, motivational interviewing, brief intervention, referral to treatment, neurobiology, and FDA-approved medications for alcohol use disorder. In turn, each module and respective objectives were mapped to the particular course where it is delivered. Faculty subject matter experts developed each module and in turn were filmed in delivery of the content. The videos ensure that all students receive the same information and that the education and delivery are sustainable. Faculty subject matter experts also worked with actors to develop videos of nurse-delivered screening, brief intervention, and referral to treatment. These videos serve as exemplars for students prior to their delivery of these strategies in the clinical setting.

**Results:** Compared with the current amount of content in nursing curricula in the US, integrating content in courses has resulted in a 3-fold increase in exposure.

**Conclusion:** The proposed implementation model can be utilized by nurse educators wishing to provide an optimal integrative program of alcohol education.