Examining Therapeutic Attitude and Empowerment Among Peri Anesthesia Nurses Caring for Patients with Opioid Use Disorder

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Introduction: Patients with opioid use disorder (OUD) are presenting to hospitals in increasing numbers requiring complex care. Nursing care of patients with OUD is multi-faceted and requires skills empowered nurses bring to the professional practice environment. Equipping perianesthesia nurses to care for patients with OUD imperative.

Identification of the Problem: Nearly 500,000 hospitalized patients a year have a OUD comorbidity. Nurses readily admit they do not have the knowledge, skills, or confidence to care for this population safely. Education without considering factors that influence nursing practice does not translate into feelings of competence in nursing care.

Purpose of the Study: To identify correlates and predictors of therapeutic attitude and empowerment in perianesthesia nurses who care for patients with OUD.

Methodology: A cross-sectional design was used to identify correlates and predictors of TA and empowerment in a national sample of perianesthesia nurses (N = 215). The Perianesthesia Nurse Empowerment and Therapeutic Attitude Model was the guiding framework. Pearson product-moment correlation and hierarchical multiple regression analyses examined relationships between personal factors, the professional practice environment (PPE) and societal factors of perianesthesia nurses.

Results: The standardized regression coefficients indicated the PPE (β = -0.28), drug user stigma (β = 0.27), access to a pain specialist (β = 0.25), and exposure to drug users (β = 0.25) were the strongest predictors of TA. Access to a pain specialist (β = -0.15) and the PPE (β = 0.72) were the strongest predictors of empowerment.

Discussion: The PPE directly influenced empowerment and TA. Exposure to persons with OUD and personal stigmatization of persons who misuse drugs decreased TA but had no association with empowerment. Access to a pain specialist was moderately predictive of empowerment and negatively associated with TA suggesting a lack of role legitimacy.

Conclusion: The PPE was found to be the strongest predictor TA and empowerment

Implications for perianesthesia nurses and future research: The predictive factors identified in this study should be considered when developing future educational interventions, stigma reduction goals, and program planning. Examining the PPE through the lens of TA and empowerment may identify opportunities to enhance care of this patient population. Further research into perianesthesia nurses' perceptions of their role when caring for this population.