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Submission to the House of Representatives
Standing Committee on Family and
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Inquiry into the impact of illicit drug use
on families

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Australian Nursing Federation Submission on the Inquiry into the Impact of Illicit Drug Use on Families

The Australian Nursing Federation (ANF) welcomes the opportunity to make a submission to the Parliamentary Inquiry into the impact of illicit drug use on families. Drug use is a major worldwide public health issue. People from all walks of life are affected by alcohol and other drug use and related health problems and this places substantial burdens on our health and community facilities. Although the use of illicit drugs in Australia is of major concern, the abuse of prescription drugs should also be cause for public concern. New Melbourne ambulance figures show that overdosing on prescription or over-the-counter drugs is twice as common as overdosing on illicit drugs.¹ Consideration should also be given to the impact of alcohol and other drug use on families. It is essential that drug-related problems are addressed efficiently and effectively, and nurses and midwives are well placed to competently do this.

It is the view of the ANF that policy development which considers the impact of drug use on families must also take into consideration the necessary support systems for nurses and midwives and other health practitioners who provide health care to people in relation to their drug use as well as provide support and education to their families.

In responding to this Inquiry, the ANF has focused our response on the contribution nurses can make to the care of illicit drug users and their families. In addition to their capacity to provide a wide range of services, nurses are also members of families and are affected by illicit drug use in the same way as other members of the community.

The Australian Nursing Federation is of the view that the Australian Government can better address the impact of alcohol and other drug use on families by:

- promoting the role of specialist registered nurses in the field of alcohol and other drug use;
- funding the introduction of specialist registered nurse liaison roles to provide consultation and support for other clinicians in the provision of care for people with drug use issues and their families;
- providing scholarship funding for postgraduate education for nurses working in this area of practice;
- allocating a Medicare Benefits Schedule item number for registered nurses in general practice providing services to people requiring care related to drug use and their families;
- promoting the role of the nurse practitioner in this area of practice;
- allocating a Medicare Benefits Schedule item number for nurse practitioners providing services to people requiring care related to drug use and their families;
- funding the development and distribution of national guidelines for health professionals in relation to harm minimisation;
- providing financial support for the expansion of the work of specialist nursing organisations in the field of alcohol and other drug use;
- encouraging national health professional bodies and specialist nursing organisations to develop standards, policies/position statements and guidelines in relation to the nursing care of people with drug use issues and their families.

1. Rationale

- 1.1 The ANF, established in 1924, is the national union for nurses and midwives with branches in each State and Territory of Australia. The ANF is also the largest professional organisation for nurses and midwives in Australia. The ANF's core business is the industrial and professional representation of nurses and midwives.
- 1.2 The ANF's 150,000 members are employed in a wide range of enterprises in urban, rural and remote locations in the public, private and aged care sectors including hospitals,

health services, schools, universities, the armed forces, statutory authorities, local government, offshore territories and industries.

- 1.3 The ANF participates in the development of policy, regulation, health, community services, veteran's affairs, education, training, occupational health and safety, industrial relations, immigration and law reform.

2. The Role of Nurses

- 2.1 According to the Australian Institute of Health and Welfare (AIHW) Nursing and Midwifery Labour Force Census there were 249,458 registered and enrolled nurses employed in nursing in Australia in 2004.²
- 2.2 Nurses are a vital part of the Australian health system and make up over 50% of the health workforce.
- 2.3 Nurses are qualified health professionals, skilled in assessment, planning and evaluation of individual health care. Well developed communication and observational skills are fundamental to nursing practice.
- 2.4 Nurses play an essential role in promoting and achieving the health outcomes of the Australian community.
- 2.5 Nursing takes a holistic rather than task oriented approach to health care and includes the physical, mental and emotional care of the person. Whilst focusing on the person requiring care, nursing is inclusive of the person's family and friends.
- 2.6 Nurses and midwives have primary roles in identifying, preventing and addressing drug-related issues in emergency departments, general hospital units, clinics, general medical practices, specialist mental health and drug and alcohol services, sexual health services, youth services and community settings where people seek health care and other assistance.³
- 2.7 By supporting families, nurses assist in developing the foundation from which families can support a member using alcohol and other drugs.
- 2.8 Evidence supports an increase in the capacity of nurses to provide brief and early interventions and treatment.⁴
- 2.9 Funding for specialist nursing services, education for nurses in managing people with drug use issues, improved access to specialist nursing support and the recognition of nursing in this field as a legitimate nursing specialty are all important strategies to improve care.

3. Specialist Registered Nurses – Alcohol and Other Drug Use

- 3.1 Specialist registered nurses in the field of alcohol and other drug use have a major role in raising awareness, guiding, educating and supporting the profession with regard to drug use issues in Australia.⁵
- 3.2 Specialist registered nurses are required to identify and assist people with drug-related issues and to provide support to their families.
- 3.3 These specialist registered nurses are ideally positioned to explore family-focused approaches to family support for those using alcohol and other drugs and, through an understanding of resilience, build health capacity in families.⁶
- 3.4 There are currently no educational prerequisites required of nurses working in this field and limited opportunities exist for postgraduate study in this specialist nursing stream.
- 3.5 Specialist registered nurse liaison roles should be developed to provide consultation and support for other clinicians in the provision of nursing care for people with drug use issues and their families.
- 3.6 Funding needs to be provided for relevant postgraduate education for nurses working in this area of practice.
- 3.7 A Medicare Benefits Schedule item number should be allocated for registered nurses in general practice providing services to people requiring care related to drug use and their families.

4. The Role of the Nurse Practitioner

- 4.1 A nurse practitioner is a registered nurse who has been authorised by the state or territory nurse regulatory authority to use the title. The title of nurse practitioner is protected in state and territory Nurses Acts and similar legislation, making it an offence for use of the title by any other than those authorised to do so by legislation.
- 4.2 Nurse practitioners work in collaboration with other health care providers, such as doctors, other nurses and allied health professionals as well as with governments, service providers and consumers. Collaboration and cooperation is essential for optimal health outcomes.
- 4.3 The role of the nurse practitioner is characterised by clinical assessment and therapeutic management of health and illness presentations within their scope of practice. This may include the initiation of diagnostic investigations, the prescription of medicines, and referral to other health care providers.
- 4.4 Nurse practitioners practice in metropolitan, rural and remote areas of Australia, in both public and private sectors, and in all clinical areas.
- 4.5 The minimum educational level for nurse practitioner practice is preparation at Masters level or equivalent for the clinical area of practice, supported by relevant clinical experience.⁷
- 4.6 The role of nurse practitioner as it relates to the care of people and their families can be immensely beneficial. Nurse practitioners can provide immediate care for people using alcohol and other drugs who may have chaotic lifestyles and complex care needs. They are ideally placed to provide both preventative health care and advocacy for these people, their families and friends.⁸
- 4.7 The nurse practitioner role in the provision of care to people with health care issues related to the use of alcohol and other drugs and their families should be promoted.
- 4.8 A Medicare Benefits Schedule item number should be allocated for nurse practitioners providing services to people requiring care related to drug use and their families.

5. Harm Minimisation

- 5.1 Nurses primary professional responsibility is to people requiring nursing care. Nurses enable individuals, families and groups to maintain, restore or improve their health status, or to be cared for and comforted when deterioration of health has become irreversible.
- 5.2 Individuals have the right to make decisions related to their own health care, based on accurate and complete information given by health care providers.⁹
- 5.3 It is important to recognise the role that nurses play in providing clinical care and health promotion activities with regard to harm minimisation and appropriate community referral.
- 5.4 Evidence suggests that advocacy by health care professions for effective harm reduction strategies is vital to ensure their wider and more effective application.
- 5.5 It is essential that education regarding harm minimisation is made available to all health professionals to increase awareness among health professions.
- 5.6 Treatment of families minimises the intergenerational transmission of drug use problems.¹⁰
- 5.7 Government resources need to continue to be directed to drug treatment and health education programs involving both the people with drug use issues and their families.
- 5.8 Strategies need to be developed to raise awareness of the importance of involving families in the care of people requiring health care in relation to drug use as a means to minimise harm.
- 5.9 Funding needs to be provided for development and distribution of national guidelines for health professionals in relation to harm minimisation.

6. Specialist Professional Nursing Organisations

- 6.1 Specialist nursing organisations actively promote a legitimate role for nurses, midwives and their professional non-nursing peers to respond to drug-related issues.
- 6.2 These nursing organisations promote practice based on the best available evidence, active involvement in research and seek to provide opportunities for professional development, education, mentoring and support for nurses and midwives through a variety of activities and conferences.
- 6.3 Support needs to be provided for specialist nursing organisations to develop relevant professional standards, policies and guidelines for practice.

Conclusion

The ANF response addresses Terms of Reference 3: *Ways to strengthen families who are coping with a member(s) using illicit drugs*. It is our view that nurses are well placed to make a significant contribution to strengthening families who are coping with a member(s) using illicit drugs as well as contributing to the care of the individual who is involved with illicit drugs.

Nurses are often the first point of contact for families and in addition to their caring role, take a major role in health promotion and health education.

There are already specialist nurses working in this area and their role can be enhanced by legislative changes which improve their capacity to respond to families coping with a member(s) using illicit drugs, for example, by having item numbers included in the Medicare Benefits Schedule to allow families to directly access their services.

The ANF would be pleased to provide additional information or respond to any requests for clarification of the comments made in our submission.

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