ASSOCIATION OF NURSES IN AIDS CARE

POSITION STATEMENT

Substance Use Treatment on Demand

Adopted by the ANAC Board of Directors on September 15, 2000 Reviewed and Revised by the ANAC Board: September 2002; January 2005; September 2007

Position:

It is the position of the Association of Nurses in AIDS Care that:

- Drug treatment on demand, defined as the act of being able to walk into a clinic and get immediate, affordable, and appropriate treatment for drug use problems, needs to be a national health care priority.
- Drug treatment should cover a full spectrum of physical, social, emotional, and vocational services that are individualized to the care needs of each client.

Statement of Concern:

Untreated drug use increases the risks for disease transmission and the perpetuation of the HIV, HBV, HCV, and tuberculosis epidemics. Drug use has reached epidemic proportions, affecting millions of individuals, their families, and their communities. Several studies estimate that 5 out of every 6 drug users are not in treatment at any given point in time (Metzger & Navaline, 2003). Unfortunately, "despite repeated demonstrations that comprehensive treatment-on-demand programs reduce demand for drugs, we fail to translate that learning into the Federal Drug Strategy budget" (Dogoloff, 2006, p. 4).

Background:

Primary prevention that discourages the initiation of drug use is an invaluable tool in the dual epidemics of HIV and drug use, but it does not address the needs of established drug users who need treatment to improve their health and decrease their needs for addictive drugs. Effective treatment for drug use requires a multi-disciplinary approach with flexibility to meet the individual drug user's needs. Unfortunately, accessing treatment has become increasingly more difficult in this country as need increases and capability diminishes (Shavelson, 2001). While drug treatment is an admittedly complex and difficult process, research shows that sustained treatment for drug use is associated with reductions in HIV risk behaviors as well as significant reductions in the rate of drug use (Hubbard, Craddock, & Anderson, 2003; Metzger & Navaline, 2003). Programs that provide treatment on demand are an important method to decrease barriers to treatment entry (Digiusto & Treloar, 2007). Treatment can, therefore, be seen as an effective use of limited health care dollars that can provide the added benefits of helping to control other epidemics as well as the detrimental social and economic side effects of drug use (Hubbard et al., 2003). It is a more humane approach to the problem than that of the war on drugs which has failed to address these needs (Magura, 2007; Shavelson, 2001).

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