# How the Public Health Initiatives aim to address Substance (Drug) Misuse

An estimated number of 4,709 opiate and cocaine users that are aged between 15 and 64 in Manchester account to 12.97 per 1000 population, representing 1.3% of the residents. This is alarming as it exceeds the England estimate of 8.4 per 1000 population. In 2016, 2,383 deaths related to drug misuse were registered in England, signifying a 3.6% increase compared to 2015 (Bayerl et al. 2017, 39). In order to address drug and substance abuse, the Manchester City Council redesigned a framework defined by four components. These include the prevention and self-care, engagement and early intervention, and structured treatment together with recovery support. In the prevention and self-care, the program provides awareness on drug, alcohol and substance abuse. Assessments of individuals and families are made to avail a wide range of skills in response to drug misuse (Purshouse et al. 2012, p. 189). These public health approaches are aimed at harms reduction and abstinence for the groups categorized as high risk. In essence, the approaches also increase the capacity that is essential in prevention of drug-related harms. However, with specific approach to harm reduction, the NHS England has rolled out psychosocial care initiatives in which drug and substance abuse management is a team effort involving carers, healthcare system, and psychologists.

Public Health England (PHE) on the other hand proposes reduced drug use, harm reduction as well as social integration and recovery. However, PHE supports needle and syringe programs for drug users who use injections. In their research, the findings of PHE on this program yielded bundle of evidence to reduce blood-borne viruses that are caused mainly due to sharing of injecting equipment (Adams, Buetow and Rossen 2010, p. 45). Essentially, drug treatment services and psychosocial interventions initiatives of the PHE reduce drug dependency and risk of fatalities. Nonetheless, social factor assessment in drug dependency treatment and their interventions can serve to moderate the use of these drugs and improve treatment outcomes. PHE establishes that proper housing, deprivation, and employment are key determinants of the drug and substance abuse. As such, in their initiatives, PHE proposes education, lack of deprivation, solutions to housing problems and good physical health as initiatives to reduce substance misuse (Dua et al. 2011, p. 28). The initiatives proposed by PHE, NSH and Manchester City Council that address drug misuse are consistent with the United Nations Office of Drug Control (UNODC). In their publication of *International Standards on Drug Use Prevention* of 2013, the systemic evidence suggests the prevention strategies. These approaches also are in line with the United Kingdom’s Guidelines on interventions and initiatives. UNDOC initiative that supports positive outcome are early intervention, education, multi-component programs involving social support systems and initiatives that address the risks as well as resilience factors (Swendsen et al. 2010, p. 93).

The initiatives and intervention approaches that address substance abuse link to the National Institute for Health and Care Excellence (NICE) on the *Drug Misuse: Psychosocial Interventions of 2008* (Kaner 2010, p. 234). This approach is focused on social approaches to management of substance abuse. It is in line with the PHE psychosocial support that focuses on a multi-practice strategy where caregivers, healthcare providers, and psychologists are engaged in managing drug dependency for victims of drug abuse (Mental and Office of the Surgeon General (US) 2016, p. 32). Additionally, the initiatives are consistent with the Alcohol and Drug Education and Prevention Information Service (ADEPIS), which set quality standards in respect to drugs and alcohol education. These programs support the management of drug abuse to children with parents that are affected by drug and substance abuse (Bakke and Endal 2010, p. 74). Apparently, the initiatives are linked to the Public Health Outcomes Frameworks (PHOF) indicators that covers the outcomes related to drugs and substance abuse. These frameworks provide information which guides development of the initiatives and interventions for those with drug dependency. Apparently, the initiatives link to the NICE guidelines of 2007 that establish interventions aimed at reducing substance misuse among vulnerable young people (PH4) (Reddy et al. 2014, p. 109). Hence, public and other partners work in collaboration to address substance abuse through evidenced-based prevention, early intervention through assessment and provision of treatment in addition to supportive services.

## Reflection on the initiatives

As a public health nurse who is guided by the NMC, the preceding initiatives provide information on medication for an improved quality of healthcare delivery. Certainly, this allows the discovery of the aspect that adults with substance abuse can also have challenges with the prescription medications related to misuse (Moodie et al. 2013, p. 400). Hence, I am able to act within my professional limit to advance care in respect to the health problem of the patient. In the initiative of self-care, and under the oath of NMC on pharmacological management, I have availed prescription medications to patients with drug problems as per the treatment plans (Cherry 2016, p. 136). Hence, outpatients with the problem of substance abuse are advised accordingly on medication usage and informed on repercussions. Apparently, I have found psychosocial support initiative to be important in the prescription medication adherence to adult patients with drug problems. With support of caregivers, psychosocial support encourages gradual withdrawal of non-medical prescribed drugs, while at the same time, allows patients to adhere to regimen of drugs that are prescribed to them (Clancy 2009, p. 66). Therefore, this grants me the role of a supportive public health nurse. In addition to my bedside role, I can inculcate knowledge to patients on how they can improve self-care by refraining from the misuse of drugs alongside prescription medications (Steffenak, et al. 2015, p. 83).

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