

April 1, 2021

Vice Admiral Vivek H. Murthy, MD, MBA Surgeon General Office of the Surgeon General Department of Health & Human Services 200 Independence Avenue, SW Humphrey Bldg. Suite 701H Washington, DC 20201

Dear Dr. Murthy:

On behalf of the American Nurses Association (ANA), we congratulate you on your confirmation to serve as the 21<sup>st</sup> Surgeon General of the United States. As this is a role you are returning to, we look forward to your continued leadership on key issues of importance to the nation and its nurses. ANA stands ready to partner with you to address the nation's most pressing public health issues.

ANA is the premier organization representing the interests of the nation's 4.2 million registered nurses (RNs), through its state and constituent member associations, organizational affiliates, and individual members. ANA members also include the four advanced practice registered nurse roles (APRNs): nurse practitioners (NPs), clinical nurse specialists (CNSs), certified nurse-midwives (CNMs) and certified registered nurse anesthetists (CRNAs). ANA is dedicated to partnering with patients to improve practices, policies, delivery models, outcomes, and access across the health care continuum. As you set out to provide clear guidance and resources, reach vulnerable communities, and address the nation's public health needs, ANA appreciates consideration of our shared priorities as detailed below.

## COVID-19 Pandemic

As the nation continues to focus effort and resources to combat the COVID-19 pandemic, the critical role of registered nurses cannot be overstated. This unprecedented public health crisis has challenged our health care delivery system—but nurses remain on the frontlines fighting the spread of the virus and saving patients' lives. Now, our nurses are integral to the widespread administration of the vaccine in their communities and the prevention of further community outbreaks.

ANA encourages you and the Department of Health and Human Services (HHS) to not only recognize the role of nurses in the nation's current response, but to ensure they are integral to the development of approaches to mitigate the ongoing spread of the virus and education regarding vaccinations among the public. Further, nurses also must be included in discussions and decisions regarding future pandemic and other emergency preparedness, so that their unique perspective and insight into responding to public health emergencies is captured and implemented.

## Behavioral Health

We also are very concerned about the impact of the pandemic on mental health—on nurses and the public at large. Prior to the COVID-19 pandemic, nurses experienced tremendous levels of stress in their day-to-day work. Now, nurses are faced with the strains of responding to the pandemic, which exacerbate anxiety, stress, and burnout. We must prioritize the mental health of nurses and other front



line health professionals who are caring for some of our most vulnerable patients. These clinicians need support and encouragement to seek help for mental health concerns and substance use disorders. It is imperative that stigma around seeking this help is reduced. ANA encourages the establishment of mental and behavioral health resources for nurses and other health care workers serving across all health care settings.

At the same time, similar support is needed for the public facing increased stress, anxiety, and other challenges due to COVID-19 mitigation strategies. This has resulted in a rising need for behavioral health and substance use disorders treatment and services. ANA encourages focus on addressing this negative affect of the pandemic through clear guidance and resources that target patients struggling with these challenges and the clinicians providing treatment and care. Addressing these issues now is critical before they emerge as another public health emergency.

## Opioid Epidemic and Substance Use Disorders

Prior to the onset of the COVID-19 pandemic, the nation was focused on combatting the opioid epidemic. The opioid epidemic was declared a public health emergency in 2017 and the most recent renewal was issued in early January of this year. As the nation continues to respond to the challenges of opioid addiction faced by our health system, nurses also play a vital role in efforts to address the epidemic. ANA and its members are also concerned that the opioid epidemic has been further exacerbated due to the mental health challenges resulting from COVID-19 mitigation efforts, as noted above.

ANA encourages renewed focus on the opioid epidemic, utilizing nurse expertise in finding innovative ways to address the crisis. We believe several barriers to effective treatment remain, including complementary and alternative medicine. Further, it is critical that access to care must be supported and preserved. Those facing opioid and substance use disorders must be connected to needed care. We urge the agency to continue to focus on that access, which includes nurses with prescribing authority be allowed to practice to the full extent of their education and practice authority.<sup>3</sup>

## **Tobacco Cessation**

Another public health issue the nation continues to face is tobacco cessation, including e-cigarette usage among the youth. ANA recognizes that smoke and smokeless tobacco product use directly contributes to the leading causes of preventable disease, disability, and death in the United States.<sup>4</sup> Furthermore, ANA recognizes that nicotine, the active ingredient in tobacco, is an extremely addictive substance that is at the center of habitual use of tobacco products. These products have high potential for adverse health effects such as a myriad of cancers and disorders of the cardiovascular, respiratory, reproductive,

<sup>&</sup>lt;sup>1</sup> Kaiser Family Foundation. The Implications of COVID-19 for Mental Health and Substance Abuse. February 10, 2021. <a href="https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/">https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/</a>. Accessed March 2021.

<sup>&</sup>lt;sup>2</sup> Department of Health and Human Services (HHS). Public Health Emergency Declarations. February 18, 2021. https://www.phe.gov/emergency/news/healthactions/phe/Pages/default.aspx. Accessed March 2021.

<sup>&</sup>lt;sup>3</sup> American Nurses Association (ANA). The Opioid Epidemic: The Evolving Role of Nursing, Issue Brief. August 2018. https://www.nursingworld.org/~4a4da5/globalassets/practiceandpolicy/work-environment/health--safety/opioid-epidemic/2018-ana-opioid-issue-brief-vfinal-pdf-2018-08-29.pdf. Accessed March 2021.

<sup>&</sup>lt;sup>4</sup> ANA. Prevention and Cessation of Tobacco and Other Nicotine Products. Position Statement. March 2020. https://www.nursingworld.org/~49b0b0/globalassets/practiceandpolicy/work-environment/health-safety/tobacco-cessation/ana-position-statement-on-tobacco-products-03202020.pdf. Accessed March 2021.



urinary, and gastrointestinal systems. <sup>5</sup> In addition, the long-term effects or complications of contracting COVID-19 include lung function abnormalities and other chest issues, which is only exacerbated by use of smoke and smokeless tobacco products. ANA not only continues to support all tobacco cessation efforts, but hold that nurses be tobacco-free role models at work and in their communities.

We encourage you and HHS to continue focus on addressing this important issue. Policy and guidance must be implemented that holds systems of care accountable for providing high-quality, evidence-based, culturally appropriate tobacco cessation treatment—including through telehealth technologies. These programs must equitably and consistently reimburse any licensed practitioner who is qualified to provide treatment for tobacco and other substance use disorders. Additionally, strong support for smoke-free indoor and outdoor public spaces is key to reduce the prevalence of tobacco use and exposure to nonsmokers. We continue to encourage bans on advertising, promotion, and sponsorship of tobacco products. At the same time, we encourage additional resources for media campaigns that promote tobacco use prevention. Further, ANA supports restrictions on where tobacco products can be purchased and the use of pricing and taxation to incentivize cessation. Last, funds allocated for COVID-19 response should be used to educate the public of the smoking and long-term effects or complications from contracting the virus and support any nurse-led community programs supporting cessation efforts. Through these commonsense approaches, together we can achieve success in preventing the use of smoke and smokeless tobacco products—especially, among our nation's youth.

ANA stands ready to provide expertise and resources on these and other public health issues. We look forward to opportunities to partner with you and your office to address the nation's pressing public health issues. Please contact Ingrida Lusis, Vice President, Policy and Regulatory Affairs, at (301) 628-5081 or <a href="mailto:lngrid.Lusis@ana.org">lngrid.Lusis@ana.org</a>, with any questions.

Sincerely,

Debbie Hatmaker, PhD, RN, FAAN

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Chief Nursing Officer/EVP

cc: Ernest Grant, PhD, RN, FAAN, ANA President Loressa Cole, DNP, MBA, RN, NEA-BC, FACHE, FAAN, ANA Chief Executive Officer

<sup>&</sup>lt;sup>5</sup> Ibid.

<sup>&</sup>lt;sup>6</sup> Ibid.