Health Promotion in Rural America

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Abstract

The purpose of this paper is for the author to identify a gap in health promotion through observation and interaction within the author’s community. The goal is to improve understanding of the need to promote health in one’s community so that new knowledge can be applied into practice as a nurse practitioner. Within the analysis, several gaps in health promotion were observed due to local resources. Through research the author became aware of the lack of resources within a rural community. Collaborating with other healthcare providers and having an opportunity to inform others in the community was deemed an essential task. Upon meeting cancer patients within the community who frequently asked multiple questions regarding their diagnosis, the first task was to create a support group for local cancer survivors. Next, implications for clinical practice were discussed to help promote health within a small rural community. It was also important to educate and provide guidance to other healthcare providers to gain understanding and awareness about the need to promote health within the community. Communication and familiarity are great ways to begin the climb toward promoting better health.
Health Promotion in Rural America

As graduate students in the nurse practitioner (NP) program, we are responsible for dissemination of nursing knowledge and using that knowledge to promote health in our communities. Knowledge and understanding of the gaps in health promotion can assist the NP in being better equipped to manage the patients in rural America. Mastering the concept of health promotion will contribute to patient confidence.

Definition and Description of the Problem

Health care is a constant globe that continuously changes. While it is important for graduate students in the NP program to be aware of changes in health care, it is also important to gain an understanding regarding the struggles that patients may encounter within the community. Lack of knowledge related to preventative health practices related to disease processes have been seen within rural healthcare settings. Being new to the rural area, there have been many topics for concern that the author has encountered. Upon relocating to the rural community from a much larger community, the author discovered that there was not a county health department in two counties within Illinois and the author now lived in one of these counties. Therefore, investigations were started to find out where the community and its residents find resources for promotion of health. The county has a County Health Nurse that is in charge of giving all vaccinations and immunizations to all residents in the county. However, a health department would provide a variety of services to the community (i.e. education, testing, and restaurant inspections) that could benefit the community. Healthy People 2020 explain “access to health service” is a leading concern in the United States (U.S. Department of Health and Human Services, 2015). The community hospital, Richland Memorial Hospital (RMH),
sponsors community events aimed at education and health promotion throughout the community. Rural Americans face a combination of factors like social differences, educational differences, and economic factors that produce disparities in health care not found in urban areas (National Rural Health Association, 2013).

Upon receiving the diagnosis of cancer, patients in rural communities are referred to an oncologist in an urban area and will need to travel a long distance for their care. For many rural patients resources are scarce and finances are limited; thereby, hindering positive health promotion. According to the Koch, Snodgrass, Shen, and Bostwick (2013), 173 people are diagnosed with cancer daily.

**Description and Implementation**

Recognizing gaps in health promotion can assist in understanding how it affects individuals within the community where one intends to practice. As NPs, it is important to be better educated and implement the knowledge gained through experience to improve patient care. Richland Memorial Hospital offers a program for women who have been newly diagnosed with breast cancer where the women are matched with a breast cancer survivor who will be a mentor through the cancer process. However, there are no support services aimed at cancer patients and their family as a whole. During clinical rotations it was discovered that several cancer patients and support members were lacking knowledge about healthy living after treatments.

Implementation began with identifying patients, family members, healthcare workers, and individuals within the community whose actions and reactions are influenced by cancer diagnosis. Plans were made to hold a support group for anyone in the community and advertised by word of mouth, and bulletin notes for those affected by
a cancer diagnosis. This meeting was named “Healthy Living After Chemo.”

Implementation included creating a PowerPoint presentation to include information about what cancer is, who is at risk for cancer, what defines a cancer survivor, and how to have a healthy life after chemo (to include diet, exercise, support services, expectations of care and prevention). The primary goal of cancer support services is to empower cancer patients by educating them about cancer and treatment so they can identify and manage side effects along with any complications while instilling skills to adapt to life after treatment (Coward, 2006). Expectation is for the participants of the group to acknowledge understanding of the information provided while gaining confidence to guide patients through uncertain times within a health diagnosis.

**Design of the Project**

The design of the “Healthy Living After Chemo” included a presentation to discuss cancer, its affects, ways to prevent cancer, and eight healthy behaviors to begin as a survivor. The target audience included anyone in the community that has been diagnosed with cancer or has been affected by a friend or family member’s diagnosis. The goal of the project is to educate participates on promoting a healthy lifestyle and allow a time to meet others with similar diagnoses.

Research was conducted through the American Cancer Society, the United States Department of Health and Human Services and recommendations from local nurse practitioners. Healthy People 2020 discusses plans for the United States that provide science-based objectives for improving the health of all Americans over ten year intervals. Reduction in the number of cancer cases, illness, disability and cancer related deaths are one topic discussed in Healthy People 2020 (United States Department of
Health and Human Services, 2015). Self-breast exam (SBE) teaching was also incorporated to promote early detection in breast cancer. To conclude participants would be asked to fill out a questionnaire giving their opinion about the meeting.

**Delivery of the Project**

The purpose of holding a support meeting is to determine if having monthly meetings would be beneficial to cancer survivors living in the community. For the meeting termed “Healthy Living After Chemo,” seven female participants attended varying in age from 28-69 years in age. The meeting was advertised as a one-hour meeting but lasted two hours to give all participants a chance to speak openly about concerns they have. To open the meeting everyone introduced themselves and shared their cancer diagnosis, current treatment and/or how long in remission. Of the participants four were breast cancer survivors, two were colorectal cancer survivors, one was a mouth cancer survivor and one was a vulvar cancer survivor.

Dorthea Orem developed a self-care deficit theory that is comprised of three parts: theory of self-care, theory of self-care deficit, and theory of the nursing system (Nursing Theory, 2015). The major assumptions of her theory include:

- People should be self-reliant, responsible for their care, and others in their family who need care
- People are distinct individuals
- Nursing is a form of action that includes an interaction between two or more people
- Successfully meeting universal and development self-care requisites is an important element of primary care prevention and ill health
• A person’s knowledge of potential health problems is necessary for promoting self-care behaviors
• Self-care and dependent care are behaviors learned within a socio-cultural context.

Orem’s theory identifies universal self-care requisites that are associated with life processes that are needed to maintain the integrity of structure and function (Nursing Theory, 2015). The requisites are also referred to as activities of daily living and include:

• The maintenance of adequate intake of air, food, and water
• Provision of care associated with the elimination process
• A balance between activities and rest, as well as, between solitude and social interaction
• The prevention of dangers to human life and well-being
• The promotion of human functioning

Orem’s theory of self-care deficit was used to provide the participants of the meeting with activities for the individuals to practice to maintain their life, health and well-being. The participants were educated on eight behaviors for a healthy lifestyle for survivors to include discussion on no smoking, avoid smoking, exercise regularly, avoid excessive weight gain, eat a healthy diet, drink alcohol in moderation, stay connected, and have screening tests along with follow-ups with primary care providers (Washington University School of Medicine, 2015). Methodology included a Microsoft PowerPoint presentation which also discussed to cancer, its affects, and prevention. (Appendix A). The participants were encouraged to interact throughout the presentation with questions, concerns or comments. Once the presentation was complete, there were five breast
models spread out on a table and all participants were encouraged to perform breast
exams and decipher if there were any abnormalities in them. Using Orem’s approach to
the nursing process provides methods to determine self-care deficits that can then define
the roles of the patient and provider to meet self-care demands (Nursing Theory, 2015).

**Evaluation**

**Problem**

Being part of a rural community may mean encountering health disparities such as
limited resources available. Over the years, efforts have been made to eliminate
disparities and attain equity with regards to diseases, illnesses, and health care services
(U.S. Department of Health and Human Services, 2015). According to Healthy People
2020 in 2013 the overall death rate due to cancer in Illinois was 171.9 per 100,000
populations. The target is to decrease cancer deaths to 161.4 (U.S. Department of Health
and Human Services, 2015)
Figure 1. Illinois Cancer Data (Healthy People 2020, U.S. Health and Human Services, 2015)

Being apart of a rural community may limit resources. However collaborating with providers and people who are educated on illness and disease prevention can work together to provide health promotion for others.

Effectiveness of project
Over half of the participants could not detect any abnormalities in the breast models. Thereafter, SBE teaching was conducted and all participants were asked to perform SBE on the breast models again and 100% of the participants were able to detect the abnormalities the second time. All participants were given a three-question questionnaire to fill out at the closing of the meeting to include: 1. Did you enjoy the meeting? 2. Was there anything that you learned new from this meeting that you were not aware of before? 3. Is there any information that you would like for us to provide at another meeting? (Appendix B).

Of the participants 100 percent enjoyed the meeting. Four participants felt they learned about self-breast exams and how to check for lumps in the breast. One participant felt that learning about each others cancer diagnosis was helpful and considerate. One participant felt that a review of overall topics was very helpful and one participant learned that a dietician could be called on for support with diet planning for after cancer treatment. All seven participants would like to learn more information about diet and exercise. It was even mentioned that maybe meetings could be continued and having occasional guest speakers attend.

Upon evaluating the meeting from the authors perspective, I think that continuing education for ways to achieve “Healthy Living After Chemo” should be changed to “Healthy Living for the Survivor” due to two participants having radiation treatment, as well as, chemo. The name change would make it clear that it is for all cancer survivors and not just those survivors who have been treated with chemotherapy. Recruitment of participants should be discussed with other providers and possibly advertised in a media
outlet if the meetings were continued. Additional healthcare providers that are privy to promotion of healthcare should be a part of future planning meetings.

**Conclusion**

Receiving a diagnosis of cancer can be overwhelming for patients and create feelings of isolation, especially if there are no resources available due to living in a rural community. Offering support groups in a rural community can be beneficial to all residents including family and friends or those affected. By becoming more educated on the gaps in health promotion knowledge, NPs can provide better patient care to patients and their community. The promotion of health incorporates motivating individuals to embrace behaviors that both improve their emotional and physical quality of life and reduce their risk for premature morbidity and mortality (Coward, 2006). As a future healthcare provider it is our duty to our community to listen to the needs of the community and find a way to integrate the solutions to help our communities lead healthier lifestyles.
References


Appendix A

Healthy Living After Chemo
HEALTH PROMOTION PROJECT
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Objectives
- Awareness
- Survivorship
  - Nutrition
  - Staying Active
  - Support
  - Moving on
- What Happens Next
  - Treatment Summary
  - Survivorship Care Plan
  - Cancer Information Resources

Cancer Awareness
- Cancer is ...
- Common Cancer Types

Survivorship
- What does it mean to be a survivor?

Survivorship
- 8 Healthy Behaviors
  - No smoking
  - Avoid second hand smoke
  - Exercise regularly
  - Avoid/excess weight gain
  - Eat a healthy diet
  - Drink alcohol in moderation
  - Stay connected
  - Get screening tests and go to your check-ups
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Smoke
- Increases risk
- Quit now

Risks from Smoking
- Cancer
- Lung disease
- Stroke
- Heart disease
- Blindness
- Other health problems

Survivorship
- Exercise Regularly
  - Mood
  - Energy
  - Improves physical condition and movement
  - Maintains bone health
  - Reduces risk of fracture
  - Risk of other chronic disease processes

Survivorship
- Support
  - Family
  - Friends
  - Online Communities and Support
  - Cancer Survivorship Network
  - I Can Cope
  - MD Anderson
  - Moving on
  - You can't change the fact that you have had cancer. What you can change is how you live the rest of your life.

Survivorship
- Nutrition
  - Achieve and maintain a healthy weight
  - Eat at least 2 1/2 cups of fruits and veggies daily
  - Eat whole grain foods
  - Limit red meat and processed meat
  - Limit "saturated" fats (saturated and trans fats)
  - Eat "good" fats (polyunsaturated and mono-saturated fats)
  - Limit alcohol intake

Prevention
- Immunizations up-to-date
- Periodic Health Checks
- Annual Eye Exams
- Dentist
- Skin Cancer Prevention
- Stress reduction

What Happens Next?
- Treatment summary
  - ‘Path expert’
  - Treatment types
  - Imagine studies
- Survivorship care plan
- Follow-up with primary care provider
- Care Plan Example
Common Concerns from Survivors
- Recurrence
- Quality of Life after diagnosis/treatment/remission
- Concerns for caregivers and family (co-survivors)
- Periodic Surveillance

What to look for?
- Breast
  - Local Recurrence Symptoms
  - Same area where cancer was originally diagnosed
  - Regional Recurrence Symptoms
  - In the lymph nodes in the arm pit or collarbone near the original detection spot
  - Metastatic or Distant Recurrence Symptoms
  - Bones, lungs, liver, brain

What to look for?
- Vulvar
  - More frequent health checks
  - Inspect
  - Report
  - Itching
  - Pain, tenderness or discomfort
  - Changes in skin
  - Lesions, bumps, mass

Cancer Information Resources
- American Cancer Society
  - www.cancer.org
  - 1-800-227-2345
  - 4 a.m.-9 p.m. M-Thurs, 7:30 a.m.-9 p.m. Fri, 9 a.m.-5 p.m. Sat-Sun
- The Survivorship Center
  - www.cancer.org/survivors/bp
- National Cancer Institute
  - www.cancer.gov
  - 1-800-4-CANCER
- LIVESTRONG
  - www.livestrong.org

Questions

11/20/15
Appendix B

Cancer Support Group Evaluation
11/10/2015

1. Did you enjoy the meeting?

2. Was there anything that you learned new from this meeting that you were not aware of before?

3. Is there any information that you would like for us to provide at another meeting?