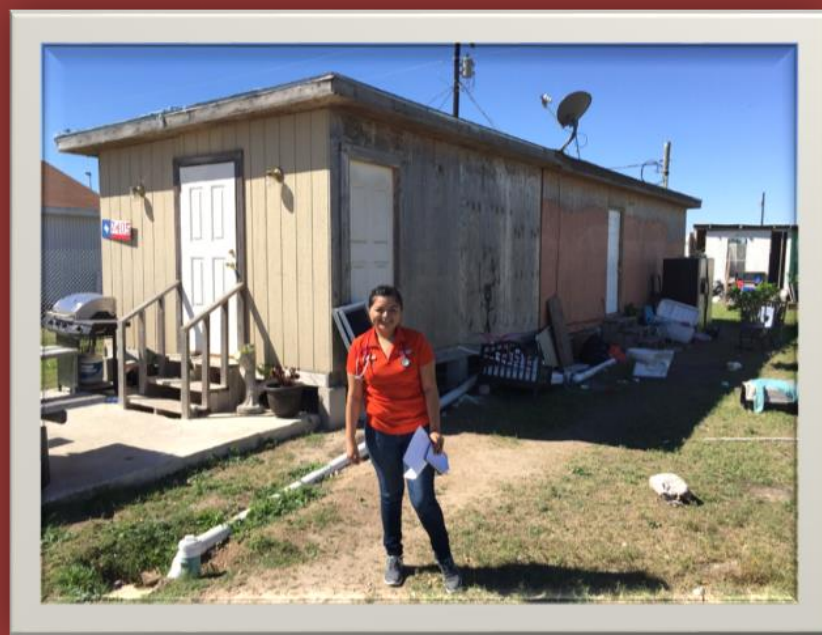
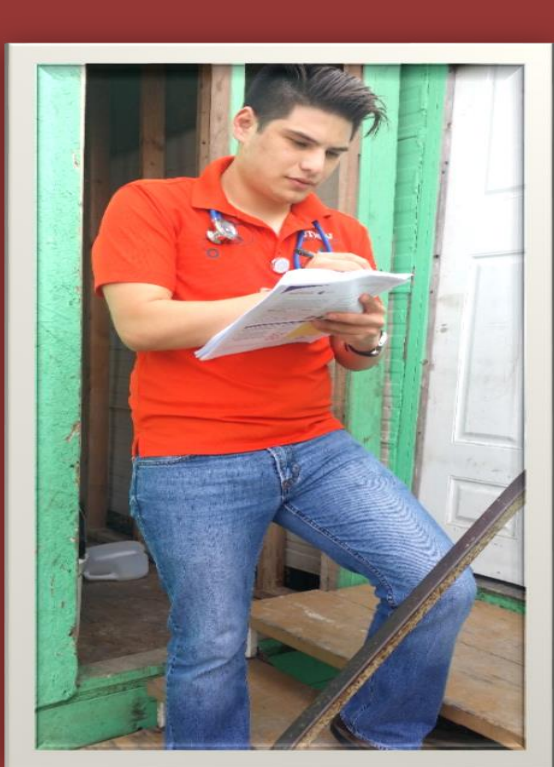
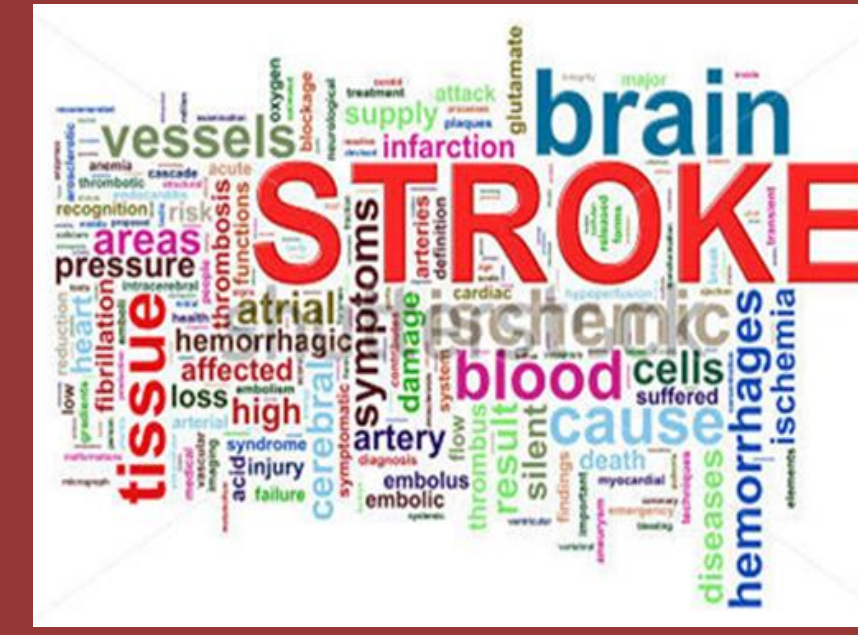


“Door-to-Door: A Community Stroke Awareness Project in South Texas Border Towns”



Nancy Nadeau, RN, BSN, MSN
Clinical Associate Professor
University of Texas Rio Grande Valley



Stroke Education in the Community

- Identify the critical importance of enhancing stroke awareness among the selected Hispanic communities in the Rio Grande Valley (RGV), Texas.
- Interpret the impact of home visits by the Bachelor of Science (BSN) in Nursing students regarding stroke awareness.
- Examine health promotion intervention challenges in community stroke awareness in the Rio Grande Valley.

Review of literature

Community Stroke Awareness

Summary:

- Stroke places a significant burden to all affected individuals, but it is perhaps more significant amongst members of minority and ethnic communities, who may experience poorer awareness of stroke symptoms than the general population. Several initiatives tried to improve public awareness that the symptoms of stroke need to be treated as a medical emergency.

However, ethnic communities present cultural barriers, requiring tailored health promotion interventions, whose effectiveness remains uncertain.

Gardois, P., Booth, A., Goyder, E., Ryan, T. (2014)

A need for increased continuity and communication after hospital discharge

Summary:

- Despite receiving formal stroke education material during their hospitalization, there were three major gaps in stroke knowledge that participants noted, including (1) lack of stroke knowledge/awareness, (2) need for stroke education, and (3) fear of recurrent stroke and comorbid diseases. Most ICH survivors had no memory of their hospitalization.

This study suggests a need for increased continuity and communication with health-care providers to address the evolving educational and practical needs of stroke patients and their caregivers after hospital discharge. Ing, M., Linton, K., Vento, M., Nakagawa, K. (2015)

Public recognition of major stroke symptoms is low

Summary:

- Only 17.2% of respondents overall (5.9% to 21.7% by state) correctly classified all stroke symptoms and indicated that they would call 911 if they thought someone was having a stroke. Recognition of all symptoms and knowledge of when to call 911 were comparable by gender but lower among ethnic minorities, younger and older people, those with less education, and current smokers compared to whites, middle-aged people, those with more education, and nonsmokers, respectively.

There were no substantive differences by history of hypertension, diabetes, heart disease, or stroke. Greenlund, K., Neff, L., Zheng, Z., Keenan, N., Giles, W., Ayala, C., Croft, J., Mensah G. (2003)

Awareness of the symptoms of stroke, and what to do about them, is limited

Summary:

- The three surveys were completed by 251 members of the public. Hypertension and smoking were recognized as risk factors for stroke by 71% and 53% of respondents respectively. Before National Stroke Week, slurred speech was identified by 51% and both slurred speech and upper limb sensory loss was identified by 62% as warning signs to provoke presentation to an emergency department (ED). There was no significant difference in the survey results following National Stroke Week.

There was little improvement after the national week-long awareness campaign. The lack of public awareness about stroke warning signs must be addressed to reduce mortality and morbidity from stroke. Spark, J., Blest, N., Sandison, S., Puckridge, P., Saleem, H., Russell, D. (2011)

Review the data collected from pretest and posttest done by the BSN nursing students visiting 134 homes in two different occasions using FAST as a tool.

Community Health Nursing 4504 Bachelor Science of Nursing Program: Senior class 2017 (All students are in their last semester and had received knowledge about stroke management during their medical-surgical & health promotion courses)

Community Assessment in Rio Grande Valley, Texas: La Joya to Brownsville (76 miles)

- Windshield survey & website search
- Interview key informants in the community

Home visits x 4 times with the same family

- Health assessment (individual/family)
- Review of immunization & utilization of community resources
- Stroke Awareness Education
- Post Stroke Awareness Education 4 weeks later



NURS 4504 Community Health Nursing
Pre-test/Post-test for Home visit # 3 (Stroke Education)

Ask the interviewee those questions; (translate in Spanish if needed – ask your group's peer if you need assistance – group of 3 for safety)

1. Do you know the warning signs of a stroke? Yes / No (ask for 3 of them – write their answers)

2. Do you know what you should do? No _____ Yes _____ (ex: call friend/family member, get to the hospital by driving, call 911/EMS)
Summarize the response: _____

3. Do you know why it is important to note the time of the first sign of a stroke? No _____ Yes _____
Summarize the response: _____



University of Texas Rio Grande Valley
NURS 4504

HOME VISIT # 4
Evaluation: Review of At-risk/Vulnerable population
Ethnicity reported by the client/family: Hispanic Date of birth: 3/XX/1988
Blood pressure: R/L 132/52 Communicated with faculty: Y/N

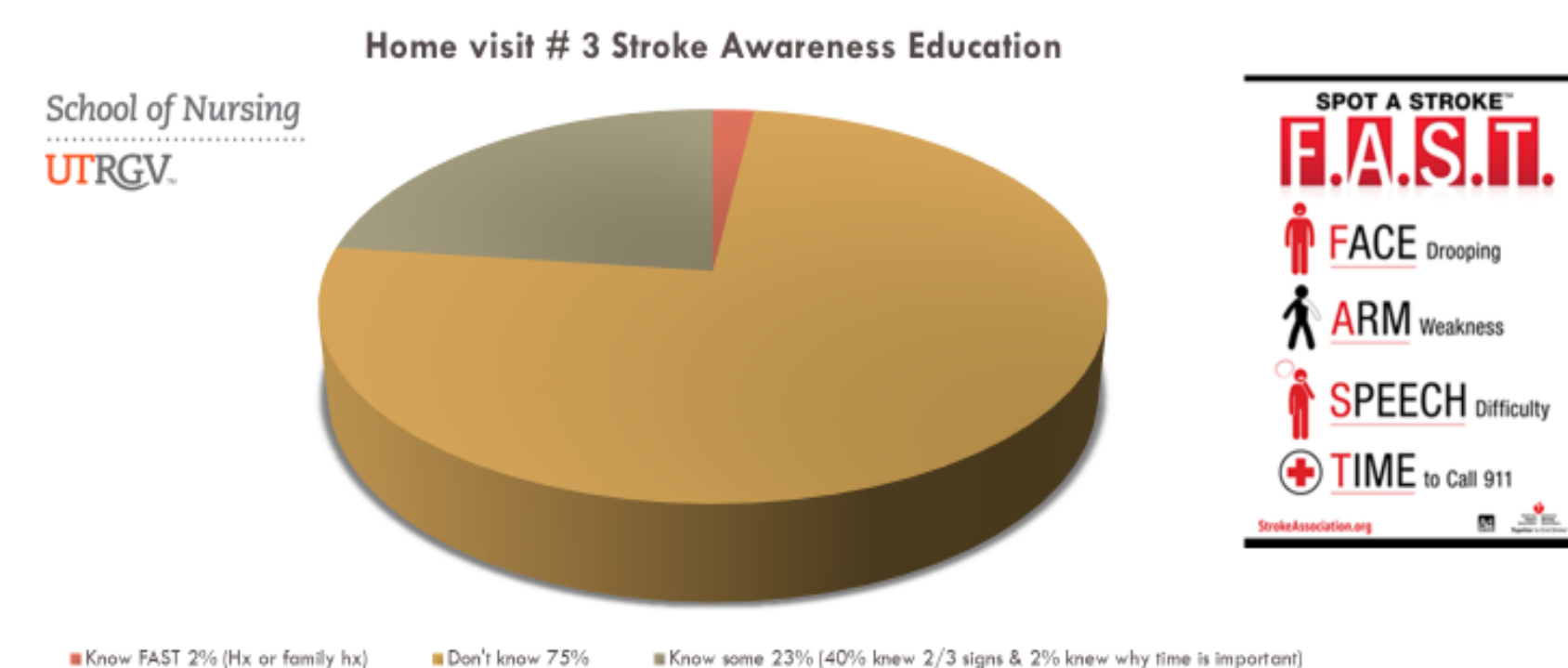
Time in: 9:45 am Time out: 10:20 am
Client initials: (Consent to your visit (photo taken) SJS/ Student initials: EQ Date: 4/6/2017

1. Provide education about Stroke Awareness – Project Every minute count
2. Do Post-test
3. Summary of the visit:
Education on the signs of stroke and what to do when one occurs was provided to the client. The acronym FAST was discussed and elaborated on. The client was asked to take the post test in which she did very well on compare to last visit on stroke signs. This demonstrates that teaching that was done over signs of stroke on home visit #3 was effective. The client verbalized understanding of the teaching previously done./FG

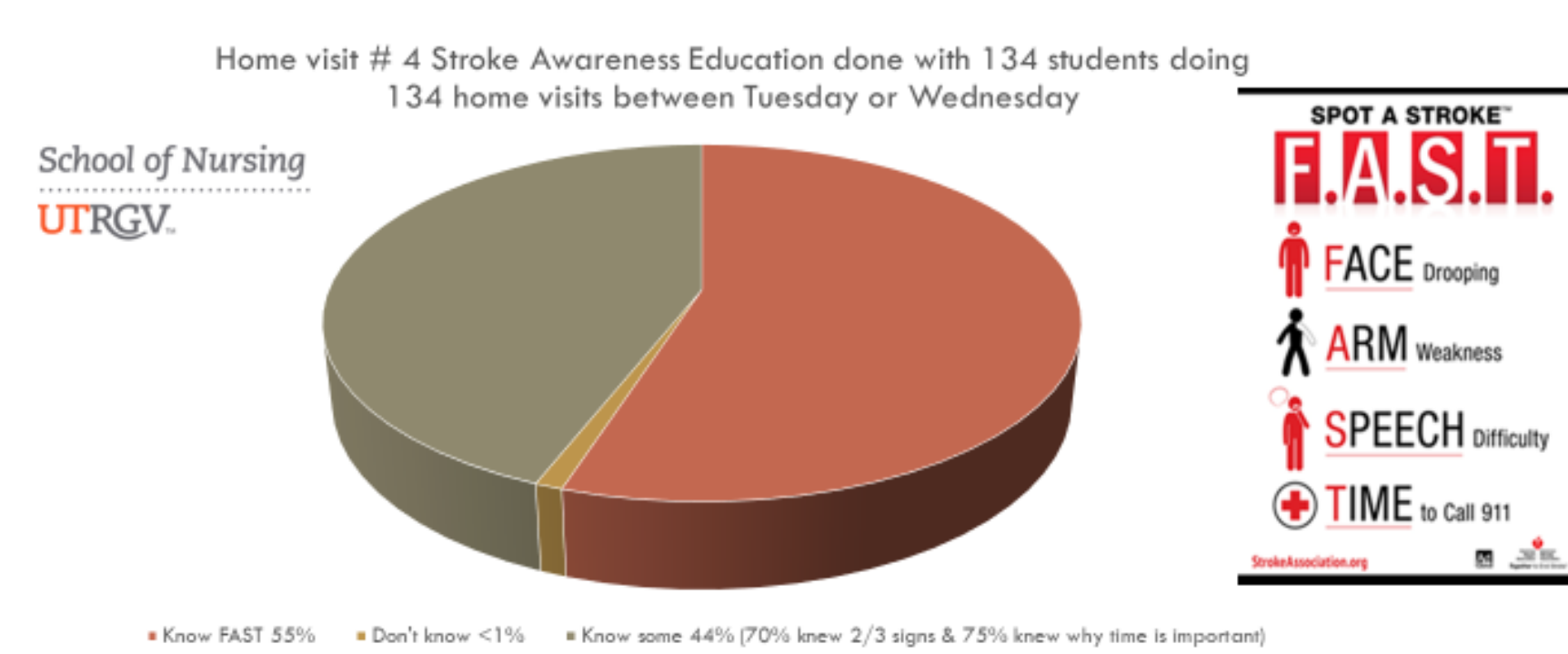
School of Nursing
UTRGV



RESULTS FROM HOME VISIT # 3 PRE-TEST - 3/8/2017 - TOTAL 134 VISITS



RESULTS FROM HOME VISIT # 4 POSTTEST - 4/7/2017 - A MONTH LATER



Home visits: Students' Experience

STROKE IN THE VALLEY – FAMILY HX School of Nursing
UTRGV

"I was able to discuss with her about the symptoms of a stroke. She stated that she was familiar with the symptoms of a stroke because her husband had gone through a stroke 3 years ago."

REMEMBERING THE SIGNS School of Nursing
UTRGV

"I was able to perform a pre-test and a post-test with AG and JG regarding Stroke Prevention. After assessing their understanding with a pre-test, I provided them both with education about the warning signs as well as the importance of time. To my surprise AG and JG had remembered a lot of the teaching provided to them on my previous visit. After providing them with more information, I assessed their understanding with a post-test, and they both did wonderfully. I believe that AG and JG gathered a very strong understanding and a good education about the warning signs of a stroke, which led to the event of a stroke, and the importance of time in relation to recovery. I can only hope that both AG and JG share their knowledge with their friends and family."

CARING FOR OUR RGV COMMUNITY School of Nursing
UTRGV

"I feel very blessed with the opportunity to pass on my knowledge to better influence others and promote healthy habits. The feeling of gratitude from my family when I visit each week and their readiness to enhance their knowledge greatly influences how I learn in order to share that knowledge with them."

HEALTH LITERACY School of Nursing
UTRGV

"First I provided LAMP with the teaching material which was a simple handout in Spanish about the signs of stroke. I assessed LAMP's ability to read the provided handout and discovered that he was unable to read the handout appropriately. So with the help of my team member we were able to do a return demonstration to LAMP. We illustrated the signs and we told him to demonstrate them back to us."

Community Health Education Fair School of Nursing
UTRGV

Celebration of Health FIESTA DE SALUD

Great Experiential Students' Learning opportunities for MSNFP & BSN students

HISPANIC COMMUNITY – RISK & SELF-CARE School of Nursing
UTRGV

"I was able to teach him about the warning signs of stroke and how he should act fast if he begins to see them. He stated that he tries to take care of himself by not eating fatty food and staying active. With that being said, I let him know that he is at risk for a stroke because there was a family history of one. He stated that he does everything possible to stay healthy so he does not have to take medication. When he saw what happened to his brother, he knew he would not want that to happen to him."

Examine health promotion intervention challenges during Community Stroke Awareness in the Rio Grande Valley, Texas

DETERMINANTS OF HEALTH School of Nursing
UTRGV

"Being able to go to these communities and provide teachings on topics that are so important is great. Because if these families are ever in a situation where someone is having a stroke and they remember what that nursing student who came to their house one morning had taught them, then they can help save someone's life. My clients also have very little access to high quality education, nutritious food, decent and safe housing, affordable transportation, or health insurance."

PERCEPTION OF EMERGENCY School of Nursing
UTRGV

"EL is a 67-year-old lady that lives with his son of 50 year old. 'I started talking about stroke asking her if she knew the warning signs that someone was having a stroke. EL informed me that he had learned the hard way. She explained that her husband passed away from a stroke 10 years ago. She said that her husband started to feel his fingers on his arm and feeling unwell. While talking a shower he collapsed and 911 was called. A few hours later her husband had passed away from a stroke. 'Another family member that recently had a stroke was her son. She mentioned how scared she was since they already been thru this with her husband. Fortunately her son survived his stroke and now he is healthy since he has made weakness in his right half of his body. 'She mentioned that it has been hard on her but that she is happy that her son survived. She was really glad that we as a group were focusing on educating the community. 'She said that we might not know if her son lasting these might save a life in the future. She wished that her and her family knew this before her husband had his stroke. She believes that her husband might have survived since they would have called 911 right away."

UNINSURED & UNDOCUMENTED School of Nursing
UTRGV

Many of these families face barriers preventing them from receiving health in the valley and for my family the two disparities they face is immigrant status and social economic status. They are not insured because they are not US citizens and because of low income resulting lack of transportation, money, or time. I am aware of the high level of poverty we live in the valley and it made me humbler at every home visit."

REFER TO LOCAL COMMUNITY RESOURCES School of Nursing
UTRGV

"On this visit besides checking C.A.'s blood pressure, her husband, R.A. gave me the opportunity to check his blood pressure. His blood pressure was 162/112 and when I checked it was 156/110. According to R.A., he felt the time was needed to tell me that his blood pressure was extremely high. I informed him that it vital to go to the physician's office and when he started having the symptoms or feeling, let him know that the time was needed to tell me that his blood pressure was extremely high. I informed him that the time was needed to tell me that his blood pressure was extremely high. I informed him that the time was needed to tell me that his blood pressure was extremely high. This visit left an unsettling feeling inside due to the uncertainty of R.A. going to a health professional to seek help for his blood pressure."

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