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Background

There are more than 700,000 individuals with hypertension in Mississippi (Mississippi State Department of Health, 2019a). Hypertension is a chronic illness that causes substantial health disparities in the United States. An individual with hypertension is at increased risk for the development of heart disease, stroke, chronic kidney disease, blindness, and decreased mental capabilities (Mississippi State Department of Health, 2019a). A decrease in the incidence of diagnosed and uncontrolled hypertension can be achieved by incorporating efficient community outreach programs that are designed specifically for the selfmanagement of hypertension in Yazoo County. The social determinants of health affecting African Americans in Yazoo county include low income and being under insured. There are new approaches being considered to improve the education and health promotion of African Americans. Telehealth is a form of digital communication that can be used for supporting patients with chronic conditions (CDC, 2020). In 2020, COVID-19 became a pandemic and has changed how healthcare is being performed in the United States.

Aims

• The objectives of the current project for the participants are 80% will attend all sessions of 30-day program, 85% will increase knowledge level by the end of the program as evidenced by scores on the Hypertension Self-Care Profile tool, and 80% will report blood pressures less than 140/90 by the end of the program.



Methods and Instruments

- African American adults age >18 with a diagnosis of hypertension for 6 months or longer
- primary care clinic in rural central Mississippi
- educational intervention for this outreach program employed six videos
- hypertension self-care profile (HBP-SCP) assessment tool pre-and post intervention
- Rapid Estimate of Adult Literacy in Medicine—Short Form (REALM-SF)

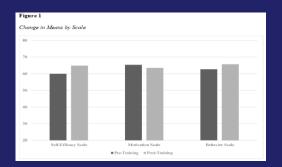
 Pre-test, educational intervention, and data abstraction

 Post-test, question and answer session, and data abstraction

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Results

Data were analyzed to assess if there was a statistically significant increase between the pre- and post-data in the three scales of the tool: the Self-Efficacy scale, the Motivation scale, and the Behavior scale. There was an increased level of behavior and self-efficacy noted on the HBP-SCP by end of the program The t-test and Mann-Whitney U test revealed that the difference observed was not statistically significant. The systolic readings, on average, decreased by 5.0 points. The diastolic readings, on average, decreased by 6.4 points.



Implications

- Recruiting larger sample size
- Implement a three month program
- Educational interventions every two weeks during the program

