

# Participatory Research: Students Partner to Enhance Health Equity



**ZEPURE SAMAWI PHD, RN, FULBRIGHT SCHOLAR, PROFESSOR  
College of Nursing, Health Sciences and Business, SAINT XAVIER UNIVERSITY**

**CHRISTINE BECK PHD, MSN/MA, FNP-BC, PHCNS-BC, CTN-B  
ASSOCIATE PROFESSOR SCHOOL OF NURSING, TRINITY CHRISTIAN COLLEGE**



---

**NLN EDUCATION SUMMIT**

**Extraordinary Nurse Educators Leading in Extraordinary Times**

**September 28- 30 , 2023 Washington, DC**

# Presenters Disclosure Statement

Drs. Samawi and Beck have no conflict of interest in relation to this presentation.

# Outcome of Presentation

- Discuss Community Based Participatory Research (CBPR) strategies to implement student led Health promotion activities to promote equity , diversity and health of populations.

# Aim

This qualitative descriptive research aimed to explore a community based participatory research study of the experience of nursing students and community participants of their perceptions of the community immersion experience.

# **Review of Literature**

# Future of Nursing Education

## Diversity— Inclusion-Equity

### **Educating Nurses for the Future**

*“You cannot transmit wisdom and insight to another person. The seed is already there. A good teacher touches the seed, allowing it to wake up, to sprout, and to grow.”*

Thich Nhat Hanh, global spiritual leader and peace activist

# What to expect 2030

## The Future of Nursing Profession & Education

2030 and the nursing profession & education:

- It will look very different , health practices; changing America, multiculturalism etc.
- Nursing school curricula need to be strengthened so that nurses are prepared to help promote health equity, reduce health disparities, and improve the health and well-being of everyone.
- Nurses working in community- based settings.

# What to expect 2030

## The Future of Nursing Profession & Education

Morton and colleagues (2019) identify essential content to prepare nurses for community-based practice:

- Social Determinants of Health (SDOH)

- Health disparities/health equity

- Cultural competency

- Epidemiology

- Community leadership



# What to expect 2030

## The Future of Nursing Profession & Education

Thornton and Persaud (2018) state that the content of nursing education should include instruction in:

- Cultural sensitivity and culturally competent care
- Motivational interviewing
- Screening for social needs
- Referring for services

# National League for Nursing's (NLN's) Vision for Integration SODH into Nursing Education Curricula

## Faculty Role

- Create partnerships with community agencies to provide experiences that intentionally expose students to address the impact of SDOH on patients, families and communities.
- Be intentional about providing opportunities for students to assess and implement actions to address SDOH in a variety of health care settings.
- Develop curricula that strengthen the links between SDOH, health equity, and nursing's social mission.

# AACN Essentials --10 domains for nursing education

Within the 10 domains AACN specific competencies essential for nursing practice include:

- Engage in effective partnerships
- Advance equitable population health policy
- Demonstrate advocacy strategies
- Use information and communication technologies and informatics processes to deliver safe nursing care to diverse populations in a variety of settings
- Use knowledge of nursing and other professions to address the health care needs of patients and populations.

# Community Based Participatory Research (CBPR)

- CBPR is an approach to research that is about effecting change to improve health and well-being in the communities involved.
- Nursing students learned from the participants about the impact they made .

# Community Partnership and Participatory Research

- Faith-based community health programs with participatory approaches have been recognized as an important tool in teaching health promotion (ANA, Scope and Standards of Practice, 2012).
- Nursing schools need to partner with community agencies to provide the students the experience to be prepared to work with diverse population with different life experiences and cultural values in order to impact the health of communities .

# Community Partnership and Participatory Research

- Students collaborated and implemented health promotion preventative care to the community participants.
- CBPR strategies were used to provide preventative care to advance health equity and health literacy with the intention to improve the health of diverse, multiethnic minority community partners.

# Partnership with Faith Community Nursing

Nursing practice that focuses on:

- Health Promotion and Primary Prevention
- Culturally and Linguistically Appropriate Services

# Goals of Community Health Nursing Practicum Immersion

- Coordinated with the community leaders/pastors and community participants on needs based specific health related topics and projects to provide health promotion and/or disease prevention activities.
- Topics identified: Healthy lifestyle choices across the lifespan. Nutrition (healthy eating/healthy food choices; reading food labels), physical fitness, education on medication side effects , therapy dogs to handle anxiety and how to discuss health concerns with the provider.



# Goals of Community Health Nursing Practicum Immersion

Interviewed key informants, pastors and community volunteers, and community participants to identify health fair projects.

Developed and implemented culturally competent holistic health promotion activities.

# Health Promotion Project Outcomes

- Outcome #1: Topic Selection: Determine the health promotion topic for a targeted population that meets the needs of the community setting.
- Outcome #2: Identify Learning Outcomes(LO) and Submit a detailed outline: LO; content , methods of instruction, evaluation, project materials and references.
- Outcome #3: Collaboration: Collaborate meaningfully in engaging with clinical partners, faculty and team members.
- Outcome #4: Creative implementation: Creative implementation: Creatively implement the health promotion project to target population utilizing teaching/learning strategies appropriate to the community participants.

# Health Promotion Project Outcomes

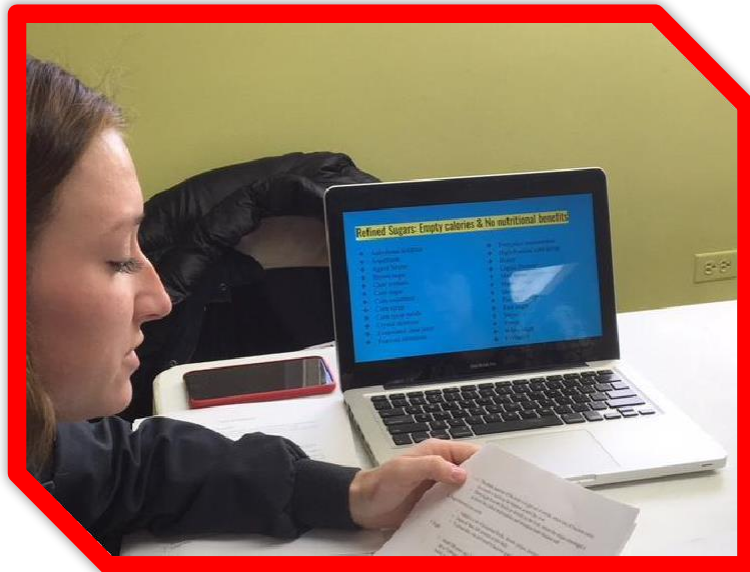
- Outcome #5: Evaluation of Target Population Needs: Determine a process for evaluating how the presentation met the needs of target population.
- Outcome #6: Professional presentation delivery: Professional presentation delivery : well prepared, organized etc.

# Outcome of the Community Immersion: Health Fair

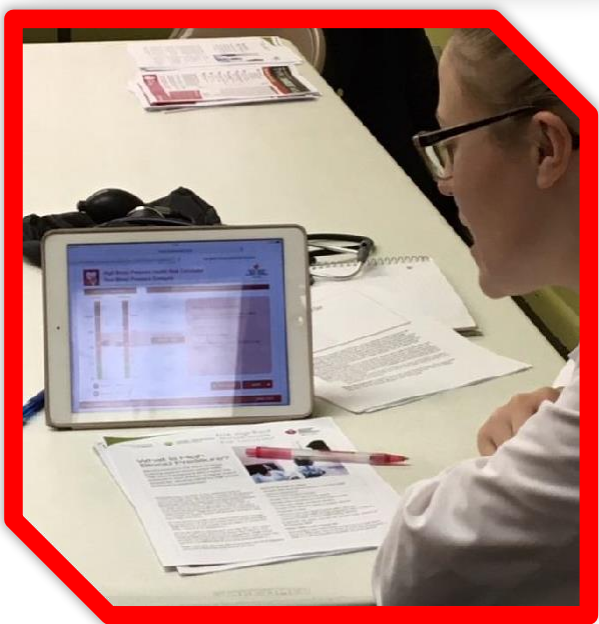
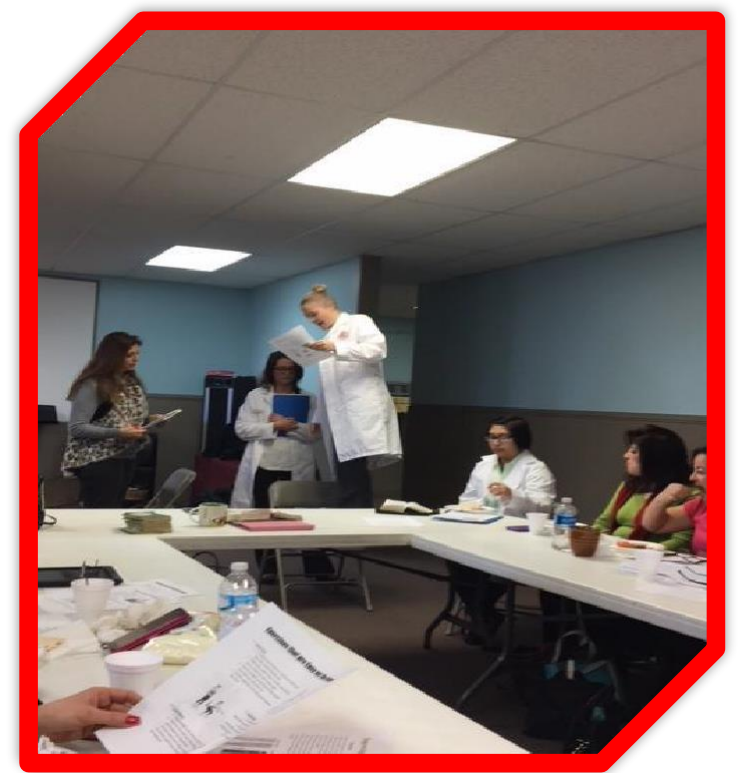
Objective of Health Fair –Students own words

To educate our local community members and increase their awareness of healthy food and lifestyle choices in regard to proper nutrition, and how that may impact their overall health and wellness.









# Goals of CBPR

- Students: Reflect on the immersion experience and future professional role as advocate and citizen.
- Community participants: Evaluate student interventions through participants feedback.

# Research Questions

- What is the experience of both community nursing students and participants in terms of the implementation of a culturally competent student-led community nursing practicum.



# Methods

# Research Design

Qualitative descriptive

Open and flexible semi-structured interview format to allow nursing students and participants to describe their experience of:

- Immersion of nursing students with community participants.
- Immersion of community participants with nursing students.

# Ethical Considerations

IRB approval

All participants were informed of the aim of the study

Written consent received from all participants

All transcripts used numerical identifiers

# Setting & Sample

- Community and Population Focused Nursing Care Practicum Course.
- Faith Based Multiethnic Church Setting- students collaborate with multi-ethnic and linguistically diverse participants.
- Community participants: African American, Middle Eastern, and Caucasian (n=13) .
- Senior level nursing students (n=8). Enrolled in the clinical practicum course.

# Data Collection

- Data was collected at the competition of the seven-week clinical.
- Separate student and community participants focus groups were arranged and conducted by researchers at convenient times in quiet rooms at the university and at the church .
- Semi-structured interview format with open-ended questions.
- Both focus group interviews transcribed verbatim by an independent transcriber fluent in both English and Arabic.

# Data Analysis

## Process of thematic analysis

- 1) Early focus and lines of inquiry
- 2) Central concerns, general themes, exemplars, and paradigm cases,
- 3) Shared meanings
- 4) Final interpretations
- 5) Dissemination of the interpretation

# Trustworthiness

- 1) Balanced integration
- 2) Openness
- 3) Concreteness
- 4) Resonance
- 5) Actualization

A second meeting was arranged for both groups in order to validate the themes after initial thematic analysis was completed.

# Thematic Analysis

## Students and Community Participants Shared Themes



# Health As Holistic: a Balance of Mind-Body-Spirit and Connected to Faith

## STUDENTS

“When they would talk about their health, they would talk about their faith and how also, you know, make them improve, make them feel better as a whole. So, it was also nice to see that.”

“They pretty much talked about their health in terms of their faith...”

## COMMUNITY PARTICIPANTS

“Last time we were learning about healing and we know it reflects your body science ..... your mental health your psychological health and physical health. So, I believe it was powerful thing for them to see how we focus on things on inner healing there is no prescription drugs for it”.

# Value of Faith-Based Experience For Learning

## STUDENTS

“I think it has opened our eyes into what faith community nursing really is. And I feel like we had an amazing experience that maybe not every other clinical got to have. It was very enlightening even if you do have a faith behind you are not. That chapel is very accepting and it just opened our eyes to people that spirituality is very important to them. And we still got to accommodate to them”

## COMMUNITY PARTICIPANTS

“I think it is powerful thing we do for those nurses you know that from spiritual point of view now just from a general point of view of education for them to come and be exposed to other cultures other people of faith that can broaden their education experience so they can relate more to people you know just you know make them more ...understanding...”

# Sharing Culture

## Cross-cultural leadership

### STUDENTS

“I think it is important for nurses to be culturally competent, so it was very helping that we got two different groups completely different from each other so we go to adapt to one culture and then to the next culture and bring it together during the teachings and we did find a way to just incorporate culture, the Arabic culture and the Elderly women culture. And they all shared different aspects of their cultures and we shared our teaching and our educations, which is actually part of the nursing culture”

### COMMUNITY PARTICIPANTS

“Cultures, about different people you know related to Jesus about Muslims. We told them how to deal with people because not all people are religious but just so we give them another experience of their life”

# Reciprocal Learning

## STUDENTS

“I think you definitely do see like lifelong learning for sure because again these are older women middle-aged women but their learning doesn't stop...learning doesn't stop as we taught them. They also taught us that learning was just a continual cycle. And you know you never stop learning new things to incorporate into your life”

## COMMUNITY PARTICIPANTS

“One time we talked about how to deal with negativity, negative people, negative circumstances how to come over that. And I feel that is very powerful for the nurses because all they deal with is negative situation all whole day. So, I felt that we sow those seeds in their lives and I'm praying that the Holy Spirit would bring it to their memory. That they remember the words of truth to help them out. And they are in place of influence. Those nurses going to influence a lot of people. So, what we are able to impart in their lives. I am praying it will grow and bring truth, and they will be you know a good influence to others. So much to talk about it, and this is the way how I see it”

# Healing

## STUDENTS

“In the past, we talked about consoling people with grief and different physiological problems that they may have. So, I think they took into consideration not only the physiological aspects but incorporated spiritual aspects to that as well”

## COMMUNITY PARTICIPANTS

“I have a pain in certain pain in life and when we were sharing that how all of us need inner healing and we find out healing in ourselves”

# Healing

## STUDENTS

“They gave us a directing teaching on how you have to heal yourself spirally in order to be healthy physically. So, they gave us bible verses and really opened themselves to us and told us personal experiences of how they forgave people and felt completely different person. And I think that spoke a lot how you need to be spiritually healthy to be healthy”

## COMMUNITY PARTICIPANTS

# Heath Education

## Enhanced health literacy

### STUDENTS

“ Instead of just teaching them we thought they needed to know, we actually took the time to talk to them and find out their health concerns ....and we gave them templates, real resources... it was really good to take their concerns into consideration with teaching”.

“So yeah, our role was to assist their need, and you got to see what they want to learn so that was the most important part, getting to know what they want to learn and teaching them the best of our abilities, teaching it precisely and easily for them, you know, to incorporate it to their lives”

### COMMUNITY PARTICIPANTS

“Yeah, we learned a lot. We did not realize in any way that the medications we take have side effects on our kidneys or anything else. I want to thank God for what we have learned. If we learn one thing everyday, we would realize more and more stuff that could affect our health. Because this is something was never taught in our home country, or even in life”.

“My life is centered around family cleaning cooking so I never really focus on taking care of myself. So, I think I learned so much from the nurses, I never thought about disease, about medicine and the side effects of medicine”

# Themes Unique to Students

## Clinical judgment

“It was also part of critical thinking that we couldn't just tell them all medical terms that we heard of that we learned we really like had to accommodate the medical jargon into everyday language that everyone could understand”.

“So kind of we applied the principles of teaching and learning in this clinical setting.  
They ask questions in our group and we had to think very quickly to be able to answer and give them information from things that we've learned in the past”

## Enhanced leadership

“Well, what we need is we do need help from each other. You know we just knew we what we had to do. And it was all perfect. Honestly that health fair was really good. And every concept you know intertwined and you know the woman really loved it and benefited from it. It really just you know makes us see that we got our work done and it was effective”



# Themes Unique to Students

Role of Educator	Openness to the Encounter
<p>“I feel like, in our building our relationship we took on more than health educator, I think we were coordinating services for people. We talked about therapy dogs for the one lady she had bad anxiety and providing them with resources and also, we kind of allowed for questions and they seemed they really engaged in that. So, I think that we were more than just health educators for them”</p>	<p>“Welcoming... I mean their spirits were very welcoming! I mean I had somewhat of a closed mind going into this. I thought what I could actually do as a nurse in a church or a chapel. But there's still much education in it and there's so much teaching and you can give them resources that they need. They're still part of the community. They just have the spiritual aspect of the community there. So, it was very enlightening to open my mind up and how welcoming they were to just accept you know nursing students into their chapel and they accepted us with teachings they listened to us while we listened to them also with their Bible studies”</p>

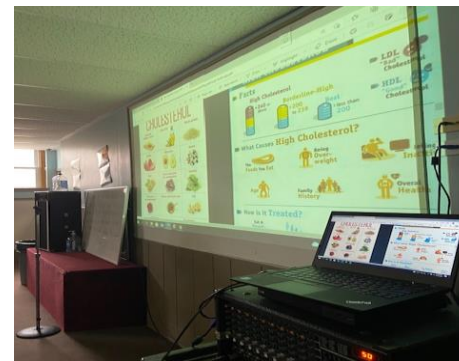
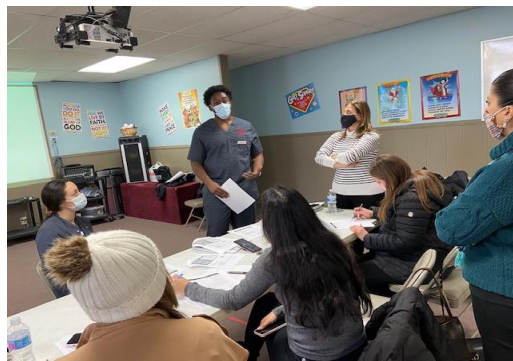
# Implications

- Experience in the community is essential to understanding SDOH and gaining the competencies necessary to advance health equity.
- Community-based education offers opportunities for students to engage with community partners and organizations.

# Conclusion

- This community based participatory research explores both perceptions of nursing students and community participants of their experience of a health promotion immersion in a nontraditional setting.
- The partnership advanced health equity, literacy , awareness of social determinates and cultural competency to improve the health of a diverse, multiethnic minority community at a nontraditional clinical setting.





**THANK YOU!**





# References

American Association of College of Nursing (2021). The Essential: Core Competencies for Professional Nursing Education.

ANA and Health Ministries Association (2017) Faith Community Nursing: Scope and Standards of Practice, 3rd Edition.

National Academies of Sciences, Engineering, and Medicine (2021); National Academy of Medicine : Committee on the Future of Nursing (2020–2030).

# References

NLN. A vision for integration of the social determinants of health into nursing education curricula. 2019. [January 10, 2020]. <http://www.nln.org/docs/default-source/default-document-library/social-determinantsof-health.pdf?sfvrsn=2> .