

4th International Conference on **Nursing & Healthcare**

October 05-07, 2015 San Francisco, USA

Affecting Hispanic/Latino patient health indicators of metabolic syndrome utilizing a culturally sensitive education program

Michele Cellai
Regis College, USA

This is an evidence based practice project that utilizes Dr Rachel Spector's theory for trans-cultural nursing as the theoretical framework. Health and healthcare disparities due to race and ethnicity are well to known to be a problem in the United States (Institute of Medicine, 2002). Data shows that metabolic syndrome is found at a higher prevalence in the Hispanic/Latino (a) population (American Heart Association and American Stroke Association, 2012). The research reveals that lifestyle change is an important component of the treatment for metabolic syndrome. Providers fail to provide adequate education on metabolic syndrome and lifestyle change (US Department of Health and Human Services, 2013). Within the United States there are very few education programs that focus on the treatment of metabolic syndrome and lifestyle change for the Hispanic/Latino (a) population. This evidence based practice project which uses the Russwom and Larrabee (1999) framework for change has been the development of a culturally competent education program for the Hispanic/ Latino (a) population. The education program will be available in English and Spanish as English fluency has a significant impact on health literacy. The next step in the project is to begin a quantitative research study that will evaluate the effect of this culturally competent education program on metabolic syndrome and lifestyle change. A culturally competent education program must be part of any effort to reduce health disparities and to improve the health of the Hispanic/Latino (a) population.

mcell249@regiscollege.edu

A clinical framework for treatment of depressed women in a primary care setting: Implementing physical activity as a treatment option

Natasha Simmons
Georgia Baptist College of Nursing, USA

Background: The integration and collaboration of behavioral health care and primary care to treat depression is essential to improve quality of care and health outcomes. The US Preventive Services Task Force recommends routine screening for depression in adults in a primary care setting only if a behavioral health clinician is available to ensure accurate diagnosis, treatment and follow up. Currently there is not a documented clinical framework implemented in an integrated health care setting which includes behavioral health and primary care services to address this problem. The evidence-based program Physical Activity in Depressed Women (PAID-W) was developed to serve as a model for incorporating benefits of physical activity in depressed women in an integrated health care setting which includes behavioral health and primary care services to improve outcomes in depressed women.

Objectives: To describe the components of the PAID-W Program including; design, budget, staffing, space requirements, physical activity, program process, group sessions, outcome measures and evaluation process, to discuss how to successfully plan and implement the evidence- based PAID-W Program into integrative health care setting which includes behavioral health and primary care services and also to discuss the potential outcomes of the PAID-W Program in the treatment of depression in women.

Conclusion: A physical activity based intervention program that integrates behavioral health care in the primary care setting has the potential to significantly impact the treatment of depression in women.

laibhen-parkes_n@mercer.edu