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Global guidelines for culturally competent nursing practice

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Globalization and migration of populations including professional nurses has heightened the challenge of caring for patients and groups with different life experiences from those of health providers. It has also heightened the awareness of health and care inequities in populations within a society and across different countries. A task force comprised of members of the American Academy of Nursing and the Transcultural Nursing Society was formed for the purpose of proposing standards of nursing practice that promotes culturally congruent/competent and equitable care for diverse populations worldwide. The first draft was published in the Journal of Transcultural Nursing and subsequently presented at the 24th quadrennial ICN Congress. Nurses around the globe were invited to comment on the standards' applicability, relevance, and completeness using the worldwide web. This presentation incorporates the input and feedback from nurses across the globe and discusses the process of global implementation of the guidelines.

Biography

Marianne Hattar-Pollara is Chair of the Nursing Programs at California State University Northridge. Her research and publications examine cross cultural and global women's health issues and international nursing. She holds a Doctoral degree from the University of California, San Francisco, a Master's degree in psychiatric nursing from the University of California, Los Angeles. She is a Fellow of the American Academy of Nursing (FAAN) and past Chair of the Expert Panel of the Global Nursing and Health of the American Academy of Nursing. She is a Fulbright scholar and currently serves on national and international Board of Trustees.

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Family-center empowerment model influencing lifestyle of heart failure patients

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Aim: Cardiovascular diseases are the most prevalent disorders in progressed countries and heart failure is the major one among them. This disease is caused by numerous factors and one of the most considerable risk factor is unhealthy lifestyle. So the aim of this research is to study the effect of family-center empowerment model on the lifestyle of heart failure patients.

Methods: This is an interventional two group (test and control) study on 70 heart failure referring patients in Hazrate Fatemeh Heart Clinic in Shiraz. After convenience sampling, patients were divided into two control and test groups by block randomization method. The intervention based on family-center empowerment model performed during 5 sessions. Research tools are lifestyle and demographic information questioners. Regarding the research aims, chi-square, independent T-tests, and paired T-tests were used for analyzing data.

Results: Both test and control groups was similar regarding their demographic information ($P > 0.05$). Before intervention in lifestyle all measures of two groups were equal ($p > 0.05$) but after the intervention, meaningful statistical differences recorded in all dimensions of lifestyle ($P < 0.05$).

Conclusion: Performing the family-center empowerment model for heart failure patients is practically possible and lead to improvement or refinement of their lifestyles and their families.

Biography

Mahnaz Rakhshan has completed his Ph.D. at the age of 33 years from Shahid Beheshtee University of Medical Science, School of Nursing and Midwifery. She is the Director of Medical-Surgical department. She has presented more than 25 papers (oral and poster) in national and international congress.

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