Laurie Hamilton

UTILIZING CULTURALLY CONGRUENT EDUCATIONAL INTERVENTIONS TO IMPROVE NATIVE AMERICAN DIABETIC OUTCOMES

Abstract
Native Americans suffer from diabetes type II at a proportionately higher rate than other populations. Management of diabetes in this population is problematic and compounded by multiple influences such as socioeconomic, cultural and linguistic variables. The purpose of this DNP project was to investigate cultural influences on Native American diabetic outcomes. Do cultural influences act as barriers to diabetic medication, diet and education understanding? Would a Native American nurse applied education on medication, diet and exercise improve diabetic outcomes in a 3 month period? A convenience sample of 6 Native American participants obtained at a primary care clinic were given a Native American nurse applied education intervention. The intervention was preceded by participants taking a pretest, and followed by a post test. Baseline Hemoglobin nA1c and BMI were measured at baseline, and again at 3 months. Health care recommendations by the baseline provider also were tracked for a 3 month period to see if the patients met those recommendations.

Participant’s post test scores were not significantly improved. Hemoglobin A1c and BMI were not conclusively affected by the Native American nurse education. The initial recommendations for health care were followed by the participants. But the sample did not uniformly have 3 month follow-ups. Data from this project is not sufficient to determine the benefits of utilizing a Native American Nurse when educating a Native American population. This is partially due to the limited sample size which in turn was influenced by time constraints and low sample recruitment from the population.