Integrating research, education and practice in the development of an interprofessional educational program on healthy aging.

Lisa Skemp PhD, RN, FGSA, FAAN
Purpose

Describe development of the Interprofessional Study Abroad Program on Capacity Building for Healthy Aging in the Caribbean, United States, and South India.
Background

Population aging\textsuperscript{3}

Global Health education and practice\textsuperscript{1,2}
Interprofessional Community Capacity Building for Healthy Aging Program

Objectives:

– Integrating academic role: Describe the development of the interprofessional program on community capacity building for healthy aging
– Describe components of the interprofessional Culturally Informed Healthy Aging (CIHA) model
– Identify program outcomes and recommendations
Academic Research Background
Elders In St. Lucia: Status and Care Systems

Ethnographic Community Study
(Arnesberg & Kimball, 1962⁴)

Funding: NYISM; U of I, NIH NINR F31
Expectations and Elder Care Networks in a St. Lucian Village

*Elder Care Assumptions Challenged*


Interprofessional Program on Community Capacity Building for Healthy Aging
Culturally Informed Healthy Aging (CIHA) Community Capacity Building

– Anthropology- Community Study (Arensburg & Kimball, 1965)
– Epidemiology- Population indicators
– Public Health Nursing- Human response to health and illness and licensed to provide individual to community practice

Culturally Informed Healthy Aging: CIHA

Systematic Ongoing Community Assessment

**Community Cultural Inquiry**

- Population
- Social Organization
- Environment
  - Spatial
  - Temporal

**Elder Community Cultural Inquiry**

- Older Population
- Older Persons' Social Organization
- Older Persons' Environment
  - Spatial
  - Temporal

**Community Health Assessment**

- Population
- Social Organization
- Environment
  - Spatial
  - Temporal

**Elder Community Health Assessment**

- Older Population
- Older Persons' Social Organization
- Older Persons' Health Environment
  - Spatial
  - Temporal
Culturally Informed Strategies

CIHA Participatory Strategies

• Mapping
• Review of documents and artifacts: e.g. internet, newspapers, flyers, signage ...
• Informal and formal interviews
• Observations (field notes, photos, videos)
• Participatory Observation
• Network analysis
Community Diagnosis

• List of community issues
• Prioritize WITH community partners
• Format for stating:
  – **Risk of** (amputation) or **Promotion for**
  – **Among** (elders in Hillside)
  – **Related to** (walking barefoot/flip-flops, lack of knowledge about IDDM, diet, exercise, mountainous terrain, transports, poverty, access to services)
Community Planning & Prioritizing

• Community awareness of the issue
• Motivation to resolve or better manage
• Resources to manage or build capacity to address the issue
• Expertise
• Potentiality for growth and/or Severity of outcomes
• Speed in which issue addressed or problem can be resolved
Community Planning, Implementation and Evaluation

- Community Advisory Board
- Health Plan
  - Goals
  - Priorities
  - Measurable outcomes
  - Operational Plans [Activity/strategic plans]
  - Cost effectiveness
  - Evaluation: benchmarks
Educational Learning Modalities

• Readings, discussion and facilitation
• Cross-national on-line discussion with follow-up discussion points
  – International Host Professors and Facilitators
  – University Professors (Director & Disciplinary), Staff
  – Past Students
• Intensive 1 week host country courses on history, culture, health, healthcare
• Host Facilitators and US Director mentor students in the field
• Return reflection
Learning Outcomes

• Discuss *** history and culture
• Work with translators and interpreters and use conversational ****
• Describe the *** health care system
• Describe the *** (partner agency) initiatives
• Apply the culturally informed healthy aging model by:
  – Applying strategies for partnering with students, disciplinary colleagues, mentors and community members;
  – Applying strategies for assessing cultural capital and health for healthy aging of communities;
  – Applying skills and strategies to develop culturally informed programs;
  – Identifying strategies to evaluate the process and outcomes of programs; and
  – Developing skills in program dissemination
Learning Activities

- Identify personal and professional goals
- Maintain a descriptive and reflective daily personal journal
- Active engagement in learning CIHA activities
- Confidential descriptive and reflective field notebook
- Digital and hard copy CIHA assessment for partners and next group of students
- Formal presentation
- Paper on personal and professional experience in the course (2 weeks after return)
Interprofessional Program on Community Capacity Building for Healthy Aging Caribbean
Caribbean
Foot Care, Diet and Exercise
Midwest United States

Sudanese Refugee-Immigrant
Diabetes, Stress Management
Anti-bullying

Anglo/Hispanic Community
Elder Care, Immigration,
Diabetes, Vote & Vaccinate
South India

Foot Care, Oral Care, Diet and Exercise
Program Outcomes

Caribbean
• Programming Protocols
• In 36 island health clinics
• No amputations in participants
• Digital materials

South India
• Programming Protocols
• In 3 haddis and 5 PHCs
• Health Programs
• 1 partial toe amputation
• Stores with footwear
• Awareness and Attitude
• Digital materials
• Uptake … expand to rural and tribal area … urban (Palliative Care)
Development and Sustainability

- **Healthy** Aging purpose
- **Consumer, interprofessional, nurse facilitated**
- **Community centered** and “aging” capacity issue contextual
- Ongoing virtual and in person communications
- “Boosters”
- **Upstream essential** and active
- “Go with the flow” in planning and ongoing partnership
Student Process Outcomes

• Explore and reflect on personal/professional self, social determinants in a cultural context, rights, responsibilities, strengths, and concepts such as “poverty, poor, vulnerable, marginalized”
• Assumptions and pre-judgments
• Interprofessional/civic collaboration through lens of other disciplines/members focused on the shared CIHA purpose
• Community is central and healthy aging contextual
• “Upstream” essential and active
• “Go with the flow” in planning and ongoing partnership
• Dignity & respect of “self”: rights and responsibilities working in solidarity with others
• Dignity & respect of “others”- individuals and communities
• “Challenges & informs what one knows and does back home”.
• “I will never look at my patients just as patients again ... they are people who come from a community and an understanding of that community are critical to my being a nurse”

• “changed the way I see myself and others – more empathetic – more just”
Students

N=44

- DNP, PhD & BSN in Nursing
- Anthropology
- Pharmacy
- Global Health
- English
- Education
- Public Health
- Medicine
- Dentistry
- Informatics
- Health Coaching
- Athletic Training
- Pre-PA
- Interdisciplinary Studies
- Social Work
- Psychology
Partners

- St. Lucia Villagers and Ministry of Health
- University of Iowa Global Health Campus
- Iowa John A. Hartford Center of Geriatric Nursing Excellence
- Franciscan Missionaries of Our Lady Health System, Louisiana
- National Hartford Center of Gerontological Nursing Excellence
- WHO AHAA members and steering committee
- Louisa County Public Health
- Sudanese Community Association
- Pheasant Ridge Neighborhood Center

- Swami Vivekananda Youth Movement, Karnataka, India svym.org.in
- Vivekananda Institute for Indian Studies
- Villagers
- Interdisciplinary Students
- Volunteers
- Widernet, University of North Carolina
- University of Iowa College of Dentistry
- University of Iowa College of Public Health
- University of Iowa College of Nursing
Why do we care about culture?
Living and life.
Why do we care about culture?
Sanitation and safety.
Why do we care?
Walking and foot care.
Why do we care about culture?
My home.
Why do we care about culture?
The “troublesome child”
Next Steps

- Emerging design
  - 3 years for outcomes/uptake
- Capacity building vs problematizing communities
- “Life happens” for the individual & community
- Funding comes and goes

- Continue evaluation research
- Culturally informed local digital libraries and hand-held devices for field use.
- DNP and advanced inter-professional students & providers
- Expand to
  - Chicago neighborhoods
  - Atlanta Georgia: Family Involvement in Care ADRD
Funding

- University of Iowa Global Health
- University of Iowa
- Iowa Hartford Center of Geriatric Nursing Excellence
- NIH, NINR
- New York Institute for the Study of Man
- Wellmark Foundation
- Sigma Theta Tau International
- Sister Agnes Marie Fitzsimons Endowed Professorship in Gerontological Nursing
- Loyola Health EQ

- WiderNet
  - Carnegie Foundation
  - Voices of Angels
  - Intel
  - Stanley Foundation
  - Rockefeller Foundation
  - MacArthur Foundation
  - USAID
  - USICD
  - Skillsoft
  - Microsoft
  - Hewlett Foundation
  - US Department of State
References


