

Nursing Care Plan for Massillon Ohio

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Community Assessment of Massillon

The city of Massillon is located in Stark County Ohio. Massillon's estimated population is 32,149 (City-Data.com, 2009). After a thorough assessment of this community, it was obvious that Massillon was facing economic and communication disparities. It was important to develop a nursing care plan for Massillon to be able to improve their community as a whole, and to increase life longevity. Many people in this community strive to make ends meet and have no other choice, but to place healthcare and healthy lifestyle choices on the back burner. The community of Massillon should be able to identify resources and have the knowledge of the importance of healthy lifestyles that will affect their health. An appropriate nursing diagnosis for this community is knowledge deficit related to the presence of disease, secondary to unhealthy lifestyle patterns of the Massillon city population.

Content

According to the developed nursing diagnosis, the city of Massillon's poverty rates negatively affect the entire community's health status. High mortality rates were found in heart disease and stroke. Research shows 149 people died in the community from cardiac disorders within in one year (City of Massillon, 1998). The mortality rate of stroke within a year was approximately 21 individuals (City of Massillon, 1998). The unemployment rate is increasing as well as the homeless population. The population currently has 12.1 % of individuals who are unemployed (U.S. Census Bureau, 2010). There are 180 individuals who are homeless and this number should continue to rise as the unemployment rate increases (City-Data.com, 2009). The average income for Massillon is approximately \$32,734 (City-Data.com, 2009). Individuals in the community have inadequate financial stability therefore have a decrease in nutritional and

physical activity resources. These people in the community cannot afford the resources available to live a healthy lifestyle.

Statistical Comparison

The city of Massillon's statistics compared to Stark County and the state of Ohio are significantly elevated for a smaller population. The total population for Massillon city is 32,149, Stark County's population is 379,466, and Ohio's population is 11,536,504 (U.S. Census Bureau, 2011). The current mortality rate for heart disorders in the city of Massillon is 149 compared to Stark County's 871, and Ohio's 25,898 (City of Massillon, 1998), (Ohio.gov), (Healthy Ohio, 2011). The number of individuals who have died from stroke in the past year in the city of Massillon are 21, in Stark County are 190, and in Ohio are 5,563 (City of Massillon, 1998), (Ohio.gov), (Healthy Ohio, 2011). The median income for Massillon is significantly below Stark County, and the state of Ohio. The average income for the city of Massillon is \$32,734, compared to Stark County's \$44,362, and Ohio's \$45,395 (City-Data.com, 2009), (COHHIO, 2011). The city's income reflects Massillon's percent of individuals below the poverty level of 10.59% (City-Data.com, 2009). The percent of individuals below the poverty line in Stark County is 14.9%, and Ohio's is 15.2% (City-Data.com, 2009), (COHHIO, 2011). The percent of individuals in the city of Massillon who are unemployed include 12.1%, Stark County 12.3%, and the state of Ohio 11.4% (U.S. Census Bureau, 2010). People who have low income, are below the poverty line, and are unemployed increase their risk for becoming homeless. The number of homeless in Massillon city is 180, Stark County 402, and the state of Ohio 12,463 (City-Data.com, 2009), (COHHIO, 2011). The significant financial crisis affects the communities overall health especially in the areas of nutrition and exercise.

Resource Barriers

The city of Massillon has many barriers that affect their accessibility to a healthy lifestyle. There is a huge problem with individuals developing cardiovascular disorders. The people in the community do not have the access or proper education on nutrition and exercise and the education they do have is limited due to finances. The American Heart Association is a great institution that provides the community with a great amount of information on ways to prevent cardiac disorders (American Heart Association, 2011). Unfortunately, the city of Massillon does not have this institution or one similar. The lack of this education or accessibility to these types of associations reflects the increase in mortality of heart disease and stroke.

The inadequate financial stability among the population increases the amount of individuals without insurance. When people lack insurance and education they do not use the medical resources available to them. Therefore, they do not use the resources necessary to prevent health problems. Individuals who qualify for Medicaid have to make below a specific annual income. Some individuals make slightly above the qualify number and are left uninsured. The people who fall in this category are then left uninsured and do not get the care they need. The city of Massillon's growing homeless population is unable to apply for insurance or government assistance because they do not have a permanent address. This problem further escalates the stresses of the homeless population and their health habits decline.

The uneducated and uninsured population will then turn to habits such as eating unhealthy and not exercising. The city of Massillon has approximately 40 fast food establishments. These establishments will be accessed frequently because fast food is cheap, convenient, and easily accessible. This will increase the risk for heart disease and stroke because most fast food places do not provide adequate nutrition. A meal at a fast food restaurant does not incorporate all food

groups and is usually high in sodium and fat. The exercise programs are limited in Massillon and the programs provided cost a significant amount of money. A population that is financially unstable will not be able to access these types of programs, which will increase the community's risk for cardiovascular disorders.

Accessible Resources

The Massillon City Health Department is a great resource for individuals of all ages to access. This establishment was created to provide the needs of people with any financial status. The department has a sliding scale for individuals with different incomes. The sliding scale gives people the opportunity to get the care they need at the price they can afford. It also has governmental programs that individuals can access for information and care. The WIC program is a government-funded program that provides a variety of resources for new mothers and children. The program provides supplemental foods for the pregnant, nutritional education programs, breastfeeding education, care for postpartum women, and care for infants and children up to the age of five (City of Massillon, 1998). This is a great resource for the population to access because it starts children with care and education at a young age. Mercy Primary Care is another resource that provides care to individuals on slide scale income. This place of care provides treatment of minor injuries and illnesses for newborns to adults; physicals for youth sport programs, work permits, training programs and college enrollment, free blood pressure screenings, and flu immunizations (Mercy Medical Center, 2011). The two hospitals in Massillon, Affinity Medical Center and Aultman West Immediate Care provide preventive informational resources on cardiovascular disorders and stroke. The hospitals can also be great resources for finding medical programs in the community that provide care for low-income individuals. Another clinic that low-income families and individuals can access is called the

Western Stark Medical Clinic. This clinic is specifically designed for the uninsured that live within the western stark county. This is another resource that provides a sliding scale payment method. This clinic provides laboratory tests, radiology tests, and short-term medications and long-term medications. All of these institutions can provide preventive care and education to individuals with low incomes (Western Stark Free Clinic, 2010).

There are a variety of recreational programs available to the Massillon community. The Massillon Recreation Center offers over 500 programs and events per year to the community for all ages. They also have an aquatics center, fitness room, personal training sessions, an indoor track, a gymnasium, game room/lounge, locker rooms, and a child care area within the building that people can utilize to their own advantages. The programs available range from pre-school age children to older adults. "Sporties 4 Shorties" is a program offered for preschoolers where they can develop motor skills while playing their favorite sports. Swimming lessons are also offered to children ages 6 months and up. Kids aged from 7 and up have the opportunity to participate in archery class, youth volleyball leagues, swim lessons, and even fitness programs like "Zumba for Kids". Weekly open gyms are also offered for home school students, grades K-12. Youth outreach, youth enrichment, and after school programs are offered to Massillon's adolescents to promote positive interaction, personal development, and safe play that the teenagers can enjoy. Students in grades 9-12 can also participate in basketball leagues. These types of programs are very important to have in the community because children at a young age need to learn the importance of exercise. There are over 20 fitness programs offered for adults monthly. For older adults, "SilverSneakers" and "SilverSplash" are some exercise programs offered that help with muscular strength, balance, coordination, and range of movement. The Senior Citizens Center, provides recreational activities, social activities, information, and referral

for all resources concerning individuals 55 years of age and older. Some programs they offer include Meals on Wheels, Jazz Tuesdays, and Monthly Movies. The recreational center provides a lot of opportunities for individuals to stay active, but these programs cost money. The city of Massillon is currently facing financial instability, which is why the Massillon Recreational Center also presents seminars, screenings, and health fairs for the community to help individuals become more proactive about their health (City of Massillon Parks & Recreation Department, 2011).

The community offers wellness programs at Affinity Medical Center & Aultman West. Affinity Medical Center partners with a variety of local charitable organizations that help with their overall goal of promoting healthy living in individuals of the community. Involvement in the community consists of staff and resident volunteers' participation in public health fairs, screenings, community events, raising money for the community, and educational talks on important health issues (Affinity Medical Center, 2011). Aultman West Hospital has a Wellness on Wheels, or WOW, program that provides free health screening and education throughout the Massillon community. The WOW van visits churches, senior centers, schools, and other centers to provide free, noninvasive health screenings like blood pressure checks, height, weight, and body mass index (Aultman Health Foundation, 2011). The wellness programs provide the community with free care and education that is easily accessible.

The community has access to a variety of grocery stores and restaurants that provide healthy nutritional choices. If an individual cannot afford food at local grocery stores or restaurants they have a food stamp program, a women, infants, and children program, school lunch programs, and a program called meals on wheels. These programs promote healthy eating and prevent malnutrition amongst the community.

Community Expert Perceptions

Denaye Hagi, R.N. B.S.N. (Registered Nurse, Bachelors in Science and Nursing) in public health communication from Massillon City Health Department stated, “Access to healthcare is a major factor for this community (Personal Communication, Nov., 2011).” She discussed how many individuals do not fall below the standardized poverty level that will allow them to be on Medicaid. Therefore, individuals do not qualify for Medicaid and do not have access to health care. She feels that to be considered in poverty is too low of an income and should be raised. Also, she feels that their clinic is under staff and often have to turn away patients. During the interview, high mortality rates in cardiovascular disorders were discussed; however, Denaye was unable to apply those disorders being a problem at the health department because their main focus is on prenatal, women, and children. However, she agreed that children not receiving adequate nutrition and exercise do place them at risk for cardiovascular disorders when they are adults. She discussed this clinic having a WIC program (Women, Infant, and Children). WIC requires educational programs that mothers and children have to attend. Programs included, are meal planning, cooking classes, and exercise programs (Denaye Hagi, personal communication, Nov. 18, 2011).

Holly Myers, L.P.N. (Licensed Practical Nurse) at Mercy Primary Care-Jackson claimed she personally doesn't treat cardiovascular patients. This is because individuals usually do not come to STATCARE for cardiovascular related care. Upon taking vitals, she does notice a trend with high blood pressures and feels it is associated with lack of health care primarily with low income individuals. Holly discussed during the interview that many children come in who are obese. She claimed lack of nutritious food and exercise is a major contributor to childhood obesity. However, she does not agree lack of exercise is because of being in a low income

family. She believes, not only as a nurse, but as a mother children are always able to walk, run, or do some kind of activity. She agreed that lack of nutrition and exercise in children will most definitely affect children later, as adults with cardiovascular diseases. Holly discussed her concern about so many patients having to use a sliding scale, which is based on their income, to pay for their care at the STATCARE. She feels their community does have a lot of individuals and families without health insurance and who have low income (Holly Myers, personal communication, Nov. 18, 2011).

Linda S., ARNP, FNP (Advanced Registered Nurse Practitioner, Family Nurse Practitioner) is the nurse practitioner at the Take Care Clinic located in Walgreens. During the interview, Linda discussed there are several calls their clinic receives asking if they accept clients without insurance, at least twice a day. She discussed how their clinic will treat clients without insurance, but it is pricey. Care services start at \$79 and up, there is no payment plans, and payment is due right after the service. She agreed that it is impossible for low income families to afford this. She feels there are a lot of cardiovascular disorders affecting the city of Massillon. Her clinic focuses on preventing, treating, and managing illnesses. She discussed their clinic offering, blood pressure screenings and education on cardiovascular diseases. She feels that a lot of the associated problems with cardiovascular diseases are in response to the lack of knowledge, economy, and motivation. Linda recalls, recently, she had a patient that she will never forget that came into her clinic saying he was not feeling well. As routine, she took his blood pressure, and his blood pressure read 202/118. She called 911 and he was rushed to the hospital and his wife came back explaining he had a stroke and thanking me that he received the appropriate care. She felt if the community knew preventive measures to take, like diet and

exercise, and the importance of screenings then mortality rates related to cardiovascular disorders may decline (Linda S., personal communication, Nov. 18, 2011).

Nancy Barstow R.N. (Registered Nurse) in charge of the medical clinic for Massillon City Schools. During the interview Nancy agreed the city of Massillon does have high poverty rates and this is seen in her school district. She discussed how many children qualify for either getting reduced or free lunches. She feels if this was not possible, then many children would go without breakfast and lunch. She thinks schools are where children get most of their nutrition 5 days a week and it is important to improve school lunch choices. Gradually Massillon schools have done away with pop machines, added salads, and low-calorie snacks like the Nabisco 100 calorie Oreo or Chip-Ahoy thin crisps. She discussed how this year was the first year they implemented the Healthy Choices for Healthy Children Act. This act allows schools to check kindergarteners, third, fifth, and ninth grader's body mass index (BMI). If a child's BMI is out of range then a letter is sent home and it is recommended for a child to see their primary care provider. Nancy agreed nutrition and exercise as a young child may be responsible for high mortality rates in cardiovascular diseases. She feels if the school is able to change their nutrition and identify childhood obesity before, then many health problems later in life can be prevented. She also discussed that all students are required to participate in so many physical education classes and these classes are aimed towards keeping children and adolescents active to improve their health (Nancy Barstow, personal communication, Oct. 14, 2011).

Review of Literature

At Risk Groups

Family composition influences the risk for poverty. Poverty is characterized by the lack of an acceptable amount of money or material possessions. The current 2011 Federal poverty

guidelines for all states except Alaska and Hawaii are as follows: salary of \$10,890 for one person, \$14,710 for a family of two, \$18,530 for a family of three, and \$22,350 for a family of four (U.S. Department of Health & Human Resources, 2011). Many people are ‘nearly poor’ meaning that they are just above the poverty line. Maintaining above the poverty line is difficult to do when many factors impede positive outcomes. It was found that there was a correlation between poverty and the following characteristics: being a single-parent family; having children aged under 23 years in the household; the head of the household being of a young age (20–30 years); having a low educational level; living in a rural area; and the head of the household being a woman (Stavrou, 2008). All of these factors influence income and how it is spent amongst families for food, housing, and health. Priorities among those living in poverty become centered on caring for their young, and attempting to meet the cost of living. This results in poor health behaviors due to lack of education and resources needed for proper development and to sustain a healthy lifestyle.

Unemployment

Research found that in the city of Massillon, there is a high rate of unemployment which can have a negative effect upon the health and wellness of a community. According to a British study done in 2009, unemployment increases the rates of both illness and depression (Dorling, 2009). Unemployment makes healthy food and healthcare much more difficult to obtain, and most importantly contributes directly to a community’s poverty rate. The World Health Organization has identified some risk factors for those living in poverty. They include drinking alcohol; poor sanitation and hygiene; and being overweight or obese (Blakely, Hales, Kieft, Wilson, Woodward, 2005). As unlikely as it may seem for these conditions to exist in America, they are a hard reality for those who are below the poverty line and without reliable employment.

Unemployment is a difficult circumstance to endure and people naturally turn to coping mechanisms to help them through. Unfortunately, these coping mechanisms are not always benign. "Socio-environmental and stress-based theories of alcoholism propose that alcohol abuse and addiction develop as coping reactions to stressful socio-environmental conditions such as unemployment" (Bolton, Rodriguez, 2009). Although alcohol has been shown to have health benefits when taken in moderation, when consumed in heavy quantities it can have detrimental effects on cardiovascular and overall health. "Binge drinking increases the risk of MI, all-cause mortality, and other adverse outcomes" (Geeseey, King, Mainous, 2008).

Poor sanitation and hygiene is another risk factor identified by the World Health Organization. In the United States, we are blessed with an abundance of portable water and sanitation services, but even with these measures in place there are those living in poverty who suffer from poor personal hygiene and sanitation. "The diseases associated with poor sanitation are particularly correlated with poverty and infancy and alone account for about 10% of the global burden of disease" (Mara, Lane, Scott, Trouba, 2010). With the burgeoning unemployment rate in the city of Massillon causing an increased poverty rate, poor sanitation and hygiene may become a serious problem.

On the issue of finding jobs, many times in today's economy, if there are any jobs available they are minimum wage jobs that provide little to no health insurance or employee benefits and for those that manage to obtain them. These jobs are not stable and provide very little by way of job security. Because of the low level of these wages, the employee is not able to purchase health insurance or afford healthcare which forces him or her to live with health problems that would be easily avoidable. Yet another problem with the minimum wage job is that healthy and nutritious food is more expensive than their paychecks allow so these people are

more likely to purchase food that are high in sodium and fat such as fast food. All these factors, especially the diet, lead to health problems associated with poor nutrition like heart disease and obesity.

Overweight and obese individuals are at increased risk for cardiovascular disease, MI, stroke and a myriad other health concerns. The city of Massillon has slightly higher rates of poverty and unemployment than the state of Ohio. Since obesity rates are correlated to the rate of unemployment and poverty in a community, this puts the people of Massillon at risk. “A higher BMI was associated with more adverse levels of blood pressure, lipoproteins, and fasting glucose despite a higher prevalence of pharmacologic treatment” (Burke, Burtoni, Shea, 2008). Higher levels of blood pressure, lipoproteins and fasting glucose all increase a person’s risk for cardiovascular disease.

Exercise and healthy eating habits are instrumental in lowering the risk of heart disease in all levels of population. To that end, Massillon has facilities and programs aimed at getting people active and healthy. The Massillon Rec Center has programs for all ages including childcare, swimming, a weight room, and an indoor track. Regular exercise significantly reduces the chances for heart disease as well as obesity and many other health problems. In addition to exercise, it is important to have knowledge of safe eating and exercise practices. To that end, the Rec Center also has seminars and teaching sessions to promote health and wellness (City of Massillon Parks and Recreation Department, 2011). Massillon also has many grocery stores and markets that provide healthy food. To help those in poverty pay for their food there are a variety of programs such as food stamps, WIC and many others.

Environment

Living in poverty, substandard housing puts people at risk for disease. Most Americans picture home as being safe, secure, and free from health risk. For those living in poverty, three factors play an important role regarding housing conditions and their effect on health. Unsafe conditions within the home, neighborhood conditions, and housing affordability have a high impact on health and are based on income. “Poor quality and inadequate housing contributes to health problems such as infectious and chronic diseases, injuries, and poor childhood development (Braveman, Cubbin, Egerter & Pedregon, 2008).” Conditions within the home such as water leaks, poor ventilation, and pest infestation can lead to mold, mites, and other harmful allergens. The most common chronic disease affecting over 20 million Americans, asthma has an increased incidence among residential exposures of damp housing conditions. Unable to keep up with home maintenance, those living in poverty may experience delayed repairs in gas and electric appliances increasing the risk for carcinogenic air pollutants (Braveman, Cubbin, Egerter & Pedregon, 2008). Safety within the home may be hard to obtain for those living in poverty.

The neighborhoods surrounding homes have an important role for developing a healthy environment. “The social, physical, and economic characteristics of neighborhoods have been increasingly shown to affect short- and long-term health quality and longevity (Braveman, Cubbin, Egerter & Pedregon, 2008). Neighborhoods surrounded by crime, violence, and pollution are at greater risk for health concerns. Social and economic conditions in a neighborhood such as employment opportunities, police force, and good schools have a positive impact on healthy behaviors but are not always within access for those living in poverty due to lack of finances. A negative factor about the surrounding community is that those in poverty have little or no representation on community issues, making it even harder to escape poverty

(Braveman, Cubbin, Egerter & Pedregon, 2008). Less advantaged neighborhoods pose a health risk.

Housing affordability determines where people will live. It was reported by the Massillon Health Department there has been a substantial increase in the number of foreclosed homes for 2010 (Annual Report, 2010). The Environmental Department has been working towards improving these properties by adding on surcharges to the properties. This may result in increased interest rates, making it harder to attain affordable housing in Massillon for those living in poverty. Without housing opportunities made affordable, those living in poverty have decreased chances for housing improvement and less finances to direct towards health.

The city of Massillon has public programs designed to encourage youth to participate in their health and well-being. There are programs such as latch-key programs which is when students will stay after school instead of going home and being by themselves for a few hours until their parents get home. By staying after school it provides safety for the children and also allows them to work on their school work. Another program schools may offer include providing breakfast for the students who may not have access to breakfast on a daily basis due to situational circumstances related to poverty or family lifestyles. Programs such as these will help to ensure the children have opportunities to have some exercise in their daily lives.

Affordability of Healthcare

The affordability of healthcare has direct effects on a community's health. If healthcare facilities are too far away, too expensive or not able to provide for the needs of a community, then there are going to be health-related consequences. In a recent study by the New York Academy of Sciences it was found that, "Low-wage workers are far less likely than higher-wage workers to have access to job-based coverage" (Hoffman, Paradise, 2008). Because these low

wage jobs are more available to the unemployed, there are many people employed in these jobs without healthcare and their wages do not allow them to purchase health insurance or care. For many of these people, it becomes a choice between buying food or healthcare. The consequences of not having affordable healthcare compound upon themselves as those in debt become less and less healthy as they are less and less able to afford further medical attention. In the city of Massillon, there is rising concern over the increased rates of obesity and cardiovascular problems. Again, according to the New York Academy of Sciences' study, "research not only validated that uninsured patients were less likely than the privately insured to undergo diagnostic and therapeutic cardiac procedures but also showed that they were significantly more likely to die in the hospital after a heart attack" (Hoffman, Paradise, 2008). For the uninsured in Massillon, there are very real consequences to not being able to access medical care.

The city of Massillon has some resources for those in need that help reduce the aforementioned risk factors. The Mercy Primary Care center provides care on the basis of a sliding scale that takes into account a patient's income. Affinity Medical Center and Aultman West are the main hospitals in the city and they also have programs to increase the affordability of healthcare for the unemployed and low income individuals of Massillon. Finally there is the Western Stark Medical Clinic which is geared directly towards those without health insurance. They provide low cost healthcare as well as primary care on a sliding scale basis.

Medicaid and Medicare are government assistance programs designed to help those with low income to pay for health care. In order to apply for this program certain requirements must be met. "These may include your age, whether you are pregnant, disabled, blind, aged; your income and resources (like bank accounts, realty property, or other items that can be sold for cash); and whether you are a U.S. citizen or a lawfully admitted immigrant (U.S. Department of

Health & Human Resources, 2011).” Medicaid and Medicare operate by making payments directly to health care providers once approved. The approval process begins with caseworkers obtaining information from the client such as: income statements, medical bills, birth certificates, pay stubs, and rent receipts. Caseworkers are then responsible for determining eligibility based on individual circumstances (U.S. Department of Health & Human Resources, 2011). There is no location in Massillon; the nearest is The Stark County Department of Job and Family Services. Access to health care is made easier for families living in poverty with Medicaid.

Recommendations for Action

After reviewing the community assessment tool for Massillon City, it was concluded that the poverty levels in Massillon Ohio were disturbingly high. According to the data, 10.59% of the city’s residents live below the poverty line. Also, Massillon’s unemployment rate is on the rise at 12.1%. This factor contributes to the growing number of people and families living in poverty. This type of lifestyle may lead to poor nutrition, lack of exercise, lack of education or resources, and disease. All of these factors point towards the high rate of cardiovascular disease and stroke among Massillon’s population. Without adequate financial resources, it can be impossible to provide the correct nutrition, education, or attention that a family may need. With these statistics in mind, it is necessary that appropriate nursing interventions are implemented within the community.

Many children that do not participate in after school activities such as sports or music programs, are left unattended while their parents are at work. While school lets out roughly around 3:30pm, many parents are working until 6pm or later. This leaves a gap in time where the children are left unattended and are at risk for engaging in risky behaviors or becoming injured. With the help of after school programs, children are able to be part of “an environment that is

safe and nurturing as well as educational” (David, 2011). Research also shows that “children who participate in after school programs show improvement in standardized test scores and decreased absenteeism and tardiness” (Vinluan, 2005). These effective programs focus mainly on subjects or activities that are generally not taught as much in school such as physical education or art. Although, many of these programs are not available to the underserved population. Many after school programs require a weekly or monthly fee in order for the child to attend. It is obvious that more after school programs are needed in order to provide assistance for parents who cannot afford the programs and their children have nowhere to go.

When looking at this research, one intervention that would be suggested is to create a free after school program for children and teens to be able to come to until their parents are able to pick them up. This program could be run by teachers, volunteers in the community, or even high school students that are able to help out younger children after school. The after school program would provide homework help for those students in need who do not get the required help or education they need at home. Also, this intervention would keep children and teens safe and off of the streets. The children would be supervised and would not be left to fend for themselves. Programs such as these offer social interaction with other children and teens that they need during this time in their lives. Whether it includes play time, organized sports, or musical activities, these children are able to be included in something that they otherwise may not have had the opportunity to be a part of. Ultimately, this intervention would help underserved children get the attention, supervision, interaction, and appropriate educational needs in order to improve their lives and promote important, healthy lifestyles and behaviors.

A second intervention would be to use the schools free and reduced lunch program as an indicator of a child’s poverty status and provide the child and the child’s family with the current

resources available to help them in the community. The established free and reduced lunch program provides an underserved child with a balanced nutritious breakfast and lunch at a free or reduced cost to parents in need. “Among school children, academic success, health status, and risk behaviors are related in an interdependent, cyclic fashion. Poor school performance predicts health-compromising behaviors and physical, mental, and emotional problems. Poor nutrition, substance abuse, sedentary behavior, violence, depression and suicidal intentions compromise school performance.” (Murray, 2007, p. 590). Using this program as an indicator could help the child as well as the family deter risky behaviors and improve academic performance.

A third intervention would be to provide resources to homeless shelters to help children and families to become more independent, and less ashamed of their current situation. There are many resources currently available to help these people, but because these people try to hide their situation and deem outside help as a danger, it is hard to determine who needs help. “They may deny their homelessness, reject assistance, be extremely self-reliant, and highly vigilant...reluctant to enter the social service system...are concerned about who they will be living with, how their children may be affected by an unfamiliar environment, whether they and their children will be safe, and if the staff can be trusted.” (Finfgeld-Connett, 2010, p. 462). There is an increase in the amount of families becoming homeless due to the economic downfall of the nation it is estimated that 30% of the 3.5 million people who are homeless are families. (Finfgeld-Connett, 2010, p. 461).

The current resources available in the city of Massillon able to detect and combat these problems are the Massillon Recreation Center, Women Infant and Children’s Program (WIC), school lunch programs, the Kiwanis Club of Massillon, a support group called Parents Without Partners, a local YMCA and a MRDD location, and there is also a Massillon health department.

The community of Massillon has a local hospital called Affinity Medical Center, “that works with local charities to promote education on important health issues.” (Affinity Medical Center, 2011). There is one domestic violence shelter and one homeless shelter in Massillon that offers valuable services such as counseling, psychiatric services, and case management services. Case management services provide the client with the means to create attainable goals to correct their current situation by providing them with the resources necessary to obtain their goals. Massillon has numerous churches within the community that have established food bank programs and also provide clothing drives to help those in need. There are no child or adult protective service agencies in the City of Massillon, the closest available one is Jobs and Family Services in Canton. This is a very important service that should be implemented in Massillon to make it more accessible to those in need of reports of neglect or abuse of children or the elderly who can’t protect themselves.

Role of the Community Health Nurse

With the aforementioned interventions the community health nurses role is to utilize their skills in the nursing process to implement changes in school, local government, and community policies. Without the nurse lobbying the community for change the problem will increasingly get worse. If changes are not implemented this will cause a cycle of underserved people causing a further downward spiral in the community. In order for the community to improve these interventions need to be put into place to correct the current disparities.

In the first intervention, the community health nurse plays an important role when it comes to planning, education, implementation, and evaluation. When it comes to after school programs, it would be important that the nurse is there to educate the children and the parents on the specific program and the activities that will take place. The nurse must educate the parents on

the criteria needed for participation such as proof of decreased financial status, the parent must pick their child up, and signing their child up by the required date. A community health nurse must not only plan for the after school program, but they are required in order to implement the program and be sure that the program is running smoothly and efficiently. Finally, after a certain amount of time such as at the end of the school year, the nurse will evaluate the program on its effectiveness and that the children's needs are being met. In the second intervention the community nurse could provide information to school counselors and staff on how to detect if a child is in need and determine how much need is necessary. They could also implement policies for the families to acquire adequate means to prepare and obtain meals. In the third intervention the nurse could enter homeless and domestic violence shelters and teach these families how to obtain the necessities to survive and provide counseling to the families to help them make it through the difficult transition. The nurses could also implement a host family situation to help restructure these families so they become productive members of the community again.

Public Health Policy

While implementing these interventions, it is important to consider the effects of public health policy. Interventions need to be structured so that children being involved in after school programs are supervised by appropriate adults who are approved by the school or community and must take place in a healthy and safe environment such as at a school, community center, or church. No community wants to admit that their economy is not thriving and that members of their community are going without basic needs to survive. It would take a lot of research, petitioning, and persuasion of local officials to change policies related to detection of underserved and homeless populations in the community. A nurse would have to be persuasive

and determined in order to succeed at having these policies implemented into the school system and community.

Implementation of Recommendations

Several interventions were implemented during the student teaching session at the Epworth United Methodist Church. Statistics and community resources pertaining to Massillon were gathered and assessed to determine the strengths and weaknesses prior to the teaching. Student nurses got information for health promotion from My Plate nutrition and exercising. Throughout the population teaching the nursing students provided information and interaction on healthy eating and exercise.

Intervention	Each preschooler will participate in the physical exercise demonstrated.
How measured	Each preschool student will follow the exercise demonstrated by nursing students.
Rationale	Teaching the preschool students the importance of regular exercise will promote health and wellness at the primary prevention level.
Source	Wojcicki, J., & Heyman, M. (2010). Let’s Move—childhood obesity prevention from pregnancy and infancy onward. <i>The New England Journal of Medicine</i> , 362(16), 1457-1459.
Impact on Community	Goal Met: Each member of the group participated in physical exercise and recited the importance.

Intervention	Each preschool student will gain an understanding of the “My Plate” food groups.
How measured	The preschoolers listened and answered questions about eating healthy and participated during the teaching.
Rationale	Teaching the importance of eating foods from every food group will help to ensure they get the proper nutrition daily.
Source	Kotz, D. (2009). Younger Than Your Years. <i>U.S. News & World Report</i> , 146(1), 63. MedicineNet.com. (2011). <i>My plate</i> .

	Retrieved from http://www.medicinenet.com/myplate/page2.htm .
Impact on Community	Goal Met: The preschoolers were able to identify the different types of food and what food groups each goes into and how it's important to eat healthy every day.

Intervention	Each preschooler will understand the importance of getting the recommended daily portions of the various food groups.
How measured	When we asked the students what they should eat every day, they responded with “lots of fruits and vegetables.”
Rationale	Eating healthy foods daily teaches good habits for the students at an early age which will help to keep their bodies healthier as they get older.
Source	Nita, C., Hancu, N., Rusu, A., & Bala, C. (2011). Nutrition and triple major risk of abdominal obesity: type 2 diabetes mellitus, cardiovascular diseases and cancer. <i>Nutritional Therapy & Metabolism</i> , 29(2), 55-69.
Impact on Community	Goal Met: Each preschooler was able to correctly identify pictures of different types of food and place them in the proper category on a poster board of the “My Plate” diagram.

Intervention	Each preschooler will understand the benefits of exercising and eating healthy and the effects they have on the heart.
How measured	The preschoolers answered questions about the importance of exercising daily and getting the right nutrition daily to help ensure a healthy heart.
Rationale	Exercising and eating healthy both go hand in hand with ensuring a healthy heart for everybody.
Source	Wojcicki, J., & Heyman, M. (2010). Let's Move—childhood obesity prevention from pregnancy and infancy onward. <i>The New England Journal of Medicine</i> , 362(16), 1457-1459. Top five habits that harm the heart. Avoiding them can help you prevent a cardiovascular apocalypse. (2011). <i>Harvard Heart</i>

	<p><i>Letter: From Harvard Medical School, 21(5), 1-2.</i></p> <p>Kotz, D. (2009). Younger Than Your Years. <i>U.S. News & World Report, 146(1), 63.</i> MedicineNet.com. (2011). <i>My plate.</i></p> <p>Retrieved from</p> <p>http://www.medicinenet.com/myplate/page2.htm.</p>
Impact on Community	<p>Goal Met: At the end of the day, the preschoolers verbally recited that exercising and eating healthy is good for the heart to keep it strong and beating every day.</p>

Public policies in place aim at critical health objectives to improve our nation’s health. By promoting nutrition and exercise through education, our objectives for the population teaching coincide with health education curriculum. Influencing children of young age to participate in active healthy lifestyles is becoming a requirement of most schools as part of national and state standards of health education. “Schools have a critical role to play in partnership with community agencies and organizations to improve the health and well-being of young people (Centers for Disease Control and Prevention, 2011).” Observing the positive impact that health education provides, policies should be enforced in schools to ensure all students receive the appropriate information to start healthy behaviors at a young age.

Conclusion

Within Massillon Ohio there are several problems that affect the community’s ability to access quality healthcare. Some of these include families living in poverty, or just above the poverty level, and increasing rates of unemployment which ultimately affect the affordability of healthcare. These issues further lead to unhealthy lifestyles and living habits, lack of education, and poor nutrition which can generate diseases that negatively affect the major body systems. As

community health nurses, it is important to educate people on the health centers and resources that are available, regardless of financial status, to reduce the effects of poor health.

Who Would Continue

It is essential that the suggested interventions continue within the Massillon community to ensure that residents maintain a healthier lifestyle. Along with the help of community health nurses; volunteers, teachers within the schools, and members of the community may participate to ensure these interventions are continued throughout the area. Education is critical when implementing these interventions in order to encourage the residents of Massillon to strive for a better lifestyle. Spreading the word throughout the city of Massillon, nurses will work with the community to continue these interventions together.

Sustain Program Outcomes

Nurses could educate teachers and students within the Massillon school systems about the importance of adequate nutrition and exercise. Teaching plans should also include positive aspects of how staying healthy will benefit the body throughout the life span, as opposed to how negative health habits will affect the body throughout the life span. Upon learning information from the community nurses, teachers and other members of the school systems could do their part to continue health education by developing daily activities that would remind children about the importance of maintaining proper health and nutrition. Continuation of these interventions within a school setting would promote early identification towards preventing future health problems and therefore decrease the likeliness for individuals to experience detrimental health issues. This would also help individuals understand the importance of receiving early treatment in order to prevent disease patterns from worsening.

Within the community, nurses could reach out to individuals at wellness fairs, health centers, local hospital settings, and other areas to encourage health promotion activities such as handing out pamphlets that educate how proper nutrition and exercise is crucial to their health and well-being. Also, handing out pamphlets with listed resources and their locations, where residents can go to receive accessible and affordable health care. These interventions would continuously help improve health awareness and decrease harmful health situations amongst the Massillon community as a whole.

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