College of Health Sciences

# MEDICATION INFORMATION CARD STUDY AT THE FOODBANK OF SOUTHEASTERN VA

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### Background

- 19% of residents in the Hampton Roads area are reportedly living with food insecurity, placing these individuals in the worst 25% of US counties.
- Norfolk, VA had a reported poverty rate of 21% in 2016.
- Lower income families suffer greater disparities and are more likely to be food insecure.
- Chronic disease in Norfolk cost upwards of \$166K dollars in 2012, with the majority of costs resulting from heart disease.
- Heart disease is a chronic disease which can be greatly reduced with proper nutrition and education.

#### Scope and Scale of the problem:

• % of Americans are non-adherent to prescribed medications.

#### Aggregate:

 Medicinally nonadherent adults served by the foodbank.

### **Community Partner site info:**

The Foodbank of Southeastern Virginia provides a variety of foods to Basilica of St.
 Mary Food Distribution. It is then distributed at their food pantry and soup kitchen for qualifying persons.

# Barriers to this Study:

• The aggregate's lack of nutrition knowledge related to medications, medication non-adherence, and inadequate diversity in food options.

### References

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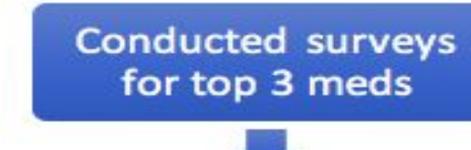
# Priority Nursing Diagnosis

Knowledge Deficit r/t misinterpretation of medication information

### Objectives

- Identify three of the most common medications
- Create medication information cards on the selected medication
- Distribute medication information cards at food bank distribution sites.
- Aggregate will provide at least 5 preferences for medication card

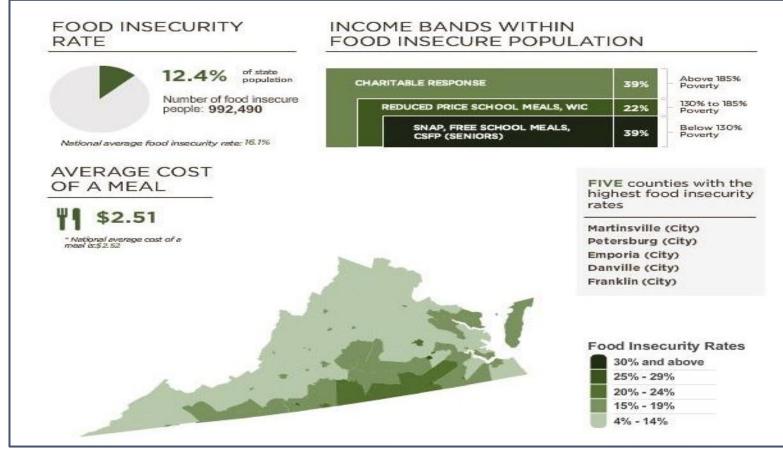
# Project Description



Displayed 5 templates for voting

Combined formats of top 2 templates

Created new info card with top 3 meds



This map showcases the prevalence of food insecurity across the state of Virginia. Darker areas denote greater severity than those that are shaded lightly. Factors such as income supplements and the cost of an average meal are included to inform the public of considerations that correlate with food insecurity.

# Findings

#### **Outcomes:**

- Top Medications: Warfarin, Insulin, Antihypertensives.
- Prefered Card Templates:

**21/60 votes** 

18/60 votes



#### **Evaluation:**

- Community members reported low understanding of prescribed regimen and medication teachings.
- High cholesterol, diabetes, and high blood pressure were the most prevalent diseases reported.
- Many were interested in diet/nutrition considerations.

#### **Nursing Reflection:**

Our nursing diagnosis influenced our perspective and approach toward the aggregate. We focused on their willingness to learn and specific needs, such as health literacy. As future nurses, this opportunity allowed us to view the impact of social determinants of health and use critical thinking to work around them.

# Conclusions & Implications



There are broader concerns regarding knowledge and importance of a medication regimen, cultural acceptance of chronic health issues, and poor health management related to diet and nutrition.



Individuals are willing to learn and take active steps towards personal health management when they have the tools.



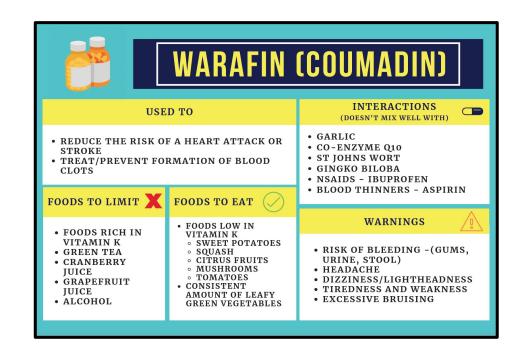
Education should focus on medication understanding to correlate with positive lifetsyle habits and health promotion.

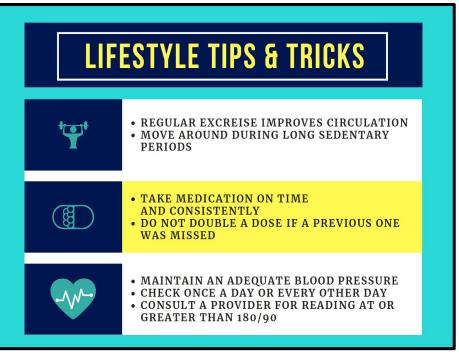
#### Recommendations

- Target common diseases
- Assess at multiple distribution sites.
- Broaden the aggregate population.

#### What's next?

- Add lifestyle/disease management teaching to final template.
- Send final template for mass printing.
- Distribute at distribution sites.
- Continue to assess aggregate needs.





# Special Thank You To:

- Ms. Ercelle Drayton for allowing us to test templates, gather data, and distribute nutritional cards at St. Basilica
- Foodbank of Southeastern Virginia for providing opportunities to gain experiences with food insecure individuals within our community
- Mrs. Tremblay for guidance

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