Community Teaching Plan

Student’s Name

Institutional Affiliation

Submission Date

# **Community Teaching Plan**

## **Section 1: Planning Before Teaching:**

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| Name and Credentials of Teacher: (Student’s Name) | |
| Estimated Time Teaching Will Last:  40-45 minutes | Location of Teaching:  (Choose a suitable location in your country) |
| Supplies, Material, and Equipment Needed:  Computer, brochures, water bottles | Estimated Cost:  $80 |
| Community and Target Aggregate:  Individuals beyond the age of 30 | |
| Topic:  The primary focus is on type 2 diabetes prevention techniques and risks. | |

### **Identification of Focus for Community Teaching**

Using an evidence-based approach, the primary focus of community education will be disseminating information regarding the primary prevention and risk factors for diabetes mellitus.

### **Epidemiological Rationale for Topic**

The primary cause of diabetes is an inability to produce or utilize insulin effectively. The pancreas is responsible for insulin production. This chronic health condition disrupts how the body turns the carbohydrates in food into glucose, which the body's cells use for energy. Patients with diabetes who become insulin-dependent must periodically administer insulin to maintain blood sugar control due to an insulin imbalance (Meigs, 2019). Uncontrolled blood sugar levels result in extra organ damage. Almost 88 million Americans, or one-third of the population, are believed to have prediabetes. 84% of individuals with prediabetes are unaware of their condition. Cardiovascular disease, stroke, and type 2 diabetes are more likely to occur in those with prediabetes (Meigs, 2019). Although 34.2 million people globally have diabetes mellitus (DM), only around one-fifth of those with the disease know their condition. 90%–95% of people diagnosed with diabetes are adults, and all have type 2 diabetes (Meigs, 2019). Also, the number of people with diabetes has grown during the previous two decades. Hence, persons with diabetes are 60% more likely to die prematurely than those without diabetes. Type 2 diabetes is the leading cause of adult-onset blindness, amputation, and kidney failure.

## **Section 2: Teaching Plan Criteria**

### **Problem Statement**

The nursing diagnosis for preventing type 2 diabetes mellitus is a risk for unstable blood glucose. Although this is a concern, it has no internal indications. Individuals can be ignorant of the risk that their daily routines, habits, and routines provide for persistently increased glucose levels. A secondary diagnosis may be Deficient Knowledge, as shown by repeated affirmations of the need to Know. The risks of prediabetes and type 2 diabetes are not widely known in the United States.

### **Readiness for Learning**

Implementing individualized interventions within a care plan effectively, but the role of the nurse educator is also crucial. Compassionate instruction requires a variety of fundamental activities, such as identifying the learner's preparedness to pay attention, absorb, and retain what is presented and taught, removing impediments, and teaching at the learner's level of comprehension. Retention will be increased if the nurse educator analyzes the obstacles and learning preferences of the student and employs an appropriate learning style. It is vital to evaluate each participant's life experiences, demographics, skills, and readiness for an experimental evaluation of their learning aptitude. Nearly all target group members have at least a bachelor's degree, and many additionally hold advanced degrees, making them competent to address the complex difficulties the exceptionally diverse population poses. The audience must be prepared for and eager to learn from this presentation. They will be provided with the resources necessary to instruct families on how to avoid developing DM. The contributions of this team will be essential in the fight against diabetes.

### **Learning Theory to Be Utilized**

Acceptance, processing, and retention of knowledge can all be explained under a paradigm known as the Learning Theory. A person's education, health literacy, and life experiences may decide this (Mukhalalati & Taylor, 2019). The teach-back strategy improves learning outcomes (Yen & Leasure, 2019). Hence, enhancing self-management is essential for improving health outcomes and preventing illness. Teach-back will be the learning theory applied. This hypothesis is well-liked and practical. The nurse will ask open-ended questions to elicit a demonstration and verbal explanation from a group member. If the content still needs to be understood or clarified, it will be revised until complete comprehension is achieved. Throughout the presentation, the audience will be asked open-ended questions. The intended audience will be educators and professionals learning to teach diabetes and primary prevention to many families in the future. A solid understanding is necessary for this group to collaborate to influence their people and engage in primary diabetes prevention.

### **Goals**

By promoting the following aims and asking organ donation professionals to include diabetes preventive information in their interactions with families, we can support people in adopting healthy lifestyle changes to reduce their risk of developing type 2 diabetes.

1. Increase the number of adults who consume a healthy diet. This objective is significant because a good diet is vital for preventing diabetes, and promoting healthy eating habits can reduce the risk of type 2 diabetes (Wright, 2019).
2. Increase the proportion of individuals who engage in regular physical activity (Wright, 2019). This objective is relevant because regular exercise can help improve overall health and well-being, and physical activity is essential for preventing diabetes.
3. Reduce the proportion of obese adults. This objective is significant because promoting good eating and physical activity can help reduce the possibility of obesity, a significant risk factor for type 2 diabetes (Wright, 2019).

### **How Does This HP2030 Objective Relate to Alma Ata’s *Health for All* Global Initiatives**

In 1978, Alma Ata launched the "Health for All" global health movement, emphasizing that factors other than access to healthcare affect health outcomes. The initiative emphasized the need to address social determinants of health, such as access to food and nutrition and promoting healthy behaviors (Nies & McEwen, 2022). The program emphasized that social and environmental factors that affect health must also be considered to enhance health outcomes.

Similarly, the HP2030 objectives of promoting healthy eating habits, regular physical exercise, and lowering obesity seek to address these social determinants of health and encourage healthier behaviors. A nutritious diet and regular exercise are essential for good health and can help to stave off chronic conditions, including type 2 diabetes, heart disease, and cancer (Nies & McEwen, 2022). Because obesity is a significant risk factor for numerous chronic diseases, addressing it is also essential.

Besides, Alma Ata's Health for All project emphasized the significance of community engagement in promoting health and tackling social determinants of health. Community involvement comprises empowering communities to promote healthy habits, address health disparities and socioeconomic determinants of health, and create health-supportive settings (Nies & McEwen, 2022). The HP2030 objectives strive to engage communities in promoting healthier lives and addressing health disparities. For example, community-based programs can be developed to increase the availability of nutritious foods and encourage physical activity, building environments that support healthy habits.

**Develop Behavioral Objectives, Content, and Learning Activities:**

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| **Behavioral Objective**  **and Domain** | **Content to be Taught** | **Learning Activities** |
| 1. The FRC will discuss the symptoms, causes, and preventative measures of diabetes orally. | 1. Insulin is a hormone that the pancreas secretes. Output, activity, and process issues may be related to a person's lifestyle. In addition, it hinders the transformation of nutrients into usable fuel. | 1. Posters and brochures will be disseminated verbally and visually. At each stage, a discussion will be encouraged through the use of open-ended questions. Following the presentation, the nurse will ask the group members open-ended questions based on the information provided. |
| 1. Three FRCs will reference the three websites mentioned in the presentation. The Centers for Disease Control and Prevention's MyPlate website for nutritional education; the National Diabetes Association website for comprehensive, understandable information about diabetes and its treatment. | 2.  The MyPlate.gov graphic discusses suggested and discouraged foods, meal planning, and nutritional guidelines. This website's availability in various languages makes it accessible to a broad audience. | 2. We will display bright Internet images of athletes engaging in various forms of exercise, including cycling, swimming, and walking/jogging, while appropriately attired. There will also be weekly workout suggestions. On the poster board are examples of real foods and representations of several dietary groups. The nurse will provide the group with a list of safe and unsafe goods for people with diabetes and will accept additions. |
| 1. In the presentation's conclusion, FRS will emphasize the significance of maintaining a long-term connection with a primary care physician and receiving frequent checkups. | 3.  Due to the topics discussed, a medical exam and preventative treatment are necessary. As a result, individuals will recognize the significance of having a good relationship with their doctor. | 3.  This information will be included in the brochures and flyers. Following the presentation, there will be an opportunity for a free-form discussion of questions the audience raises. |
| 4.  FRC will verbally address diabetic symptoms. | 4.  Diabetes type 2 can be prevented if individuals know the warning signs and seek medical help promptly. | 4.  In this presentation and the subsequent discussion, we will go over a leaflet that describes the symptoms of diabetes. This will also be displayed on a poster board for additional clarification. |

### **Creativity**

This educational initiative aims to improve engagement, comprehension, and long-term retention of the delivered material by employing various instructional strategies and techniques. In order to battle diabetes, we will distribute brochures with helpful advice on how to preserve health and avoid the disease. A glucometer, an insulin needle, and empty food and beverage containers are shown on a trifold poster board. There will be a supply of a pair of athletic shoes. These objects will serve as visual aids for lessons on avoiding unhealthy foods and maintaining a healthy lifestyle through exercise and diet. Following the talk, the audience will take a test to see how much information they retained. After the presentation, questions, recommendations, and clarification requests can be directed to the presenter.

### **Planned Evaluation of Objectives**

1. When the lecture concludes, the nurse will solicit verbal feedback from various group members regarding the nature of Type 2 Diabetes, its history, and preventative actions. Reviewing the previously discussed issues gives the audience another opportunity to hear them.
2. Second, after the presentation, we will require a verbal teach-back on the websites we visited and why we went there.
3. The nurse will ask a member of the audience to summarize the presentation, emphasizing the necessity of beginning medical treatment with a doctor and the significance of preventative care.
4. The member must explain the significance of these links for checks and annual inspections as a form of primary prevention. This purpose is discussed in class and is vital information to retain. Many volunteers will be asked to describe specific symptoms toward the presentation's conclusion.

### **Planned Evaluation of Goal**

During a Zoom discussion with the families and specific cases, the nurse will review the results of their primary preventative and DM 2 teaching objectives. The nurse will now respond to queries, address concerns, and make any required adjustments.

### **Planned Evaluation of Lesson and Teacher**

Participants can fill out a questionnaire that will be forwarded to the service provider. With the survey results, future interactions will be enhanced. The survey will consist of five questions, and the responses to each will be used to evaluate the speaker and the presentation. The group members will execute this operation in secret. Each item will be rated from one to five stars, with one being the worst, three being average, and five being the best. Please use the designated space to provide any feedback.

1. How concise, engaging, and informative did you find the presentation?
2. How effectively do you believe the instructional materials address the problem?
3. How professional and effective do you think the presenter was?
4. How would you rank the presentation's length?

A digital copy of the surveys will be scanned and transmitted to the nurse for the provider's approval. This information will be beneficial for future educational attempts.

### **Barriers**

Knowledge of DM and a general lack of interest could be barriers. The nurse will respond to this lack of interest with dignity and respect. The nurse will tackle this circumstance by providing a new explanation and discussing the benefits of this prevalent concern. Also, regular two-way communication should be with carefully selected and entirely random groups. After discussing how to interact with families, we will provide some open-ended questions and examples of preventative measures.

## **Section3: Therapeutic Communication**

Communication between nurses and patients is essential for care delivery and the precision of nursing assessments. The nurses must be aware of and sympathetic to their patients and populations' language hurdles, educational backgrounds, and health literacy levels (Foster et al., 2022). The audience will participate actively and comprehend the nurse's words since she will use verbal and visual aids. The nurse will maintain eye contact while interpreting the audience's facial expressions and body language. The topics will be covered in an informative brochure and accompanying handouts. With the aid of pencils and paper, participation will be enhanced. The nurse will begin the evaluation by asking, "Who has diabetes or knows someone who does?" A poster and physical objects like food will support nonverbal communication. Lastly, this presentation will be delivered to an intellectual audience composed mainly of individuals with bachelor's degrees or higher who are skilled at balancing professional duties with continued education. There will be time after the presentation for questions, comments, and clarification if necessary.

## **Conclusion**

If the community health plan is approved, the nurse will be permitted to advocate for type 2 diabetes primary prevention. The project allows the nurse to investigate and implement joint, effective health promotion and education strategies. In addition, through disseminating information about type 2 diabetes, the presentation involves the community. The end goal is to reduce the prevalence of diabetes in that region.

# References

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