**Literature Review: Enhancing Health Outcomes in Vulnerable Populations Through Nursing Interventions**

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Due Date

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Refugees and internally displaced people are among the most vulnerable members of society. Often, they face discrimination, poor housing and living conditions and restricted or inadequate access to mainstream health services (Sherif, Awaisu, & Kheir, 2022). Exclusion from disease prevention, health promotions and financial protections exacerbate the situation.

The barriers are bigger for people living with disabilities. Existing literature suggests the concept of social exclusion, which recognizes health inequalities among marginalized populations. As all people, refugees have an inalienable right to enjoy the highest attainable health standards.

Nurses have been at the forefront of promoting health equity through interventions that seek to mitigate health disparities (Nickitas, Emmons, & Ackerman-Barger, 2022). The strategies include engaging in outreach activities, creating customized care plans based on social needs, and conducting tests and screening. Also, collaborating with state and municipal health departments to achieve health equity through health promotions, disease prevention, and control would significantly alleviate the problem.

Advocacy for health policies and reforms has shown effectiveness in improving health equity. For instance, nurse-led mobile outreach programs have enhanced chronic disease management and improved immunization(Desmyth, Eagar, Jones, Schmidt, & Williams, 2021). In regards to mental health, nurses trained in curbing trauma have helped reduce symptoms of depression and post-traumatic stress disorder.

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Several studies explore nurse preparedness and training in response specific to refugee health. Also, limited research exists on how cultural beliefs specific to refugees influence nursing care results and strategies for incorporating refugees in planning health. Future research should assess how nurse-led interventions contribute to sustained health for refugees. Additionally, it should explore how training-based evidence of working with vulnerable populations such as internally displaced people can contribute to better health access by the vulnerable in society. Prioritizing participatory methods can ensure the outcomes of the interventions are informed by the community experiences.

**References**

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