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An Educational Program for Nurses to Improve Culturally-Appropriate Mental Health Assessment for Nigerian Immigrant Youth in Central Florida

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This is to certify that the doctoral study by

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has been found to be complete and satisfactory in all respects,
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Walden University
2021

Abstract

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by

Blessing A. Onyekachi

MS, Walden University, 2018

BS, University of West Georgia, 2014

Project Submitted in Partial Fulfilment

of the Requirements for the Degree of

Doctor of Nursing Practice

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Abstract

Nigerians, like other immigrants, face many health issues with rising waves of conflict and political instability that contribute to high migration rates. As a result, when they arrive in other countries, these immigrants not only have to deal with the trauma they left behind. They face issues such as cultural stereotypes, stigma, lack of insurance, cultural and language barriers, poor communication, social discrimination, and low socioeconomic status. The question that this project addressed was whether an educational program for nurses would improve knowledge on culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida. This was a nursing staff education project on the need for a culturally-appropriate mental health assessment. The theory of constructivism, pre-test, post-tests, handout, PowerPoint, and role play were used to gauge the knowledge of the learners. The sources of evidence used to create the education materials were from journal articles, research reports, MEDLINE, Cochran, CINAHL, EMBASE, and the Joanna Briggs Institute EBP Database. Descriptive statistics, including percentages, frequencies, and mean were used to analyze the results. Data from the pre-test/post-test (N = 22) showed that 41.2% of the participants "completely agreed" with the statements vs. 98.7% for the post-test. This showed a 41.7% increase in the knowledge gained. Findings that supported the nursing staff education improvement in knowledge of culturally-appropriate mental health assessment has potential to bring about a positive social change by bridging the gap in the nursing practice to promote mental health and well-being and reduce the barriers concerning Nigerian immigrant health by increasing cultural awareness.

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Dedication

I dedicate this educational project to God Almighty who made it possible. To my family, especially the husband of my youth, for always being there for me. I will forever love you. To my children, Joy, Jeremia, Joelyn, and Oghoghor, for their understanding and love, you know you got the center of my world. I also dedicate this work to my late parents, who sold their happiness and joy to give me education. To my brothers, sisters, friends, and all academicians.

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Section 1: Nature of the Project

Introduction

Nigeria is Africa's most populous country. However, the country has been ravaged by insurgencies and internal conflicts for decades. Many cases of violence in Nigeria are caused by armed conflicts, and today, violence due to terrorism is taking place all over Nigeria, including homes and villages. Youths and families in this war-torn country are frequently direct and indirect victims of violence (Eisman et al., 2015). They are either victims or witnesses of various types of horror associated with war and terrorism, and as a result, they are known as violence-affected youths and families (Eisman et al., 2015). The exposure of Nigerian youths to violence has increased traumatic experiences, and this has been seen in print and other media platforms (Akinlabi, 2016). This study provides a background on the traumatization of Nigerian youths and families and takes into consideration their emotional state and type of trauma in order to understand the after-effects of trauma on the victims (see Eisman et al., 2015).

Nigerians, like other immigrants, face many health issues. They are prone to mental health issues caused by both pre-migration and post-migration factors. Immigrant youths are likely to face mental health problems such as depression, anxiety, somatization, and substance abuse, which are normally associated with low socioeconomic status and culture shock (Adu-Boahene, et al, 2017). Even though Nigeria is one of Africa's most populous countries, it is faced with challenges such as extremely high unemployment rates. The youth unemployment rate in Nigeria rose from 24 percent

to 25 percent in 2015 (Eisman, et al, 2015). Nigeria has the highest number of people living in poverty than any other country in the world (Eisman, et al, 2015).

These post-migration factors include low socioeconomic status and culture shock (Adu-Boahene et al., 2017).

Nigerian immigrants in Central Florida experience several mental health issues that need to be addressed (Adu-Boahene et al., 2017). Ensuring culturally-appropriate mental health assessment is one way of improving mental healthcare for Nigerian immigrants in Florida. This DNP project is a staff education on culturally-appropriate mental health assessment. The resulting nursing education can have a positive social change impact on the community members.

Problem Statement

The nursing practice problem being focused on is the lack of culturally-appropriate mental health assessment for Nigerian immigrant youth. These people face mental health problems such as depression, anxiety, somatization, and substance abuse, which are normally associated with low socioeconomic status and culture shock (Akinlabi, 2016). Most immigrants face harsh conditions before they can settle. Some of them are physically assaulted or dealing with ill parents and children; they become emotionally distressed and need mental health services (Nwobilor, 2017).

In the United States, Nigerian immigrants settle in inner city neighborhoods, where they meet strangers speaking new languages. They need to learn new languages, especially those who do not have good English proficiency. These individuals can be overcome by fear due to the harsh environment. In Florida, they settle in places where

rent is low, but which are crime hot spots. Most of these immigrant families live in overcrowded buildings with little privacy (Abegunrin, 2021). They face violence, robbery, and theft due to unconducive living environments. Discrimination and prejudice, on the other hand, is the order of the day. Adults experience discrimination and prejudice from Whites and peer immigrants who arrived earlier (Abegunrin, 2021).

The lack of understanding of the need for culturally-appropriate mental health assessment is a major barrier to screening individuals for mental health interventions and evaluating their efficacy. Screening tools, as often used in research and practice, are inadequate and produce misleading and inaccurate conclusions (Balaratnasingam et al., 2015). Therefore, this doctoral project will enable nurses to realize the importance of culturally-appropriate mental health assessment in different clinical settings (Akinlabi, 2016). By implementing culturally-appropriate mental health assessment, nurses will promote quality mental health care delivery for Nigerian immigrants in Florida.

Purpose Statement

Culturally-appropriate nursing assessment to address mental health issues is lacking among traumatized Nigerian immigrant youth in central Florida. At the proposed project site, there is no specific mental health assessment for immigrants, let alone Nigerian immigrants specifically (Akinlabi, 2016). This is the gap in practice that is the focus of this project. The practice-focused question is: Will an educational program for nurses improve culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida?

The purpose of this nursing staff education project is to educate nurses and staff about the importance of the need for culturally-appropriate mental health assessment (see Akinlabi, 2016).

Nature of the Doctoral Project

This DNP project used various sources of evidence such as journal articles, research reports, clinical guidelines, controlled trials, and books. Online databases such as MEDLINE, Cochran, CINAHL, and EMBASE were used to retrieve these sources of evidence. Also, Joanna Briggs Institute EBP Database was used because it is a database containing high-quality literature (Kaiser et al., 2019). Different search terms that were used included Nigerian youths, Nigerian immigrants, Nigerian mental health, traumatized Nigerian youths, African immigrants, and mental health assessment.

The information gathered from these sources was used to create the content of the education plan. The content will guide the nurse educator regarding topics that will be covered during the lesson. The information was categorized into different topics to effectively educate the staff. The information was analyzed thoroughly to ensure only relevant ones were included in the teaching plan.

Significance

Stakeholders of this DNP project include the staff (licensed registered nurses and psychologists), nurse educators, the nurse manager, and the chief psychologist. The licensed nurses and the psychologists will help implement the intervention. The nurse manager and the chief psychologist helped review the program (Kaiser et al., 2019). The hospital management helped with the approval of the program and an educational setting.

This doctoral project has the capacity to help improve the staff's ability to provide a better care for patients.

This staff education may be implemented in other mental health care institutions (see Taru et.al. 2018). Culturally-appropriate mental health assessment can help reduce adverse situations such as suicide ideation and thoughts associated with trauma to help improve the individuals' social life, making them socially responsible and useful. Culturally-appropriate mental health assessment will lead to accurate diagnosis and treatment of mental health disorders.

Summary

Nigerian immigrants in Central Florida experience several mental health issues that need to be addressed. The lack of culturally-appropriate mental health assessment is a major barrier to screening individuals for mental health interventions and evaluating their efficacy. This nursing education project was designed to promote the implementation of culturally-appropriate mental health assessment in nursing practice. Credible online databases were used to access sources of evidence. Stakeholders of this DNP project include the staff (licensed registered nurses and psychologists), nurse educators, the nurse manager, and the chief psychologist. This project will provide nurses and psychologists with knowledge regarding culturally-appropriate mental health assessment to improve the mental health of Nigerian immigrants.

Section 2: Background and Context

Introduction

The lack of culturally-appropriate mental health assessment is a major barrier to screening individuals for mental health interventions and evaluating their efficacy. Screening tools, as often used in research and practice, can produce misleading and inaccurate conclusions (Akinlabi, 2016). The practice-focused question includes: Will an educational program for nurses improve culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida? The purpose of this nursing staff education project is to educate nurses and staff about the importance of the need for culturally-appropriate mental health assessment (Akinlabi, 2016). Major headings of this section include concepts, models, and theories, relevance to nursing practice, local background and context, role of the DNP student, role of the project team, and summary.

Concepts, Models, and Theories

The theory of constructivism was used to ensure effective staff education. It is an important learning theory used by educators in various fields of study (Adom et al., 2016). Constructivism is based on the assumption that individuals actively construct or make their own knowledge. It also assumes that reality is determined by one's experiences as a learner. This theory suggests that students should be active in learning rather than passive recipients of knowledge (Adom et al., 2016). Students control their own learning process, and they lead the way by reflecting on their experiences. They also collaborate to understand every aspect of the program (Dennick, 2016). The main activity

in a constructivist classroom is solving problems. Students use inquiry methods to ask questions, investigate a topic, and use resources to find solutions and answers.

This theory is relevant to this project because it encourages independence at work. It suggests that people construct their own understanding and knowledge of the world (Adom et al., 2016). Similarly, healthcare providers perform most functions independently, even though collaboration is part of the practice. This theory was used to design the plan by including real-world problem-solving situations (Dennick, 2016). The nurses will gain more knowledge and then reflect on what they are doing and how their understanding is changing.

Terms Used in This Project

African youth: African youth refers to people between the ages of 15 and 35 who live in Africa (Wusu, 2015).

Culturally-appropriate: The term culturallyappropriate, in relation to mental health, examines aspects of culture and belief and how they align with the patients' mental health status (Akinlabi, 2016).

Immigrants: For the purposes of this study, immigrants are foreigners who live in the US (Adu-Boahene et al., 2017).

Mental disorders: A mental disorders is any illness with a significant psychological or behavioral manifestation that is associated with a painful or distressing symptom (Akinlabi, 2016).

Mental health assessment: Mental health assessment is an examination used to identify whether a patient is functioning on a healthy psychological, social, or developmental level (Gaston et al., 2016).

Nigerian youth: Nigerian youth include citizens of the Federal Republic of Nigeria aged 18–29 years, according to the new youth policy (Akinlabi, 2016).

Nursing assessment: Nursing assessment is the step-by-step collection of all information/data that is important in taking care of the patients' problems and what they need (Mitchell, & Hill, 2020).

Nursing care: Nursing care entails all activities performed by nurses during treatment, including procedures or medications that primarily provide comfort to the patient (Gaston et al., 2016).

Relevance to Nursing Practice

Nigerians account for approximately 0.6%of the total foreign-born population in the U.S (Migration Policy Institute, 2015). As of 2015, the total population of Nigerian immigrants in the US amounted to 376,000. Adu-Boahene et al. (2017) pointed out that these immigrants experience significant challenges in healthcare access including low socioeconomic status, lack of insurance, and cultural and language barriers. One of the most significant barriers to access to mental healthcare Nigerian immigrant youths face is the stigmatization of mental health issues (Akinlabi, 2016). According to Labinjo et al. (2020), mental health is a big challenge to Nigerian public health because of poor understanding, neglect, and stigmatization. They are treated unfairly and condemned by the public. Mental health is the most neglected area of health care in Nigeria. The neglect

is believed to have been caused by and exacerbated by stigma. Stigma remains the most important cultural and moral barrier to mental health care. As a result of the stigma attached to mental illness, individuals' rights and dignity are neglected.

According to Akinlabi (2016), culturally-appropriate nursing assessment to address the issues of Nigerian immigrants might be lacking. Such perspectives prevent immigrants from seeking mental health screening and treatment and point out the need for nurses and other healthcare providers to recognize cultural differences in their assessment. Adu-Boahene et al. (2017) carried out a mixed-methods study in United States, using paper-based surveys, which targeted youths, men, and women from Nigeria, Ghana, and Liberia, recruited through convenience and snowball sampling. The research showed that many youths, including those with mental problems, do not receive adequate care due to racism and other forms of stigma.

Mental health problems are major social health concerns across the United States. Boahene et al. (2017) argued that across low- and middle-income countries, mental health care staff education is essential to help them understand the importance of a culturally-appropriate mental health assessment. Akinlabi (2016) stated that although important efforts have been made to adopt mental health screening tools for children and adolescents in Nigeria, there remains a need for rigorous cultural adaptation as well as diagnostic validation studies. Previously, mental health assessment tools have been translated to patients' mother language, but that does not mean they are culturally appropriate (Akinlabi, 2016). This doctoral project has the potential to advance nursing practice by equipping medical staff with the knowledge needed to conduct culturally-

appropriate mental health assessment (Akinlabi, 2016). The knowledge will help the staff to design and implement these strategies, thereby promoting mental health care.

Local Background and Context

Globally, the lack of culturally-appropriate mental health assessment is a major barrier to screening individuals for mental health interventions and evaluating their efficacy. Adopting culturally-appropriate assessment will help improve the mental health of Nigerian immigrant youths (Adu-Boahene et al., 2017). The institution where this DNP project was carried out was one of the behavioral hospitals in Central Florida. This behavioral hospital cares for individuals who are struggling with depression, anxiety, bipolar disorder, posttraumatic stress disorder, other mental health concerns, and co-occurring substance use disorders. The hospital leadership is very effective and willing to support the staff education project. Their mission is to improve the mental health of the community members. Their vision is to be the best mental health hospital in the region.

Role of the DNP Student

In the doctoral project, I act as an educator. I used my professional skills and knowledge to ensure the doctoral project was complete. I also ensured that the results were accurately analyzed and presented. My role in the doctoral program was to identify an appropriate topic and the gap to be addressed. I was also responsible for informing and identifying the participants.

Furthermore, I was responsible for searching for sources of evidence as well as informing the institution and presenting the proposed education project to them (see Kaiser et al., 2019). I also developed and conducted the teaching program as well as

conducted a summative evaluation with pre-test and post-test. What motivated me to carry out the project was the desire to improve the mental health status of the Nigerian immigrant youths in Florida.

Role of the Project Team

The project team reviewed the program before presenting it to the management. I conducted the data analysis for the evaluation. The doctoral project team included two individuals, the nurse manager, and the chief psychologist (see Kaiser et al., 2019). The team members worked in collaboration with me to share their expertise and contextual insight. For instance, we discussed the contents of the program and their appropriateness.

After the program was developed, I arranged a meeting with the two project team members and presented the staff education project through the PowerPoint presentation. They were also be provided with copies of the presentation for review (see Kaiser et al., 2019). Three days after, the team arranged another meeting with me to provide feedback and possible changes. This helped to develop a refined program for this doctoral project.

Summary

The lack of culturally-appropriate mental health assessment is a major barrier to screening individuals for mental health interventions and evaluating their efficacy. The purpose of this project is to ensure there is a culturally-appropriate mental health assessment to promote positive mental health outcomes for the Nigerian youth immigrants in Central Florida. The theory of constructivism was used to guide the staff education program. This project took place at one of the behavioral hospitals in Central Florida.

Section 3: Collection and Analysis of Evidence

Introduction

Culturally-appropriate nursing assessment to address the issues of Nigerian immigrant youth is lacking in Central Florida. At the project site, there is no specific mental health assessment for immigrants. This is the gap in practice that is the focus of this project (Akinlabi, 2016). Thus, the purpose of this nursing staff education project is to educate nurses and staff about the importance of the need for culturally-appropriate mental health assessment (Akinlabi, 2016).

The theory of constructivism was used to guide the staff education program (Akinlabi, 2016). Evidence-based practice sources were used to provide information to educate the staff. The main topics of this section include the meaning of mental health assessment, the need for culturally-appropriate mental health assessment, and the incorporation of culture in mental health assessment. A sample of the teaching outline is attached as Appendix A.

This project took place at one behavioral hospital in Central Florida. Nurses were educated on the importance of performing culturally-appropriate mental health assessment. The final plan was presented to the organizational leadership and the providers validated the content. A pre-test was be carried out before the implementation of the staff education program to assess participants' knowledge of culturally-appropriate mental health assessment (Kaiser et al., 2019). A post-test was also be carried out to assess the knowledge gained by the participants.

Practice-Focused Question

The practice-focused question includes: Will an educational program for nurses improve culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida? This nursing staff education project was designed to promote the implementation of culturally-appropriate mental health assessment for nursing practice (Akinlabi, 2016). I followed the steps in the Staff Education Manual for development, implementation, and evaluation of the education program. This approach aligns with the practice focused question because it is a staff education project; therefore, it will be used to evaluate whether such a program will improve culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida.

Becoming a leader in the translation of evidence to practice is DNP essential II, while scientific Underpinnings for Practice is DNP essential I that relates to my project. Leaders are required to ensure evidence-based change is successfully implemented.

The vision statement above demonstrates my commitment and aspiration to be a transformational leader who would stimulate innovation among the frontline workers while at the same time creating a conducive environment to support change and sustainability. Leaders must create a supportive environment for the adoption of evidence-based practice initiatives. The leadership must, therefore, ensure the availability of appropriate infrastructure. The infrastructure must include both human and material resources as well as a receptive culture that would ensure the assimilation and sustenance of the desired EBP change (Aarons et al., 2015).

According to Kueny et al. (2015), institutional leadership such as the nurse managers is a crucial factor in the delivery of high-quality care and the implementation of evidence-based practice. Nurse leaders have the capacity and the authority to pool resources and personnel with the ultimate goal of implementing evidence-based practice at the organizational level. Nurse leaders play dynamic roles, which include change agents, mentors, innovators, and overall leaders in the healthcare sector who drive organizational activities and guide the frontline workers towards the goals and objectives of the organization. It is vital to acknowledge that the establishment of an EBP culture is a leadership-driven change. The leaders must, therefore, demonstrate their commitment towards a transformational change that will involve a change in values norms and the structures of nursing within their organizations of practice. The nurse leaders must, therefore, revisit the philosophy of nursing, develop a strategic plan, use mentors, and overcome barriers with the ultimate goal of achieving the desired and planned outcomes.

Nurse leaders have different platforms for advocacy, especially on the use of new evidence-based practice approaches in the policy arena. Nurse leaders can use professionals nursing organizations to advocate for the new EBP approaches based on the large membership and influence that the organizations have (Brokaw, 2016). Similarly, nurse leaders can use other platforms like conferences, workshops, or better still round tables at their places of work with the goal of advocating for policy changes and the adoption of new approaches. Another platform that the nurse leaders can use their extensive networks at the professional level. Nurses can use their networks to connect

with other professionals and carry out policy-related advocacy with the ultimate goal of supporting a change of practice and the adoption of new practices in clinical practice.

Other Essentials Addressed in this Project

DNP Essential IV. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care

DNP Essential VII. Clinical Prevention and Population Health for Improving the Nation's Health

DNP Essential VIII. Advanced Nursing Practice

This project will make me an expert as a nurse in the transition of evidence to practice.

Sources of Evidence

This DNP project used various sources of evidence such as journals, articles, research reports, clinical guidelines, systematic reviews, controlled trials, and books (Wusu, 2015). These sources of evidence provided information regarding the culturally-appropriate mental health assessment for nurses on Nigerian immigrants.

Published Outcomes and Research

Online databases such as MEDLINE, Cochran, CINAHL, and EMBASE were used. Also, Joanna Briggs Institute EBP Database was used because it is a database containing high-quality literature. Search terms used include Nigerian immigrant youth, culturally appropriate mental health assessment, African youth, African immigrants, nursing assessment, African immigrant youth, nursing care, immigrants, and mental disorder. I only considered peer-reviewed sources published within the last 5 years.

Evidence Generated for the Doctoral Project

Participants in this study are all licensed registered nurses and psychologists from one of the behavioral hospitals in Central Florida. Participants (N=22) included both men and women (Kaiser et al., 2019). The staff education program focuses on the importance of culturally-appropriate mental health assessment for immigrant youth (Kaiser et al., 2019).

The program involves a 4-hour lesson with each topic covering 2 hours. Two experts, the nurse manager, and the chief psychologist, were asked to review the program (Kaiser et al., 2019). The program was again reviewed and verified with the organizational leadership and providers who are nurses and psychologists. The final plan was presented to the organizational leadership and the providers through PowerPoint presentations to validate the content (see Kaiser et al., 2019). Staff education will take place according to the plan for the staff education program.

The content of the presentation included introduction and overview. This section includes introducing everyone – myself, nurses, and nurse educators – as well as explaining what is going to be learned (see Kaiser et al., 2019). The sections include the meaning of mental health assessment, the need for culturally appropriate mental health assessment, and mental health guidelines and standards. It also covers how to incorporate culture in mental health assessment, follow up process, and communication skills for assessment.

Protections

I protected the participants by keeping their information and pre-test and post-test results confidential and locked in the office of the administrator (Koo & Nyunt. 2020). Since the project was based on staff education, no ethical problems were expected. This project was submitted for approval by the Walden IRB.

Analysis and Synthesis

A summative evaluation using a pre-test and post-test was carried out to assess the knowledge gained by the participants immediately after the presentation (Kaiser et al., 2019). A sample of the pre/post-test is included in Appendix B. The scores in percentages were compared to determine whether the nurses and other staff members gained knowledge regarding culturally appropriate mental health assessment. Descriptive statistics such as percentages, mean, median, mode, and standard deviation were used to compare the pre-test and post-test scores.

Summary

Culturally-appropriate nursing assessment to address the issues of traumatized Nigerian immigrant youth is lacking in Central Florida. The practice-focused question was: Will an educational program for nurses improve culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida? This DNP project used various sources of evidence such as journals articles, research reports, clinical guidelines, systematic reviews, controlled trials, and books. Participants were all the licensed registered nurses and psychologists from one of the behavioral hospitals in Central Florida. The project protected the identities of individuals involved. Since the project was

based on staff education, no ethical problems were expected. This project was submitted

for approval by the Walden IRB.

Section 4: Findings and Recommendation

Introduction

Nigerians account for approximately 0.6% of the total foreign-born population in the U.S (Migration Policy Institute, 2015). As of 2015, the total population of Nigerian immigrants in the US amounted to 376,000. Adu-Boahene et al. (2017) pointed out that these immigrants experience significant challenges in healthcare access including low socioeconomic status, lack of insurance, and cultural and language barriers. One of the most significant barriers to access to mental health care Nigerian immigrant youths face is the stigmatization of mental health issues (Akinlabi, 2016). Such perspectives prevent immigrants from seeking mental health screening and treatment and point out the need for nurses and other healthcare providers to be aware of cultural differences in healthcare. Adu-Boahene et al. carried out a mixed-methods study in the US that targeted youths, men, and women from Nigeria, Ghana, and Liberia. The research showed that many youths, including those with mental health problems, do not receive adequate care due to racism and other forms of stigma.

Nigeria is rife with conflict and political instability that contribute to high migration rates. As a result, when they arrive in other countries, these immigrants not only have to deal with the trauma they left behind, but also the difficulties associated with living in a foreign country as immigrants (Ikuteyijo, 2019). Most Nigerian immigrants are aged between 18 and 35 because individuals from this cohort tend to be single (Ikuteyijo, 2019). These immigrants face issues such as cultural stereotypes, poor communication, and social discrimination (Ezeobele et al., 2018).

This DNP project was aimed at bridging the gap in the nursing practice concerning Nigerian immigrant and cultural awareness. The project's nature is a nursing staff education program for nurses to improve culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida. The guiding practice-focused question for this project was: Will an educational program for nurses improve culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida? The sources of evidence to address the practice-focused questions were identified through a comprehensive review. They were derived from journal articles, research reports, and clinical guidelines on evidenced-based approaches to assessment on Nigerian immigrant and staff education on assessment. Based on my obtained evidence, I developed an educational module involving lecture presentations and questionnaires. Staff knowledge was evaluated and analyzed as evidence addressing the project's practice focus question. In the following sections, I discuss the findings and implications of the project, as well as offer recommendations and summarize key points, strengths, and limitations of the project.

Findings and Implications

Before presenting the lecture portion of the staff educational program, I had a meeting with the management, and I discussed the teaching project with them, and the teaching was approved. After the approval, a pre-test was given to determine the staff's knowledge of the process of assessment and cultural awareness in relation to Nigerian immigrant youth in Central Florida. The pre-test questionnaire (see Appendix A) included questions on culturally-appropriate mental health assessment for Nigerian

immigrant youth (Questions 1-3), explained the need for culturally-appropriate mental health assessment (Question 4-6) and the reason to perform culturally-appropriate mental health assessment (Questions 7-8), explained why Nigerian immigrants in the US experience mental health issues (Questions 9-12), and described educational programs for nurses regarding culturally-appropriate mental health assessment for Nigerian immigrants youth and the role of nurses as health educators, facilitators, and promoters of care.

The participants consisted of 22 nurses including management (N=22). After the approval, the pre-test revealed that the staff had an insufficient baseline knowledge about Nigerian culture. These involved questions where at least 60% (N=13.2) of the participants disagreed with questions statements 1-5 and 8-11. These questions revealed a knowledge gap in culturally-appropriate mental health assessment. There were no specific guidelines for assessing Nigerian immigrants youth in Central Florida, (Questions 1-3), explain how to apply a culturally-appropriate mental health assessment, (Questions 5-9) explains the reason for cultural-appropriate mental health assessment (Questions 9-12), and the role of nurses as health care educators, facilitators, and promoters of good health.

Pre-Test

Regarding Questions 1-3, the majority of the participants (N=18, n=82%) were unaware of cultural impact on Nigerian immigrant youths' diagnoses and treatment. The role play scenarios showed the differences in patient diagnoses and treatment using culturally-appropriate mental health assessment versus using universal assessment for Nigerian immigrant youth in Central Florida. The majority of the participants agreed

(N=20, n=91%). For Question 4, only a few participants (N=2, n=9%) agreed with the scenario. Additionally, a knowledge gap was displayed regarding the misdiagnosis, mistreatment, and culturally-inappropriate mental health assessment of Nigerian immigrant youth in Central Florida. With Question 5, 11 participants (N=20, n=91%) somewhat agreed with the 1-day training about culturally-appropriate mental health assessment. Question 10 participants (N=21, n=95%) agreed that facility does not provide culturally-appropriate mental health assessment for Nigerian immigrants; Question 8 participants (N=21, n=95%) agreed that culturally-appropriate mental health assessment promotes accurate diagnoses; Question 5 participants (N=21, n=95%) agreed that culturally-appropriate mental health assessment is lacking in the care plan for Nigerian American immigrants; Question 7 participants (N=20, n=91%) agreed that stigma explains why Nigerian immigrants in the US experiences mental health issues; Question 2 participants (N=21, n=95%) agreed that there is need for culturally-appropriate mental health assessment in the facility.

Lastly, there was also disagreement on the nurses' role as health educators, facilitators, and promoters of good health for Questions 3 and 4. The majority of the staff (N=18, n=82%,) were unaware of being capable of educating patients on the culturally-appropriate mental health assessment. Some of the staff also did not know that promoting culturally-appropriate mental health assessment improves quality of care to patients. Additionally, the same number of participants (N=18, n=82%) did not know that nurses can influence patient behavior by providing new assessment and resources to them. On

the other hand, Question 10 statements revealed that the staff had sufficient knowledge on the general assessment method.

Post-Test

After the nursing staff took the pretest, the DNP project staff education program was presented. It consisted of 4 hours of lecture presentation. After the educational program presentation, a post-test was carried out to evaluate the knowledge acquired by the participants. The post-test (see Appendix B) contained all the questions of the pretest with the addition of two questions asking for participant evaluation of the educational module (scenario). In all the questions, participants were in agreement with the question statements on the need for culturally-appropriate mental health assessment of Nigerian immigrant youth in Central Florida, lifestyle changes towards mental health care, management, and nurse assistance in patient education. Furthermore, all the participants (N=22, n =100%) believed the educational program influenced their understanding of the need for culturally-appropriate mental health assessment (See Questions 4 and 5 in Appendix B). In summary, results of the pre-test indicated that the participants lacked knowledge of cultural impact on assessment and patient outcome before the staff education program. The results of the post-test indicated that the nursing staffs gained insight on culturally-appropriate mental health assessment and their role as nurses.

Table 1

Comparison of Pre-Test and Post-Test

	Pre-Test	Completely disagree	Completely agree	Post-Test	Completely disagree	Completely agree
1	Mental health assessment is an examination used to identify whether a patient is functioning on a healthy psychological, social, or developmental level.	9% (n=2)	77% (n=17)	Mental health assessment is an examination used to identify whether a patient is functioning on a healthy psychological, social, or developmental level.	0% (n=0)	91% (n=21)
2	Is there a need for culturally-appropriate mental health assessment?	0% (n=0)	82% (n=18)	Is there a need for culturally-appropriate mental health assessment?	0% (n=0)	100% (n=22)
3	I will apply a culturally-appropriate mental health assessment.	82% (n=0)	18% (n=4)	I will apply a culturally-appropriate mental health assessment.	0% (n=0)	100% (n=22)
4	On a scale of 1-5, rate the quality of care you offer to patients referring to culturally-appropriate mental health assessment.	68% (n=15)	9% (n=22)	On a scale of 1-5, rate the quality of care you offer to patients referring to culturally-appropriate mental health assessment.	0% (n=0)	100% (n=22)

5	Is it true that culturally-appropriate mental health assessment has been lacking in the care plan for Nigerian American immigrants?	91% (n=20)	9% (n=2)	Is it true that culturally-appropriate mental health assessment has been lacking in the care plan for Nigerian American immigrants?	9% (n=2)	91% (n=20)
6	Do we perform culturally-appropriate mental health assessment to improve mental health?	91% (n=2)	9% (n=2)	Do we perform culturally-appropriate mental health assessment to improve mental healthcare?	0% (n=0)	100% (n=0)
7	Stigma explains why Nigerian immigrants in the US experience mental health issues.	55% (n=12)	45% (n=10)	Stigma explains why Nigerian immigrants in the US experience mental health issues.	9% (n=2)	91% (n=20)
8	Culturally-appropriate mental assessment promotes accurate diagnoses.	55% (n=12)	45% (n=10)	Culturally-appropriate mental assessment promotes accurate diagnoses.	9% (n=2)	95% (n=21)
9	Do you think you need an educational program regarding culturally-appropriate mental health assessment for Nigerian immigrants?	17% (n=17)	23% (n=5)	Do you think you need an educational program regarding culturally-appropriate mental health assessment for Nigerian immigrants?	0% (n=0)	100% (n=22)
10	The facility provides culturally-appropriate mental health assessment for Nigerian immigrants.	32% (n=14)	36% (n=8)	The facility provides culturally-appropriate mental health assessment for Nigerian immigrants.	82% (n=18)	18% (n=4)

11	I will participate in a one-day training about culturally-appropriate mental health assessment.	0% (n=0)	50% (n=11)	I will participate in a one-day training about culturally-appropriate mental health assessment.	0% (n=0)	100% (n=22)
				How has your perception of culturally-appropriate mental health assessment changed?	0% (n=0)	100% (n=22)

The mean score on the pretest showed 41.2% of the participants completely agreed with the statements. After the presentation and the role play 98.7% of the participants completely agreed with the statements. This showed a 41.7% increase in the knowledge gained from this staff education project.

Implications

The results of this educational program reveal that the staff education program had positive impacts on the nursing staff. In particularly, the nurses have improved in their understanding of how culture can affect patient diagnosis, treatment plan, and patient outcome. Each nurse now implements culturally-appropriate mental health assessment with their immigrant patients. Other implications involve the benefits gained by the Nigerian immigrant youth and all immigrants who are particularly at risk for missed diagnosis and mistreatment. The nursing staff's gained knowledge contributes towards bridging the gap in practice concerning culturally-appropriate mental health assessment that is specific to Nigerian immigrant youth in Central Florida, which is the aim of this DNP project. Additionally, the lack of knowledge that was observed through the results of the pre-test was unanticipated. Its implications are that it emphasized the

need for culturally-appropriate mental health assessment method by providing regular

staff education programs using evidence-based practice guidelines. This is seen with the

beneficial implications the education program had on my institution. My primary care

clinic adopted my education program and are implementing its principles in other related

health modules. The healthcare system benefits with regards to increased effectiveness

with addressing and finding solutions to close the gap in nursing practice for Nigerian

immigrant youth in central Florida. Additionally, the results of the project further

contribute to positive social change by promoting awareness of the need for nurses to

give a culturally-appropriate mental health assessment-based treatment regime.

Ethnically-appropriate knowledge of culturally-appropriate mental health assessment for

Nigerian immigrant youth will help reduce the effect of misdiagnosis, mistreatment,

stigma, and resistance to mental health care and lead to accurate diagnosis and positive

patient outcome.

Recommendations

The panel of experts deemed the education module adequate for implementation

at the behavioral health facility. It is recommended that further actions be taken by the

management to develop policies that include continuing nursing staff education using

what was learned through pre-test, post-test, role play, hand out, Power Point, and

presentations on culturally-appropriate mental health assessment. The process of

continued nurse education can include patient intervention modules, lifestyle

modification modules, and culturally-appropriate mental health modules. Another

recommendation involves the behavioral health facility management encouraging

additional DNP research projects to provide nursing staff with current clinical evidence to continue improving practice on culture. These recommendations can further address the gap in practice on culturally-appropriate mental health assessment for Nigerian immigrant youth.

Strength and Limitations of Project

The major strength of this project was its reliance on a panel of experts that offered approval and recommendations for the education program. Another strength of the project was its use of pre-test and post-test questionnaires to analyze the obtained knowledge of the staff. This staff educational study also comprises of participants with different background experiences and education. Finally, a large portion of the project's success came from the willingness of the staff to participate in the educational program in order to improve their knowledge and ultimately behavioral health care. Despite its strengths, there were various limitations of the project. One was the lack of a continuing follow up with nursing staff to determine the long-term impact of the project on behavioral health care. Another limitation of this project is that although the focus of the project was on the specific behavioral health hospital, the small sample size might limit the results from being representative of other settings.

Summary

The goal of this project was to develop an educational program that will educate the nursing staff on the prevention and management guidelines of hypertension and apply obtained knowledge for the African American community that is most at risk. Through the panelist-approved questionnaires and module presentations, the project's results

reveal my goal was achieved. The project demonstrated that an education module on current evidence-based guidelines can be used to analyze and improve staff knowledge. In Section 5, I will analyze my role as a DNP student and project leader.

Section 5: Dissemination Plan

The importance of a project's dissemination is that it contributes to the field of nursing and further increases knowledge that can be applied and used by many. For this project, behavioral health hospitals in the area could benefit from the dissemination of the components and results of the educational project. Importantly, those that are facing the same insufficient staff knowledge on culturally-appropriate mental health assessment and insight on its relations to the Nigerian immigrant youth community could benefit. Appropriate venues can include staff in-services and on-the-job training. Furthermore, this project can provide links to websites that other behavioral hospitals can use. Publication of the project can also be an accessible forum that will disseminate this information through scholarly journals and health care publishing.

Analysis of Self

My DNP project journey has developed my research and my knowledge acquisition skills. During this time, I have been shaped into a scholar as I learned to find important and relevant knowledge and present my research findings in the form of educational modules. I also learned to effectively educate the nursing staff and address the knowledge gap problem. As a DNP student, presenting my project allowed me to combine my clinical knowledge and research information to teach the nursing staff. By being a practitioner, project manager, and scholar, I ultimately was able to educate and teach the staff to better work with patients and encourage self-management and adherence to training. These skills are part of the DNP learning process defined in The Essentials of Doctoral Education for Advanced Nursing Practice (American Association

of Colleges of Nursing, 2006). The aim of the project was achieved, and I plan to continue focusing on different ways to provide ongoing staff education opportunities. I also plan to continue playing the role in consulting with the management and staff in developing training materials on current evidence-based practice guidelines related to this project and the need for the hospital.

Conclusion

In conclusion, an educational program is very important in bridging the knowledge gap that exists regarding culturally-appropriate mental health assessment and its relation to the Nigerian immigrant youth in Central Florida. I educated the nursing staff on culturally-appropriate mental health assessment for Nigerian immigrant youth in Central Florida with the use of approved role play, handout, pre-test, post-test, Power Point, and module presentations. There were no specific guidelines for assessing Nigerian immigrants youth in Central Florida; the goal of staff knowledge improvement was ultimately achieved. This was correlated with obtained pre-test; post-test results revealed knowledge acquisition of the nursing staff. The implementation of the education module provided the nursing staff with understanding and skills, and applied knowledge improved clinical care through focus on nurse's cultural awareness in the mental health hospital.

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Appendix A: Teaching Plan Outline

30 minutes   Introductions and overview of the presentation pre-test

30 minutes   Objective 1: Definition of mental health assessment

      A. A way of checking to see if one is crazy.

      B. An examination used to identify whether or not a patient is functioning on a healthy psychological, social, or developmental level

      C. A mental health assessment manual currently used by the hospital

      D. Screening tool

      E. Participant discussion

30 minutes   Objective 2: Explain the need for culturally appropriate mental health
Assessment.

      A. War, terrorism, poverty

      B. Unemployment

      C. Stigma, witchcraft

      D. Immigration experience

      E. Language barrier

      F. Culture shock

      G. Expired visas, pressures from family back home…shame, isolation

      H. Participant discussion

30 minutes   Objective 3: Apply culturally-appropriate mental health assessment.

      A. The need for culturally-appropriate mental health assessment

B. Potential for misdiagnoses or missed diagnosis and

inappropriate treatment

C. What is a culturally appropriate assessment for this population?

D. Participant discussion

Break   15 minutes.

Role play

Time: 90 minutes

30 minutes   **Wrap up/final questions and discussion.** Post-test

Lesson Plan

4 hours   Students will:

•   Be able to define mental health assessment.

•   Explain the need for culturally-appropriate mental health assessment.

•   Apply culturally-appropriate mental health assessment.   •   Introduction

•   Meaning of mental health assessment

•   The need for culturally-appropriate mental health assessment,

•   Incorporate culture in mental health assessment

    •   Notes provided by the teacher.

•   Handouts.

•   A mental health assessment manual. Currently used by the hospital

•   Teacher will teach nurses/staff.

•   Teacher will use role play.

    •   Pre-test and post-Test

Appendix B: Pre-Test

	Pre-test	Completely disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Completely agree
1	Mental health assessment is an examination used to identify whether a patient is functioning on a healthy psychological, social, or developmental level.	9% (n=2)	14% (n=3)	0% (n=0)	0% (n=0)	77% (n=17)
2	Is there a need for culturally-appropriate mental health assessment?	82% (n=18)	0% (n=0)	0% (n=0)	0% (n=0)	18% (n=4)
3	I will apply a culturally-appropriate mental health assessment.	82% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	18% (n=4)
4	On a scale of 1-5, rate the quality of care you offer to patients, making reference to culturally-appropriate mental health assessment.	68% (n=15)	5% (n=1)	0% (n=0)	18% (n=4)	9% (n=2)

5	Is it true that culturally-appropriate mental health assessment has been lacking in the care plan for Nigerian American immigrants?	91% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	9% (n=2)
6	Do we perform culturally-appropriate mental health assessment to improve mental healthcare?	91% (n=0)	0% (n=0)	0% (n=)	0% (n=0)	9% (n=2)
7	Stigma explains why Nigerian immigrants in the US experience mental health issues.	5% (n=1)	9% (n=2)	23% (n=5)	9% (n=2)	55% (n=12)
8	Culturally-appropriate mental assessment promotes accurate diagnoses.	14% (n=3)	0% (n=0)	0% (n=0)	9% (n=2)	77% (n=17)
9	Do you think you need an educational program regarding culturally-appropriate mental health assessment for Nigerian immigrants?	18% (n=4)	14% (n=3)	0% (n=0)	36% (n=8)	32% (n=7)

10	The facility provides culturally-appropriate mental health assessment for Nigerian immigrants.	32% (n=7)	0% (n=0)	36% (n=8)	0% (n=0)	32% (n=7)
11	I will participate in a one-day training about culturally-appropriate mental health assessment.	0% (n=0)	9% (n=2)	18% (n=4)	23% (n=5)	50% (n=11)

Appendix C: Post-Test

	Post-Test	Completely disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Completely agree
1	Mental health assessment is an examination used to identify whether a patient is functioning on a healthy psychological, social, or developmental level.	0% (n=0)	0% (n=0)	0% (n=0)	9% (n=2)	91% (n=20)
2	Is there a need for culturally-appropriate mental health assessment?	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)
3	I will apply a culturally-appropriate mental health assessment.	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)
4	Did you learn from the educational program?	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)
5	How has your perception of culturally-appropriate mental health assessment changed?	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)

6	On a scale of 1-5, rate the quality of care you offer to patients, making reference to culturally-appropriate mental health assessment.	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)
7	Is it true that culturally-appropriate mental health assessment has been lacking in the care plan for Nigerian American immigrants?	0% (n=0)	0% (n=0)	0% (n=0)	5% (n=1)	95% (n=21)
8	Do we perform culturally-appropriate mental health assessment to improve mental healthcare?	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22) 0% (n=0)
9	The following explains why Nigerian immigrants in the US experience mental health issues: a) Unemployment b) Stigma	0% (n=0)	0% (n=0)	9% (n=2)	5% (n=1)	95% (n=21)

10	Culturally-appropriate mental health assessment promotes accurate diagnoses.	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)
11	Do you need an educational program regarding culturally-appropriate mental health assessment for Nigerian immigrants?	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)
12	The facility does not provide culturally-appropriate mental health assessment for Nigerian immigrants.	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)
13	Would you participate in a one-day training about culturally-appropriate mental health assessment?	0% (n=0)	0% (n=0)	0% (n=0)	0% (n=0)	100% (n=22)

Role-play

Role-play #1… need to include participants. What is done currently

The role-play scenario was about a patient and a nurse. The nurse performed a mental health assessment, with a Nigerian immigrant youth with claim psychosis. The patient described in this scenario was a 26-year-old Nigerian immigrant female who was brought to psych facility from hospital with claims of mental health disturbances. The patient had symptoms associated with auditory/visual hallucinations and delusions. she states that sometimes she hears things that people around her do not hear. She often believes that it was a special gift for her to see and hear what others don't. She kept social isolation, trying to focus on the directives of the voices. She prays, she talks to herself, angry, noncompliance with medication, and refused to wear hospital gown. The patient denied use of drugs, denied smoking, and denied using alcohol.

Use the same assessment that was used on all the patients

The participant followed it…

Blessing was the Nurse….

Nurse: What is your country of origin? (with a smiley face)

Patient: My country of origin is Nigeria.

Nurse: What ethnic/cultural group do you identify with?

Patient: The Yoruba ethnic community in Nigeria. **(What does the nurse know about this ethnic group? Does the nurse ask more about it?)**

Nurse: What language do you understand well?

Patient: I understand Yoruba and English.

Nurse: Do you read or understand English well?

Patient: Yes

Nurse: What does the words mental health mean to you?

Patient: **Answer the way the patient (Blessing) would….**

Nurse: Share with me what you believe caused your problem?

Patient: **Is this how they would really describe this?**

Nurse: What does your culture say about mental health?

Patient: Some of us believe that mental health is a result of witchcraft.

Nurse: What kind of treatment do you think you should receive?

Patient:

Nurse: What results do you hope to receive from your treatment?

Patient:

After role play #1 putting culture into the assessment during the discussion, what would be the diagnosis? Depression

Role play 2

The role-play scenario is about a patient and a nurse. The nurse is performing a mental health assessment with a Nigerian immigrant youth with depression. The patient described in this scenario is a 19-year-old Nigerian immigrant female whose mother passed away 7 months ago. The patient experienced worsened feelings of sadness, isolation, tearful, and hopelessness (Bachem & Casey, 2018). Considering increasing cases of adjustment disorders, the nurse manager proposed that changes be made on treatment guidelines to include a comprehensive follow-up plan (including home visits)

to ensure these people recovery completely (Bachem & Casey, 2018). The hospital had no clear guidelines on follow up plan for patients with mental illnesses. Note culture, family-oriented culture for this patient

Use the same assessment that is used on all the patients

The participant will follow it…

Blessing is the patient….

Nurse: What is your country of origin? (with a smiley face)

Patient: My country of origin is Nigeria.

Nurse: What ethnic/cultural group do you identify with?

Patient: The Yoruba ethnic community in Nigeria. **(what does the nurse know about this ethnic group? Does the nurse ask more about it?)**

Nurse: What language do you understand well?

Patient: I understand Yoruba and English.

Nurse: Do you read or understand English well?

Patient: Yes

Nurse: What does the word**s** mental health mean to you?

Patient: **Answer the way the patient (Blessing) would….**

Nurse: Share with me what you believe caused your problem?

Patient: **Is this how they would really describe this?**

Nurse: What does your culture say about mental health?

Patient: Some of us believe that mental health is a result of witchcraft.

Nurse: What kind of treatment do you think you should receive?

Patient:

Nurse: What results do you hope to receive from your treatment?

Patient:

After role play #1 you have discussion…what would be the diagnosis? adjustment disorders.

Role play 3

The role-play scenario is about a patient and a nurse. The nurse is performing a mental health assessment with a Nigerian immigrant youth with depression. The patient described in this scenario is a 23-year-old Nigerian immigrant female who was rapped 8 months ago. The patient and her friends were attacked on their way back from a party and got rapped, as a result. For six months now, she has been experiencing a mental disorder. Some of the symptoms she has to include isolation, secretive, tearful, mute, lack of socialization s with friends, always in bed, refused to go to school, and social isolation. Also, the girl is easily frightened and often finds difficulty concentrating in class. The symptoms create distress or impairment in one or more functional areas such as social or occupational (Lang, 2017).

She was diagnosed with depression. Note culture, rape is a taboo, you can say it if you are no body in the society or get killed, no one will marry you, is a stigma.

Use the same assessment that is used on all the patients

The participant will follow it…

Blessing is the patient….

Nurse: What is your country of origin? (with a smiley face)

Patient: My country of origin is Nigeria.

Nurse: What ethnic/cultural group do you identify with?

Patient: The Yoruba ethnic community in Nigeria. **(What does the nurse know about this ethnic group? Does the nurse ask more about it?)**

Nurse: What language do you understand well?

Patient: I understand Yoruba and English.

Nurse: Do you read or understand English well?

Patient: Yes

Nurse: What does the word**s** mental health mean to you?

Patient: **Answer the way the patient (Blessing) would….**

Nurse: Share with me what you believe caused your problem?

Patient: **Is this how they would really describe this?**

Nurse: What does your culture say about mental health?

Patient: Some of us believe that mental health is a result of witchcraft, evil spirit, sins of the patient.

Nurse: What kind of treatment do you think you should receive?

Patient:

Nurse: What results do you hope to receive from your treatment?

Patient:

After role play #1 you have discussion…what would be the diagnosis? post-traumatic stress disorder.