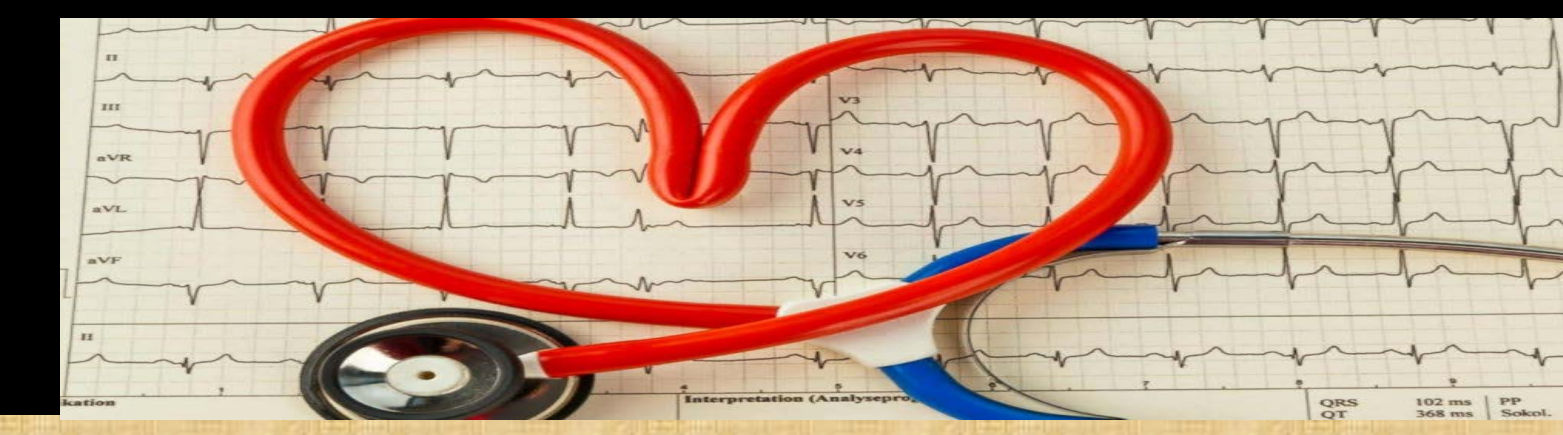


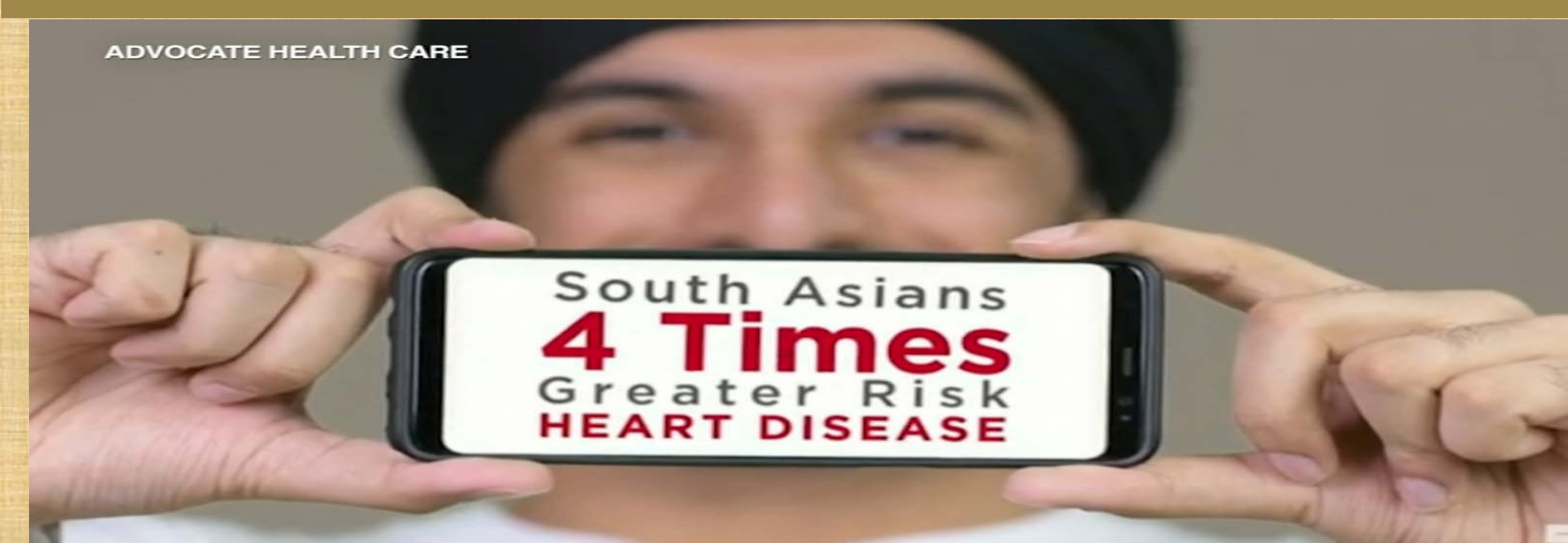
# To Understand the Impact of Heart Disease Amongst Immigrant SAA and use Diversity and Inclusion, to help decrease the disparity in Preventive Care Services and Promote a Healthier Lifestyle for South Asian Americans.



Renu Mathew MS, FNP BC



## PROBLEM



- ❖ 3.4 million people of SAA decent living in US (CDC,2010)
- ❖ Highest number of SAA live in California, New York, New Jersey, Texas and Illinois
- ❖ Develop CAD up to 10 years earlier than the general population.
- ❖ 25% heart attacks occur underage of 40 yr.

## PROJECT GOALS

- ❖ Early intervention and prevention in young adults

### Recognize risk factors: Modifiable

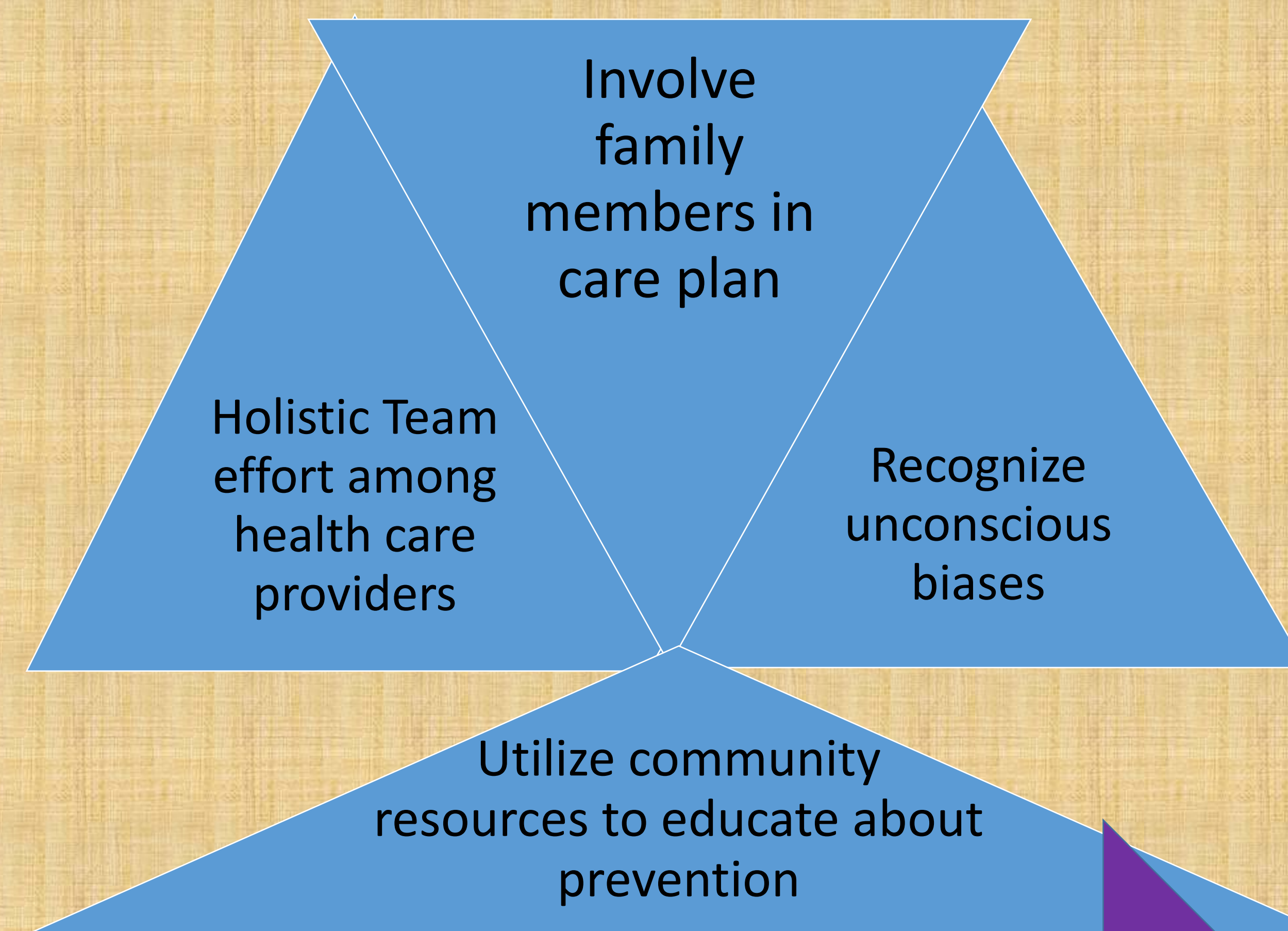
Diet, Physical activity, Use of tobacco  
Communication barriers, Medication adherence.

Access to health care, personal life experiences. Trust and relationship among providers and family

### Non modifiable

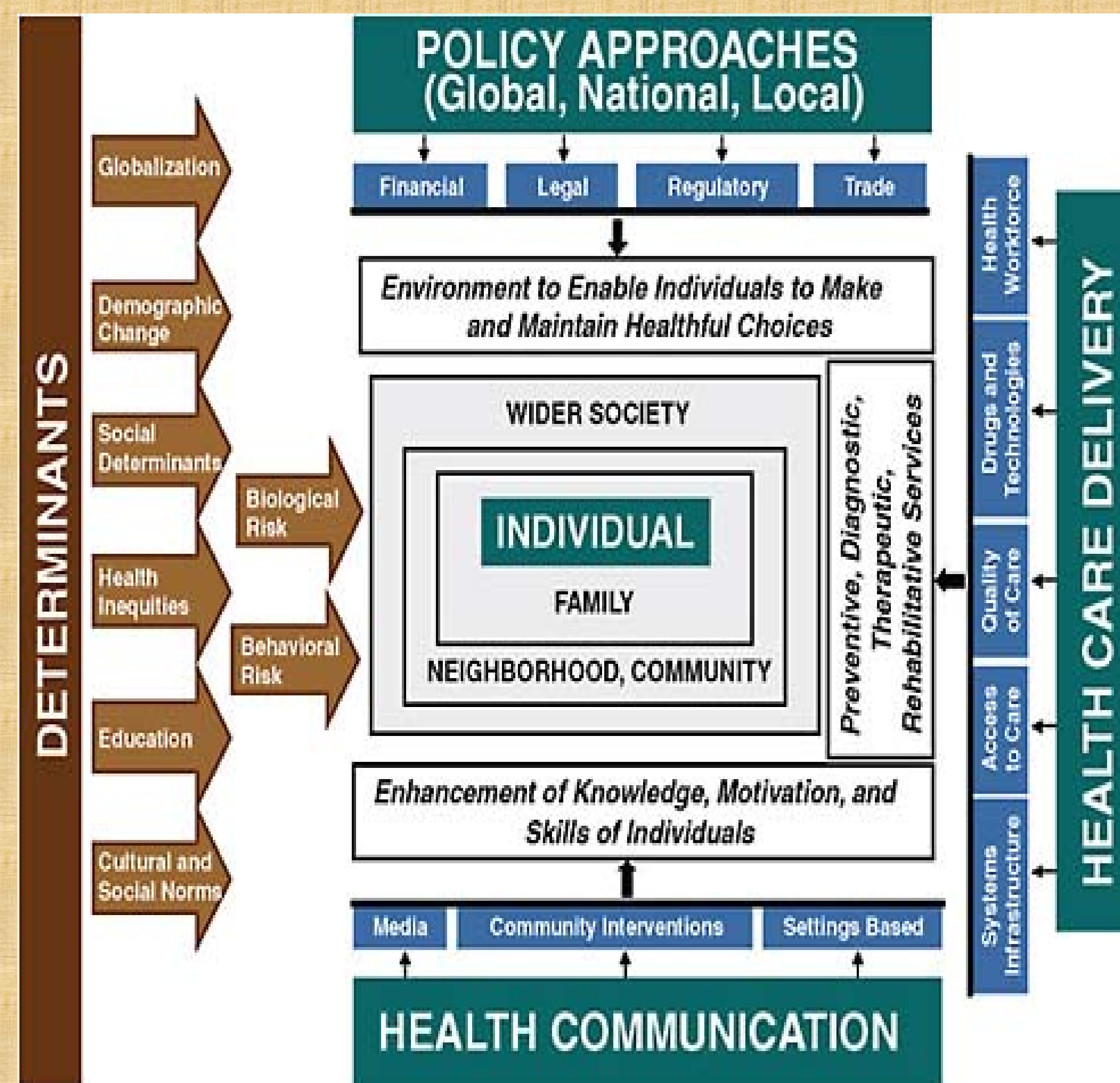
Coronary artery calcification  
Sex: female :Gestational DM, Age  
Family or personal history of HTN,DM,HLD,CKD,PAD.

## PROCEDURE



Madeleine Leininger  
Transcultural nursing Model

## RESULTS



## Process

- ❖ Diversity is having a seat at the table; inclusion is having a voice and belonging is having that voice heard.
- ❖ To be heard : Future research :Culturally tailored nursing intervention.

### Implementation plan at Echo lab:

- ❖ Revise assessment pre-procedure plan for SAA.
- ❖ Include family members in follow up care planning.
- ❖ Provide incentive to use available community resources in disease prevention

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### Contact Information:

111 east 210<sup>th</sup> street  
Bronx, New York  
Email:renmathe@montefiore.org