

CRITICAL FACTORS THAT INFLUENCE ADHERENCE TO THERAPEUTIC MEDICAL REGIMEN AMONG HYPERTENSIVE UNITED STATES VIRGIN ISLANDERS

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Problem

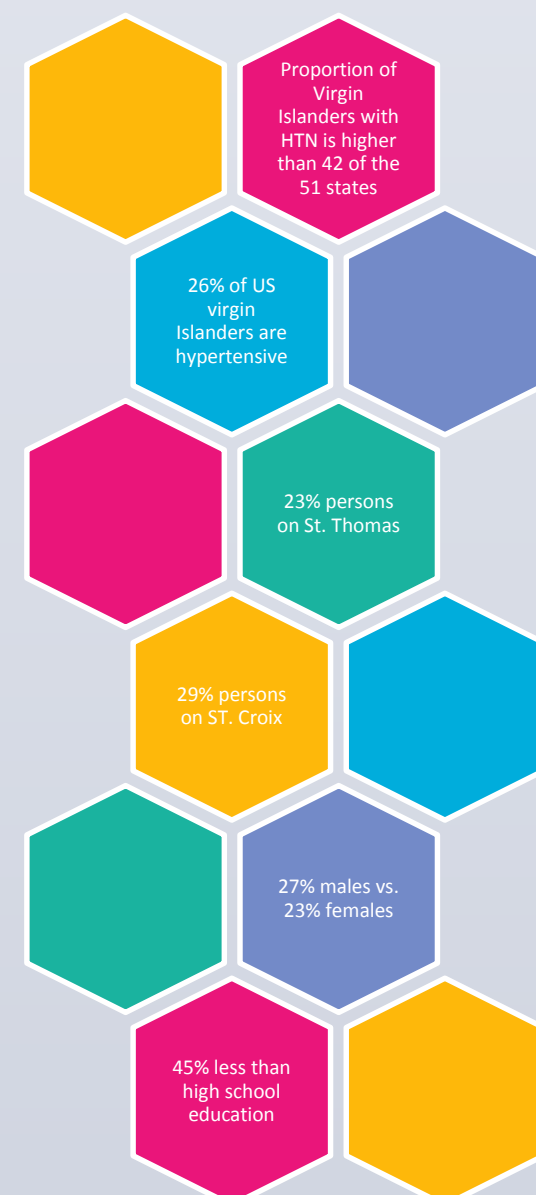
Adherence to any therapeutic medical regimen is multidimensional. Factors that influence this behavior go beyond neglect and financial constraints. Exploring beyond the surface can reveal immense insight about the reasons patients are adherent or non-adherent. This concept has been studied in various populations with researchers investigating societal, individual and even political aspects that may deter consistent conformance for different individuals. Despite the fact that the United States of America mandates the healthcare system of the US Virgin Islands, the rate of hypertension among this population far exceeds the vast majority of states on the mainland. There are likely multiple factors contributing to the prevalence of hypertension in this populace. Non-adherence to therapeutic regimen has been identified in many studies as a tremendous factor contributing to hypertension prevalence globally, with minority populations showing the highest risk of this behavior. Statistical analysis continues to show the prevalence of this disease among this group is exorbitant accounting for the demise of a vast number of its citizens. Merely producing the statistics without identifying the prime contributors of the problem could prove detrimental. Non-adherence to antihypertensive therapeutic regimens has been viewed as a primary factor in poor control of hypertension (WHO, 2003). Uncontrolled hypertension is responsible for a vast number of untoward effects of morbidity and mortality

Research Questions

1. What are the critical factors that influence therapeutic adherence in the hypertensive US Virgin Islander?
2. What are the attitudes, behaviors and beliefs of the US Virgin Islander that directly or indirectly influence adherence to hypertensive therapeutic measures.
3. What are the critical factors of the social structure of the United States Virgin Islands that influence adherence to hypertensive medical therapeutic regimens?

Background

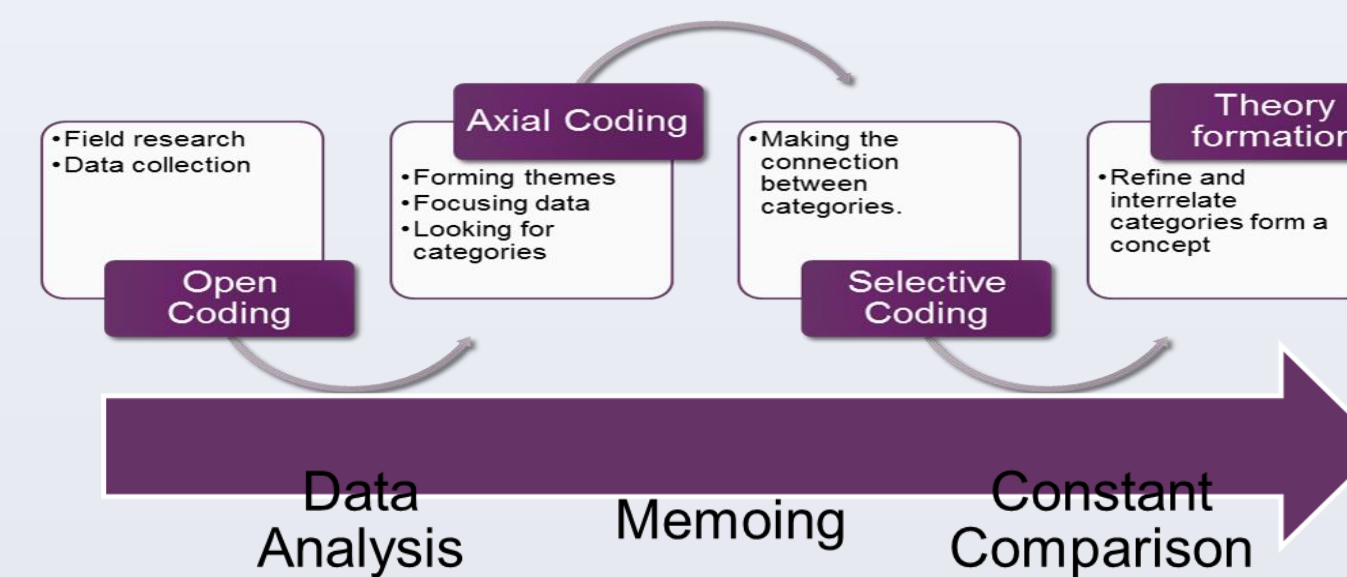
Prevalence of Hypertension in the United States Virgin Islands



Research Design

Grounded Theory is a Qualitative method of inquiry that examines social processes. The philosophical underpinnings of this research approach is Symbolic Interactionism and Pragmatism. The grounded theory method introduced by Strauss and Corbin in 1998 is the grounded theory methodology that will be used in this study. This approach is composed of systematic analytic procedures to develop theories about the phenomenon being explored.

Data Analysis



Grounded Theory Method (Morton, 2016, adapted from Strauss and Corbin, 1990)

Sample and Setting

Inclusion Criteria

Inclusion Criteria Initial Sample

- ☐ Individual must be a United States Virgin Islander by birth or acculturated (Living on Island for 5 years or greater)
- ☐ Persons between the ages of 18-80
- ☐ Person must have a self-reported diagnosis of hypertension for one year or longer.
- ☐ Person must have been placed on some mode of blood pressure management by a health care professional
- ☐ Each participant must be able to speak, read and write English.
- ☐ Must have access to a telephone and a computer

Inclusion Criteria Theoretical Sample

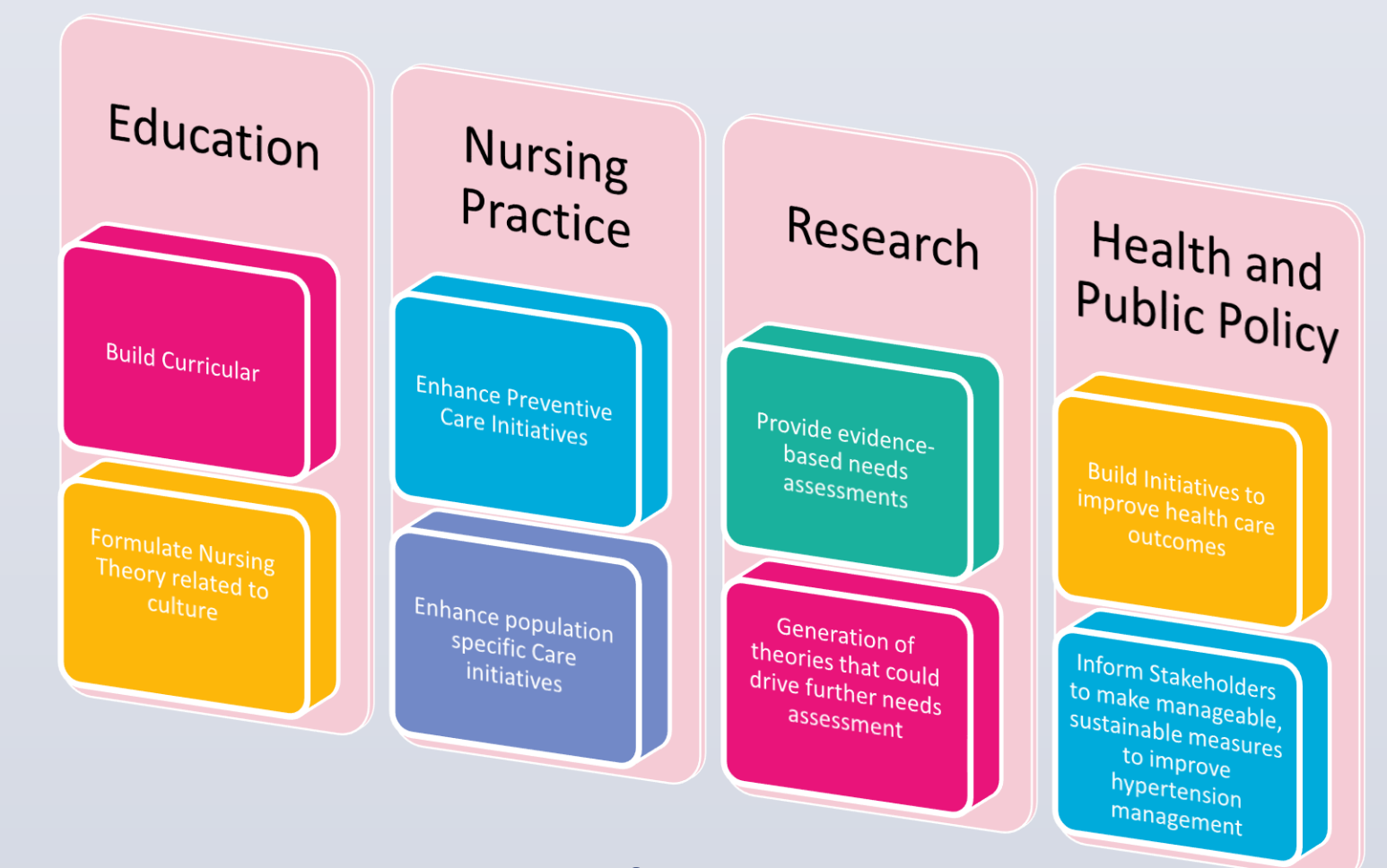
- ☐ Individual must be a United States Virgin Islander by birth or acculturated (Living on Island for 20 years or greater)
- ☐ Persons ages 50-85 years of age.
- ☐ Person must have a self-reported diagnosis of hypertension for 20 years or greater.
- ☐ Each participant must be able to speak, read and write in English
- ☐ Person must have been placed on some mode of blood pressure management by a health care professional
- ☐ Person must have a computer; the decision to participate via Skype or face-to-face will be determined by the researcher based on availability therefore all group participants must have this equipment on hand in the event that they may not be face-to-face with the researcher.



The United States Virgin Islands



Implications for Nursing



References

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