ABSTRACT
SELF-CARE BEHAVIORS OF AFRICAN AMERICANS WITH HEART FAILURE: A PHOTOVOICE PROJECT

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The purpose of this dissertation study was to gain a better understanding of the subjective experience of low-income, urban dwelling, African Americans with heart failure. Outlining both the perceived facilitators and barriers related to engaging in heart failure self-care behaviors. The theoretical framework for this study was founded on the principles of education for critical consciousness. This study utilized a mixed methods descriptive research design and the photovoice methodology.

Ten low-income African Americans with heart failure were recruited from three public housing buildings. The participants’ mean age was 67.5. Their average annual income was $13,537. Participants were provided with digital cameras and instructed to take photographs of what they do to take care of themselves, what makes it easy, and what makes it difficult. The participants and the researcher met for two hours per week for six weeks to discuss the photographs that were taken each week. Additionally, participants completed the Personal Health Questionnaire (PHQ-9) depression severity screening tool and the Self-Care of Heart Failure Index (SCHFI) on week 1 and week 6.

Commonly reported maintenance behaviors included adhering to medications, following dietary restrictions, and participating in daily physical activity. Three themes emerged concerning the facilitators: family support gives me the push I need, social interaction lifts me up, and support in my environment has allowed me to better my condition. An additional sub-theme—personal benefits of the environment—was identified within the third theme. Four themes emerged as the barriers: depression slows my heart down, interruption in health care provider, neglected environment, and dietary challenges.

The findings from this study provide a deep understanding of the importance of social support from family, friends, and health care providers in improving self-care maintenance behaviors. Additionally, inescapable environmental constraints were identified as interfering with engagement. These findings may assist nurses in understanding the complexity of heart failure self-care among low-income African Americans living in urban settings. Understanding individual self-care behaviors, facilitators, and barriers of those with heart failure can lead to the development of appropriate patient-centered assessments and interventions.