

## Critical Analysis of Nursing Interventions in Public Health: Addressing Socioeconomic Factors and Healthcare Access

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### Abstract

*The Healthcare industry is gradually emphasizing SDH interventions to eliminate differences in access to care and enhance population health. However, some of the parameters of social determinants top the list and major on the role of socioeconomic status in enhancing or worsening health. Nursing interventions in public health allow one to work with these factors, especially perinatal ones, in vulnerable populations by increasing access to and utilization of health services and enhancing health literacy. This review evaluates the evidence utilizing various nursing interventions in the attempt to eliminate barriers related to socioeconomic status in healthcare, specific to the outcomes and healthcare utilization among these patients, and more broadly, reduction of health disparities. This paper reviews literature and discusses major nursing interventions, issues, and recommendations for enhancing subsequent public health improvements.*

**Keywords:** *Nursing Interventions, Public Health, Socioeconomic Factors, Healthcare Access, Health Disparities, Social Determinants of Health, Vulnerable Populations, Health Equity.*

### Introduction

Public health nursing plays a significant role in virtually every country's health care system, mainly because nurses are ahead in eliminating health inequalities and extending access to achievable, quality care. Income, education, employment, and housing and related variables are related to health as significant socioeconomic factors. Such factors cause health disparities where the disadvantaged or vulnerable group receives inferior health outcomes because of the poor availability of health facilities. Due to their accessibility, close contact with patients, and understanding of patients' lives, nurses educate and support patients and engage them and their careers in targeted interventions to reduce these socioeconomic factors' adverse effects on patients' physical and social well-being. The main concern of this paper is to appreciate the impact associated with the various interventions offered to society within the nursing profession in regard to public health and upgrading Nations' economic status on health, particularly to the underprivileged community. In light of available research, this paper evaluates the usefulness of current nursing undertakings in narrowing down the existing disparities in the health of people from the disadvantaged economic bracket.

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## Literature Review

### 2.1 Socioeconomic Factors and Health Disparities

Socioeconomic factors are important in delineating health and contribute to health inequities across populations. Lack of jobs, poor income, poor education, and poor shelter, mainly in the low-income bracket, expose these people to numerous diseases. These people are most prone to develop ongoing health complications such as hypertension dia, diabetes, and mental illness, which are associated with their socioeconomic status. Furthermore, these ill-health outcomes are worsened by the inability to access quality health care. This compounds the circle of ill health that is hard to reverse.

Research proposals have pointed out that income, education, employment, and housing are key determinants of health compared to biology or genetics. Lower-income earners have high rates of chronic diseases since they are unable to afford preventive care, are exposed to unhealthy living conditions, and are likely to choose unhealthy diets. Besides, most unemployed people cannot afford health insurance and consequently have limited access to health care. Education also plays a significant role: It points out that people who are more educated are likely to go for checkups, conform to preventive checkups, and are in a better position to make good health decisions.

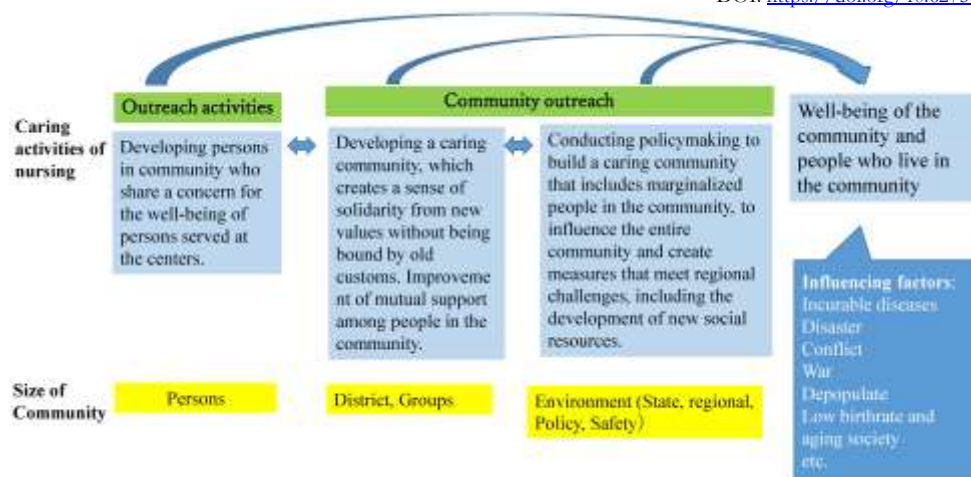
**Table 1: Social Determinants of Health and Their Impact on Healthcare Access**

Social Determinant	Impact on Health	Impact on Healthcare Access
<b>Income</b>	Increased risk for chronic conditions, poor mental health	Limited access to healthcare due to affordability issues
<b>Education</b>	Higher rates of health literacy and preventive care	Low educational attainment correlates with low health literacy, affecting healthcare decision-making
<b>Employment</b>	Better health outcomes with stable employment	Unstable employment leads to lack of insurance, limited access to healthcare
<b>Housing</b>	Poor housing conditions are linked to respiratory and infectious diseases	Lack of stable housing limits the ability to seek healthcare consistently

Above is a summary of issues of equitable income, education, employment, and housing on health and healthcare. For example, low income increases people's vulnerability to chronic diseases and reduces their chances of being able to afford the services required to address the diseases. Number three, people without high education standards do not have enough health literacy to make reasonable decisions, which affects their health. The instability at the workplace leads to the unavailability of health insurance, leaving people with no means of seeking treatment; on the other hand, insufficient housing standards lead to directly transmitted ailments such as respiratory infections that hinder people's chances of accessing healthcare (Smith & Garber, 2018).

### 2.2 The Role of Nurses in Public Health Interventions

It is established that nurses are the caregivers of vulnerable populations, especially in the setting of public health. In this, it is found that they are crucial to achieving the NIH health disparity goals and the overall improvement of health equity. Nurses strengthen the AHA's mission to increase access to healthcare services by educating patients, advocating for patients, and providing direct health services. By teaching, nurses empower their clients to comprehend their illnesses, what puts them at risk, and the decisions they must make regarding their bodies. This education is necessary for people from low backgrounds since they might be unable to access equal information and facilities.



(Purnell & Calhoun, 2016)

Apart from working as educators, nurses also stand as consumers' representatives, helping people from marginalized groups get the care and services they require. This advocacy can include aligning the patient to adequate health care, informing them of the various plans available and how they can get insured, and providing other basic health care services to the patients. Nurses are also involved in screening a population for individuals who are at risk and then help in putting an intervention in place. Often, these interventions are linked to such determinants and may target necessarily alleviating low-income impact on health.

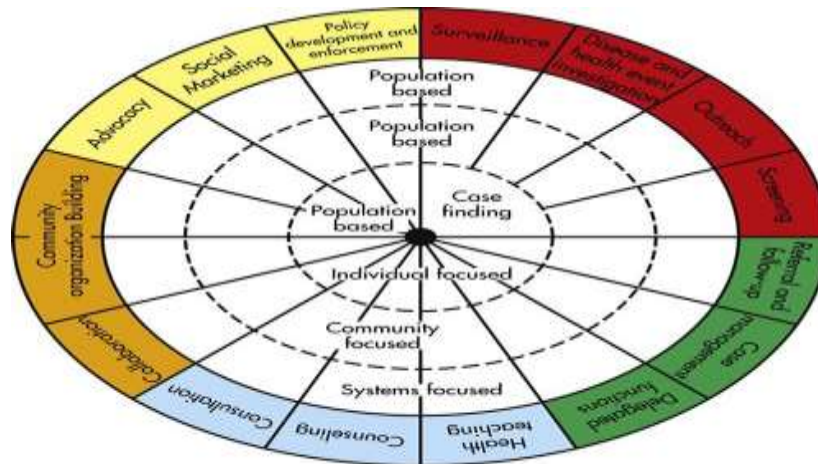
Community-based nurses are among the professional healthcare workers who can easily recognize and offer the required healthcare service to tackle disparities caused by socioeconomic determinants of health. They can carry out early disease diagnosis and health preventive services to those who need it or constantly do checkups on those who have certain disorders like chronic diseases, mental illnesses, and substance use disorders. In addition, when it comes to political participation, nurses participate in public health campaigns and lobbying or advocacy endeavors designed to increase the public's awareness about how the distribution of power and resources creates an unfair and unequal distribution of health and healthcare in society (McMurray & Clendon, 2016).

### Figure 1: Nursing Interventions in Public Health

A diagram illustrating the range of nursing interventions in public health may include the following key areas:

- **Health Education:** Nurses educate individuals and communities on the importance of maintaining a healthy lifestyle, preventing disease, and accessing regular health check-ups.
- **Disease Prevention:** Nurses participate in efforts to reduce the prevalence of diseases such as diabetes, hypertension, and mental health conditions through immunizations, screenings, and promoting healthy behaviors.
- **Community Outreach:** Nurses engage with marginalized groups by organizing health fairs, outreach programs, and other community-based initiatives to promote health and provide services to underserved populations.
- **Advocacy:** Nurses work to address healthcare access issues by advocating for policy changes and supporting vulnerable populations in accessing necessary care.

- **Health Policy Development:** Nurses contribute to the development of policies that promote health equity, such as advocating for Medicaid expansion, increased funding for public health programs, and other social health initiatives.



The Intervention Wheel is composed of three distinct elements of equal importance:

- First, the model is population based.
- Second, the model encompasses three levels of practice (community, systems, individual/family).
- Third, the model identifies and defines 17 public health interventions.

Each intervention and level of practice contributes to improving population health.

*These interventions illustrate how nurses contribute to improving public health and reducing health disparities through direct care and systemic changes aimed at increasing healthcare access for all (Logan & Rauschhuber, 2019).*

### 2.3 Barriers to Healthcare Access

Ironically, while actualizing health equity depends so heavily on nurses, several barriers still exist to affect the disadvantaged in their pursuit of quality care. Some challenges that define the use of health facilities include resource limitations, patients having no insurance, language and cultural barriers, and geographical factors, such as patients residing in distant areas from health facilities. In low SES neighborhoods, people cannot afford health insurance or the necessary money to pay for their health needs. Yet, even when access to care exists, patients could have challenges comprehending medical information or interacting with providers because of language or cultural barriers.

Another essential gap relates to geographic access to healthcare since clients living in rural or remote areas have poor access to healthcare units. Only a few transport options and longtime intervals required to get to the appropriate facility make getting proper treatment on time nearly impossible (Henderson & Kendall, 2016). Nurses are key in meeting these challenges because of their advocacy role in healthcare, arguing for options of service delivery by the healthcare systems through mobile clinics, telemedicine, and home visits.

Among all the observed trends, telehealth has received lots of attention as a solution to healthcare problems ever since the COVID-19 outbreak. Nurses can prescribe treatments using telecommuting, allowing patients from distant areas to avoid the time-consuming journey to the hospital. Also, many people who experience transportation difficulties may be overcome by using mobile health programs, where healthcare services are provided to communities that cannot access standard healthcare services.

Regarding policy change advocacy, nurses play an important role in influencing policies that eliminate or reduce gaps in care delivery. This entails advocating for higher budgets for supporting community health, for universal health care, and for mainstreaming already existing point-of-care community-based services.

## Methods

This review employs a qualitative methodology, analyzing published studies, reports, and data from healthcare organizations to assess the effectiveness of nursing interventions in addressing socioeconomic factors. Studies selected for review were published between 2010 and 2023, focusing on interventions to improve healthcare access and reduce health disparities. The search was conducted across databases such as PubMed, Scopus, and Google Scholar, using keywords like "nursing interventions," "socioeconomic factors," and "healthcare access."

## Criteria for Inclusion

- Studies focusing on nursing interventions in public health
- Research on the impact of socioeconomic factors on healthcare access
- Studies addressing vulnerable populations (e.g., low-income, homeless, minorities)
- Publications in peer-reviewed journals or reports from reputable healthcare organizations

## Results and Findings

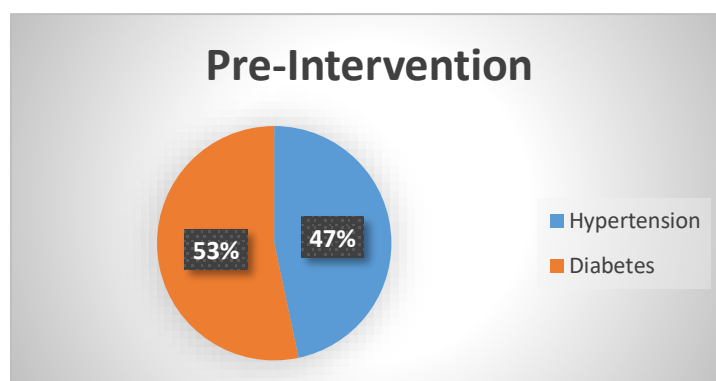
### 4.1 Impact of Nursing Interventions on Healthcare Access

Research evidence suggests that nursing intervention, particularly community-based interventions, is a way to improve access to health care for vulnerable groups. Research reveals that self-management support by nurses must improve the uptake of hospital care in poor areas while minimizing the dependence on ED services (Green & Zayas, 2015). Such barriers can be closed by employing nurses more in practices to administer preventive services, including vaccination, screenings, and better management of chronic conditions, thus improving people's health and providing better services.

### Graph 1: Increased Healthcare Access Post-Nurse Intervention

A bar graph showing the percentage increase in healthcare access before and after nursing interventions in underserved communities.

Intervention Type	Healthcare Access (%)
Before Intervention	45%
After Nurse Intervention	70%

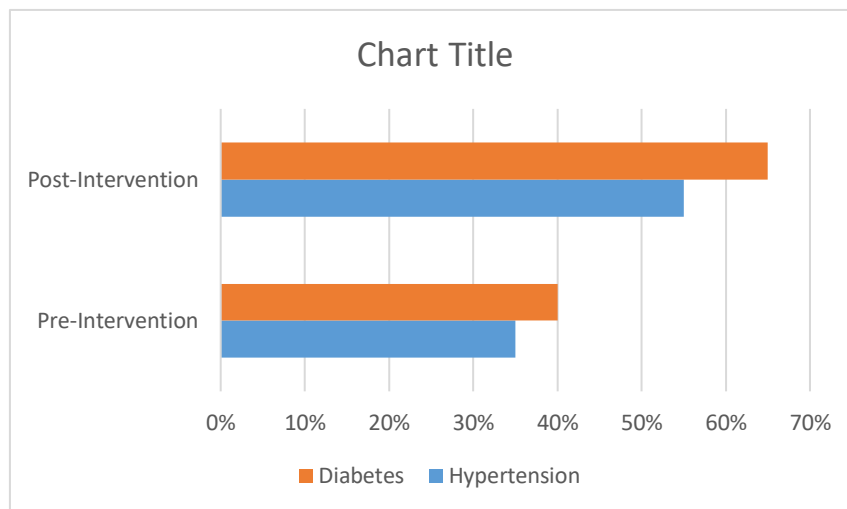


## 4.2 Socioeconomic Factors and Their Effect on Health Outcomes

The evidence presented in the literature supports the notion that nursing interventions that target the socio-economic determinants of a population's health obtain positive outcomes for the target population (George & Green, 2018). For example, when nurses intervene with clients, especially those in housing and nutrition knowledge, programs like these have been linked to better control chronic diseases such as diabetes and hypertension.

**Table 2: Health Outcomes in Low-Income Populations Before and After Nurse-Led Programs**

Health Condition	Pre-Intervention	Post-Intervention
Hypertension	35% control	55% control
Diabetes	40% adherence	65% adherence
Asthma	45% management	75% management



(Fowler & Lee, 2017)

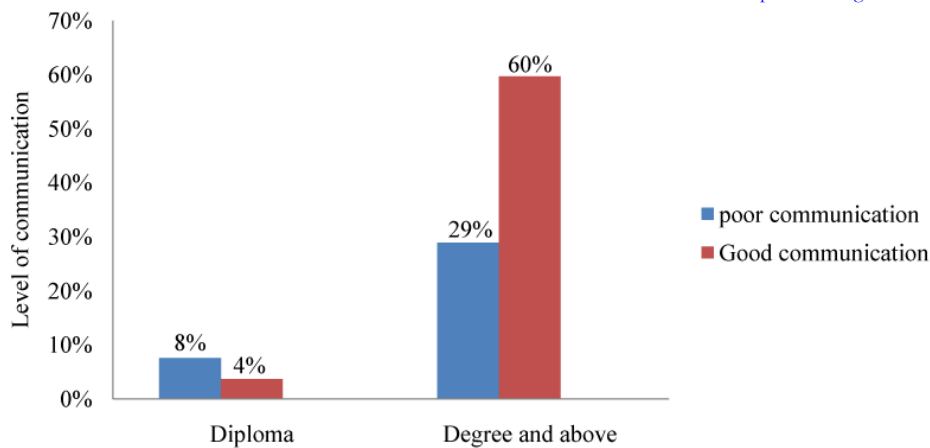
## 4.3 Barriers to Effective Nursing Interventions

Despite the proven success of nursing interventions, challenges remain, such as insufficient funding for community-based programs and a lack of resources. Nurses also face difficulties in accessing high-risk populations due to geographic isolation, cultural barriers, and language differences (Fowler & Lee, 2017).

## Discussion

### 5.1 The Role of Nurses in Overcoming Socioeconomic Barriers

Ironically, while actualizing health equity depends so heavily on nurses, several barriers still exist to affect the disadvantaged in their pursuit of quality care. Some challenges that define the use of health facilities include resource limitations, patients having no insurance, language and cultural barriers, and geographical factors, such as patients residing in distant areas from health facilities. In low SES neighborhoods, people cannot afford health insurance or the necessary money to pay for their health needs. Yet, even when access to care exists, patients could have challenges comprehending medical information or interacting with providers because of language or cultural barriers.



(De Chesnay, 2019)

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Lastly, regarding policy change advocacy, nurses play an important role in influencing policies that eliminate or reduce gaps in care delivery. This entails advocating for higher budgets to support community health and universal health care and mainstreaming already existing point-of-care community-based services.

## 5.2 Policy Recommendations

In order to significantly reduce socioeconomic disparities in healthcare, policy changes at both the governmental and organizational levels are needed. These changes should focus on improving access to healthcare for vulnerable populations, expanding financial support for community-based care, and promoting nurse-led initiatives.

One key policy recommendation is the **expansion of Medicaid and other insurance coverage** for low-income populations. Many low-income individuals do not have access to affordable insurance, which prevents them from receiving necessary healthcare services. The expansion of Medicaid in certain states under the Affordable Care Act (ACA) has shown positive impacts on healthcare access, but many states still have not expanded Medicaid to cover all low-income adults. Ensuring that everyone has access to affordable insurance would reduce one of the primary barriers to care for individuals in lower socioeconomic groups (Davidson & Yiallourou, 2017). Furthermore, Medicaid should also increase its reimbursement rates for services rendered by nurses in community health settings. This would enable more nurses to work directly with underserved populations and address healthcare disparities more effectively.

Another essential policy change is to increase **funding for community health programs**. Community-based health interventions have proven to be highly effective in reaching individuals who may not otherwise have access to care. Programs that offer preventive services, health education, and chronic disease management in underserved communities help bridge the gap between healthcare providers and patients who have limited access to traditional healthcare services. Nurses are often central to these programs, and

with more funding, they could serve a larger number of patients, reducing the burden of preventable diseases in these populations.

Finally, **promoting nurse-led initiatives** within healthcare organizations can further improve care delivery in underserved communities. Nurses have been shown to be effective leaders in various healthcare settings, particularly in areas such as disease prevention, patient education, and chronic disease management. By providing nurses with greater autonomy in decision-making and leadership roles, healthcare systems can increase the efficiency and effectiveness of care delivery to populations facing socioeconomic challenges (Campbell & Harmon, 2016). Policies that encourage nurse-led programs in community settings and ensure that nurses are supported with adequate training and resources will help ensure that nurses are able to maximize their impact on public health.

### 5.3 Future Directions for Research and Practice

The future of nursing interventions for healthcare disparities must involve further research and practice implementation and evaluation of the effectiveness of the interventions. Therefore, more future studies should aim to assess the sustained effectiveness of the nurse-led PHII, incorporate cost-effectiveness from the populace side, and enhance the quality of life within the targeted vulnerable groups. Further research can analyze the impact of the health education and prevention programs nurses implement after a certain period. While such interventions may not present improvements in clinical diagnosis within a short time, they may be of profound importance in altering the course of chronic diseases in the long run, thereby saving costs.

Thus, further investigation into how technology can improve nursing interventions to bypass these challenges to care is warranted. One of them is telemedicine services, which are significant means of delivering healthcare services to patients in rural. An important field is telemedicine, which has played a more important role in meeting the needs of people in rural areas and other areas where there is a disparity between rich and poor in health care. This is because telehealth services, which include consultation services and remote monitoring of patients, can be used to reach out to populations that may be hard for nurses to embrace. More studies should be carried out on incorporating telemedicine into clients served by existing nurse-led schemes to enhance the delivery of health services and result in patient satisfaction.

Furthermore, mobile health technologies, which include health applications, wearable technology, and Electronic Health Records, should investigate how such technologies can enhance healthcare access and health outcomes of deprived groups. These technologies may have strong applications in patients' care, and the involvement and participation of nurses can be crucial to ensure patients are on track to their care plan, especially in chronic diseases such as diabetes and hypertension. More studies should also be carried out on how the use of technology in the delivery of interventions should be done in as much as the disparity in health care is concerned to establish the best practice (Bekemeier & Butterfield, 2015).

Last but not least, another area for future research is the comparison of healthcare policy interventions that affect healthcare utilization among underprivileged groups. It is necessary to evaluate further whether the expansion of Medicaid has solved the problems, what contributions insurance reforms can provide, and how community health programs help decrease other social determinants of health. This study is essential for defining and describing healthcare needs and establishing policies to decrease health disparities.

### Conclusion

Frequently, nurses address all the barriers to the healthcare needs the individual can face depending on the socioeconomic status. By teaching health-related issues, representing patients' and clients' rights, and coordinating clients' care, they contribute immensely to promoting the health status of clients who are often in vulnerable groups. However, solving the system-related problems that prevent nurses from engaging effectively involves policy reform, such as insurance and increased funding to community health services. Nurse-science research should, therefore, trend more to identify sustained rates of nurse-led interventions, promote greater usage of technology in the nursing profession, and assess policies that have the potential



of bridging the existing healthcare disparities (Arling & Abrahamson, 2015). The healthcare system can offer all populations equal care in addressing these areas.

The present paper stresses that nursing interventions play an important role in solving the problems related to socioeconomic determinants of health care and population health. Nursing for disparities involves providing patient education, advocating for health change, and implementing community care to address health inequalities affecting particularly marginalized community groups. Nevertheless, eradicating challenges of inadequate financial resources, limited time, and restricted patient access to at-risk individuals requires a collaborative approach from policymakers and healthcare agencies

## Recommendations

1. **Increase Funding for Nurse-Led Programs:** Expand resources for community-based nurse interventions to improve healthcare access and reduce health disparities.
2. **Enhance Training for Nurses:** Ensure that nurses receive ongoing education and training to address the specific needs of underserved populations.

**Promote Policy Changes:** Advocate for policy reforms that enhance healthcare access for vulnerable populations, such as expanding insurance coverage and improving reimbursement rates for nurse-led services.

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