Cultural Competency to Identify Military-Connected Children (MCC)
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PROBLEM STATEMENT
• Military-connected children (MCC) face physical, psychological, and behavioral health issues secondary to parental military service and these are exacerbated if unrecognized in school settings.2,4,5

Health Consequences

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• Currently, there are 4 million MCC in the U.S.6
• 80% or 3.2 million are educated in public schools.1

PROJECT PURPOSE
• Increase cultural competence of school nurses to identify and support military families in the school setting.
• Will implementation of 1 Serve 2D initiative increase cultural competency to identify military-connected children by school nurses in one of the largest school districts in West Central Florida?

MODEL/NURSING THEORY
• Translational Research Model used to integrate new knowledge and tools to improve health outcomes.

METHODS
• Subjects: 25 public school nurse volunteer participants.
• Setting: 30-minute presentation, via YouTube, to school nurses in a Large West Central Florida Independent School District.
• Instruments/Tools:
  • Seven question pre and post-training surveys via Qualtrics.

Step 1
Consent & Pre-Training Survey

Step 2
Complete Training

Step 3
Post-Training Survey

• Intervention and Data Collection
  • Participants were provided the link to pre-training survey, presentation, and post-training survey and were given approximately 2 weeks to complete all 3 steps.

RESULTS

Participants Demographics

<table>
<thead>
<tr>
<th>Education:</th>
<th>School nurse experience:</th>
<th>Primarily with:</th>
<th>Ever served in the military?</th>
<th>Veteran or relative?</th>
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</thead>
<tbody>
<tr>
<td>Associate degree</td>
<td>n=5 (20%)</td>
<td>0-2 years: n=7 (28%)</td>
<td>Elementary students: n=17 (68%)</td>
<td>No: n=18 (72%)</td>
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<tr>
<td>Bachelor's degree</td>
<td>n=18 (72%)</td>
<td>3-5 years: n=3 (12%)</td>
<td>Middle school students: n=6 (24%)</td>
<td>Yes: n=7 (28%)</td>
</tr>
<tr>
<td>Master's degree</td>
<td>n=2 (8%)</td>
<td>6-10 years: n=6 (24%)</td>
<td>High school students: n=8 (32%)</td>
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<td></td>
<td>11+ years: n=7 (28%)</td>
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Survey Questions and Statistical Results

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre Training n=25</th>
<th>Post Training n=25</th>
<th>Two-tailed p value</th>
<th>Paired t-test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q3 Pre: Before today, I had formal training on providing culturally competent care to military members, veterans, and their families?</td>
<td>Mean: 3.04 SD: 0.87</td>
<td>Mean: 3.42 SD: 0.75</td>
<td>p &lt; 0.0001 Statistically sig.</td>
<td>t = 11.2250</td>
</tr>
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<td>Q4: It is important to identify military-connected children in the school clinic?</td>
<td>Mean: 4.6 Mean: 37% SD: 1.05</td>
<td>Mean: 4.36 Mean: 87% SD: 1.13</td>
<td>p = 0.3273</td>
<td>t = 0.94</td>
</tr>
<tr>
<td>Q5: Nurses should be aware of the risks.</td>
<td>Mean: 61% SD: 0.58</td>
<td>Mean: 65% SD: 0.87</td>
<td>Statistically sig.</td>
<td>p &lt; 0.0001</td>
</tr>
<tr>
<td>Q6: I am confident identifying military-connected children in my schools?</td>
<td>Mean: 2.52 Mean: 37% SD: 1.05</td>
<td>Mean: 3.60 Mean: 70% SD: 0.87</td>
<td>p &lt; 0.0001 Statistically sig.</td>
<td>t = 19.5025</td>
</tr>
<tr>
<td>Q7: I have a method to track military-connected children in my schools?</td>
<td>Mean: 5.04 Mean: 91% SD: 0.84</td>
<td>Mean: 5.10 Mean: 91% SD: 0.84</td>
<td>p &lt; 0.0001 Statistically sig.</td>
<td>t = 14.6969</td>
</tr>
<tr>
<td>Q8: I am confident providing culturally competent care to military-connected children in the school clinic?</td>
<td>Mean: 3.24 Mean: 66% SD: 1.05</td>
<td>Mean: 3.96 Mean: 78% SD: 0.94</td>
<td>p &lt; 0.0001 Statistically sig.</td>
<td>t = 9.7280</td>
</tr>
<tr>
<td>Q9: I am likely to ask – “Do you have a parent, sibling, or other family member who has ever served in the military?” during assessment?</td>
<td>Mean: 2.08 Mean: 42% SD: 0.86</td>
<td>Mean: 3.64 Mean: 74% SD: 0.94</td>
<td>p &lt; 0.0001 Statistically sig.</td>
<td>t = 16.6320</td>
</tr>
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DISCUSSION
• Clear statistically significant increase in scores in 6 out of 7 questions.
• Q2 & Q3: did not show increase in scores; addressed perceived importance with identification in school clinic if nurses should be aware of the risks to MCC.
• Responses to Q2 & Q3 on both pre and post surveys ≥ 84%-92% that it was important and nurses should be aware of the risks.

IMPLICATIONS FOR ADVANCED PRACTICE NURSING
• Cultural competence with MCC should be prioritized by schools and health care organizations to mitigate long-term health consequences.

SUSTAINABILITY
• Each participant was given electronic and hard copies of the I Serve 2 Pocketcard® and local resource handout for continued use.
• The presentation remains open on YouTube indefinitely for the district to continue training new employees.
• Plan to submit to National Association of School Nurses (NASN) for publication to encourage more wide-spread use of the I Serve 2 Pocketcard®.

REFERENCES