Introductory Concepts in Family Health Nursing

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Applicable Learning Outcomes

- Integrate knowledge from the physical, social, natural, and related health disciplines, and the humanities in understanding the family as a unit of society
- Demonstrate integrity, respect for human dignity, gender and culture sensitivity, and social
 justice in the practice of family health nursing
- Recognize the role of a nurse in facilitating and coordinating the delivery of safe, quality care to the family and its members in the home and community setting
- Appreciate the value of lifelong learning and keeping current with national and global developments in nursing and health for better care of the family and its members
- Appreciate the significance of being a caring and competent family health nurse in improving health care of Filipino families

Family: Assumptions

Universal Declaration of Human Rights (1948):

Article 16:3: The family is the natural and fundamental group unit of society and is entitled to protection by society and the State.

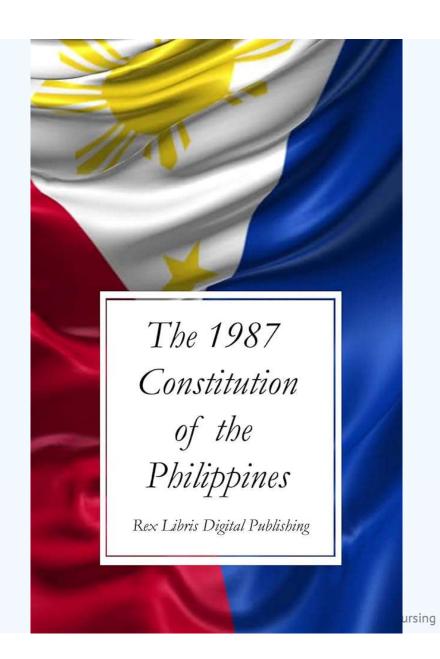


Family: Assumptions

1987 Philippine Constitution:

Article II: Section 12: The state recognizes the sanctity of family life and shall protect and strengthen the family as a basic autonomous social institution.

Article XV: The Filipino family as the foundation of the nation. Accordingly, the State shall strengthen its solidarity and actively promote its total development.



Family: Assumptions

Pender (2006): Families:

- 1.Develop self-care and dependent-care competencies
- 2. Foster resilience among family members
- 3. Provide resources
- 4. Promote healthy individuation within cohesive family structures

United Nations Department of Economic and Social Affairs – Statistics Division (2017):

"those members of the household who are related, to a specified degree, through blood, adoption or marriage. The degree of relationship used in determining the limits of the family in this sense is dependent upon the uses to which the data are to be put and so cannot be established for worldwide use."

(https://unstats.un.org/unsd/demographic-social/sconcerns/family/#docs)

United Nations Department of Economic and Social Affairs – Statistics Division (2017):

*household – either

- (a) A one-person household, defined as an arrangement in which one person makes provision for his or her own food or other essentials for living without combining with any other person to form part of a multi-person household or
- (b) A multi-person household, defined as a group of two or more persons living together who make common provision for food or other essentials for living.

(https://unstats.un.org/unsd/demographic-social/sconcerns/family/#docs)

United Nations International Conference on Population and Development Programme of Action (1994):

"While various forms of the family exist in different social, cultural, legal and political systems, the family is the basic unit of society and as such is entitled to receive comprehensive protection and support. The process of rapid demographic and socio-economic change throughout the world has influenced patterns of family formation and family life, generating considerable change in family composition and structure"

(https://www.unfpa.org/sites/default/files/pub-pdf/programme_of_action_Web%20ENGLISH.pdf)

Allender, Rector, and Warner (2010): a unit that "consists of two or more individuals who share a residence or live near one another; possess some common emotional bond; engage in interrelated social positions, roles, and tasks; and share cultural ties and sense of affection and belonging.

Hanson (2005): two or more individuals who depend on one another for emotional, physical, and/or financial support. The members of the family are self defined

Family: Characteristics

Allender, Rector, and Warner (2010)

- 1. Each family is unique with its own distinct problems and strengths.
- 2. Every family is *a small social system*.
- 3. Every family has its own *cultural values and rules*.
- 4. Every family has *structure*.
- 5. Every family has certain *basic functions*.
- 6. Every family moves through stages in its life cycles.

- 1. Family Systems Theory
- 2. Bioecological Systems Theory
- 3. Symbolic Interaction Theory
- 4. Family Developmental and Life Cycle Theory
- 5. Functional Theory

1. Family Systems Theory

- Used to understand how a family is organized as a whole as well as composed of individuals
- Purpose of the family: maintain stability through adaptation to internal and external stresses that are created by change
- Goal: maintain balance and stability as they maintain the ability to function and adapt
- Interventions build on the strengths of the family in order to improve or support the functioning and interactions of the individual members in the whole family unit

1. Family Systems Theory

- Assumptions
 - Families are greater than and different from the sum of their parts
 - Hierarchies and logical relationships between subsystems exist
 - Boundaries can be open, closed, or random
 - Family systems increase incomplexity over time
 - Family systems change constantly in response to stresses and strains
 - Change in one part affects the total system
 - Family systems are an organized whole. Individual members are interdependent.
 - Family systems have homeostatic features to maintain stable patterns.

2. Bioecological Systems Theory

- Developed by Urie Bronfenbrenner
- Describe how environments and systems outside the family influence the child over time
- Identifies the stresses and potential resources that can affect family adaptation
- Assumptions:
 - What happens outside of the family is equally important as what happens inside the family

3. Symbolic Interaction Theory

- Views the family as a unity of interacting personalities whose actions are based on meanings they derive from interactions and taken in an everchanging process of new interactions, new interpretations, and new meanings.
- Symbolic communication helps individuals interpret and select the environment to which they respond
- Identifies how relationships with others affect functioning

4. Family Developmental and Life Cycle Theory

- Framework for understanding normal predicted stresses that families experience as they change and transition over time
- Duvall and Miller (1985) applied the principles of individual development to the family; family tasks need to be accomplished at each stage of family development
- Family disequilibrium and conflicts occur during expected transition periods

STAGES OF FAMILY LIFE CYCLE	FAMILY DEVELOPMENTAL TASKS
Married couple	Establish relationship as a family unit, role development
	Determine family routines and ritual
Childbearing families with infants	Adjust to pregnancy and then birth of infant
	Learn new roles as mother and father
	Maintain couple time, intimacy, and relationship as a unit
Families with preschool children	Understand growth and develop- ment, including discipline
	Cope with energy depletion
	Arrange for individual time, family time, and couple time

Families with school-aged children

Families with adolescents Learn to open family boundaries as child increases amount of time spent with others outside of the family

Manage time demands in supporting child's interest and needs outside of the home

Establish rules, new disciplinary actions

Maintain couple time

Adapt to changes in family communication, power structure and decision making as teen increases autonomy Help teen develop as individual and as a family member

Families launching As young adult moves in and out of young adults the home allocate space, power, communication, roles Maintain couple time, intimacy, and relationship Middle-aged parents Refocus on couple time, intimacy, and relationship Maintain kinship ties Focus on retirement and the future Adjust to retirement, death of Aging parents spouse and living alone Adjust to new roles (i.e., widow, single, grandparent) Adjust to new living situations,

changes in health

5. Structural- Functional Theory

- Structural perspective: specifies family characteristics such as member roles, family forms, power structures, communication processes, and value systems which provide order to family interactions and interdependent relationships and serve to organize performance of roles and functions.
- Functional perspective:
 - All social institutions are organized to provide the needs of society
 - Interprets the family as filling particular societal needs

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Family Structure

- Characteristics and demographics of individual members who make up the unit
- Defines the roles and positions of family members
- Aspects (Kaakinen, Hanson, and Denham):
 - Individuals that compose the family
 - Relationships between the members
 - Interactions between the family members
 - Interactions with other social systems
- There is no typical family model or structure; maybe traditional or nontraditional
- Changes and modifies over time

Family Structure

Structure		
Traditional	 Nuclear dyad Nuclear family Commuter family Single-parent family Divorced family Blended family Single Adult Multigenerational family Kin Network Augmented family 	
Nontraditional	 Unmarried single parent family Cohabitating partners Commune family Group marriage commune family Homeless families Foster families 	n Nursing I

Family Culture

- the acquired knowledge that family members use to interpret their experiences and to generate behaviors that influence family structure and function (Allender, Rector, and Warner, 2010):
- Four dimensions (Friedman, 1998):
 - 1. Shared values and their effect on behavior
 - Prescribed and defined roles
 - 3. Communication processes
 - 4. Power structure

Family Health: Conceptions

Denham (1999): Definitions "emphasis usually placed on functional levels" and used interchangeably with family functioning and healthy family

Allender, Rector, and Warner: "concerned with how well the family functions together as a unit. It involves not only the health of the members and how they relate to other members, but also how well they relate to and cope with the community outside the family."

Family Functioning

Allender, Rector, and Warner: those behaviors or activities by family members that maintain the family and meet family needs, individual member needs, and society's views of family.

Family: Functions (Herberger and McEwan, 1978)

(https://iris.who.int/bitstream/handle/10665/40336/16937_eng.pdf;jsessionid=C26B1B7055911823996064DADFA7A2E4?sequence=1)

	Functions
Biological	 Reproduction Rearing of Children Nutrition Health maintenance and recreation
Economic	Provision and distribution of financial resources
Educational	 Inculcation of skills, attitudes and knowledge relating to other functions Preparation of the young for adult life
Psychological	 Provision of emotional security, psychological protection Facilitating self-identity, development of personality Developing ability to form relationships outside the family
Socio-Cultural	 Socialization: the transfer of values (behavior, tradition, language, mores) Inculcation of bheavioral norms appropriate to all stages of life

Family Health: Definitions

WHO Report on Consultation on Family Health (1973):

"Family health includes, but means more than, the total or sum of the health status of individual members for it takes into account the inter-relations and interdependence of the states of physical and mental health of the individuals who live together, determining and being in part determined by the effective functioning of the family as abiological and social unit within a cultural setting"

(https://iris.who.int/bitstream/handle/10665/40336/16937_eng.pdf;jsessionid=C26B1B7055911823
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Family Health: Definitions

Hanson (2005): "a dynamic changing relative state of well-being which includes the biological, psychogical, spiritual, sociological, and cultural factors of the family system."

International Family Nursing Association (2015): "Family health incorporates the health of the collective and the interaction of the health of the individual with the collective, and reflects an interaction of biopsychosocial and contextual phenomena."

Family Health: Characteristics (Hanson, 2005)

- 1. The family tends to communicate well and listen to all members.
- 2. The family affirms and supports all its members.
- Teaching respect is valued by the family
- The family members have a sense of trust.
- 5. The family plays together, and humor is present.
- All members interact with each other, and a balance in the interactions is noted among the members

Family Health: Characteristics (Hanson, 2005)

- The family shares leisure time together.
- 8. The family has a shared sense of responsibility
- The family has traditions and rituals.
- 10. The family shares a religious core.
- 11. Privacy of members is honored by the family.
- 12. The family opens its boundaries to admit and seek help with problems.

Filipino Family Wellbeing Dimensions

(Chua, Gabriel, Bantang and Llige, 2022)

Dimensions	Definition
Resource Adequacy	The ability of the family to acquire or access basic needs
Comfortable Lifestyle	The ability of the family to enjoy simple leisure and comforts of life and their capacity to choose or acquire things that they want
Financial Security and Stability	The regularity and stability of the family's income, their capacity to acquire assets, and their capacity to save and financially prepare for the future
Good Health of the Family Members	General health of family members

Filipino Family Wellbeing Dimensions

(Chua, Gabriel, Bantang and Llige, 2022)

Dimensions	Definition
Good Family Relationships	The positive, loving, harmonious relationships among family members, family togetherness, and their capacity to support each other and solve internal problems
Good Parenting	The ability of the parents to raise morally upright children and provide the necessary guidance
Virtuous Family Living	The practice of sound moral values and having faith in God.
Family Satisfaction and Contentment	The general satisfaction that family members feel with teir living standards.

Family Coping (Hatfield, 1987)

- Conceptual framework for coping and adaptation for understanding families of persons with mental illness
- Families as reactive/responding to schizophrenia
- 3 major concepts:
 - Crisis any intensive, rapidly changing, sudden, or unexpected events that are beyond the individual's habitual mode of response and ability to keep a balanced state
 - Coping problem solving-efforts people make to master the stressful situation
 - Adaptation the relationsjip of external demands and the person's resources for dealing with them

Family Coping (Hatfield, 1987)

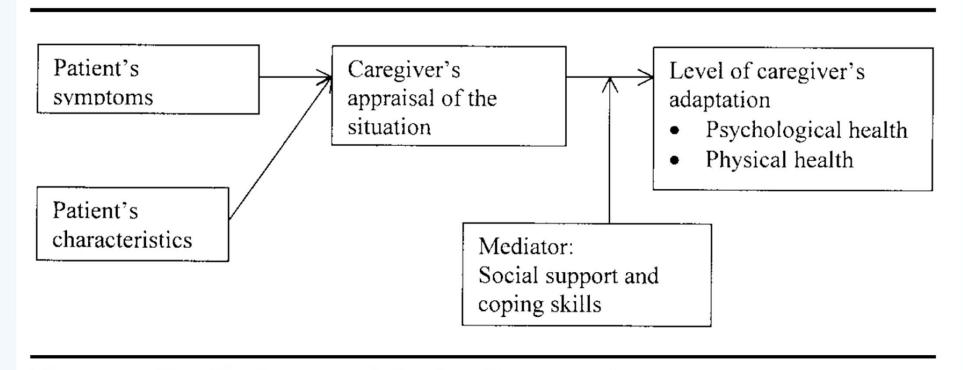


Figure 3: Family Stress and Coping Framework

Family Resiliency Model of Family Stress, Adjustment, and Adaptation (McCubbin and McCubbin, 1993)

- 2 Phases to Responding to Stress
 - Adjustment minor changes in how the family operates and behaves
 - Adapatation phase determined by the interaction between the following:
 - The stressor
 - Family vulnerability
 - Family typology
 - Resistance resources
 - Appraisal of the stressor
 - Problem-solving and coping strategies

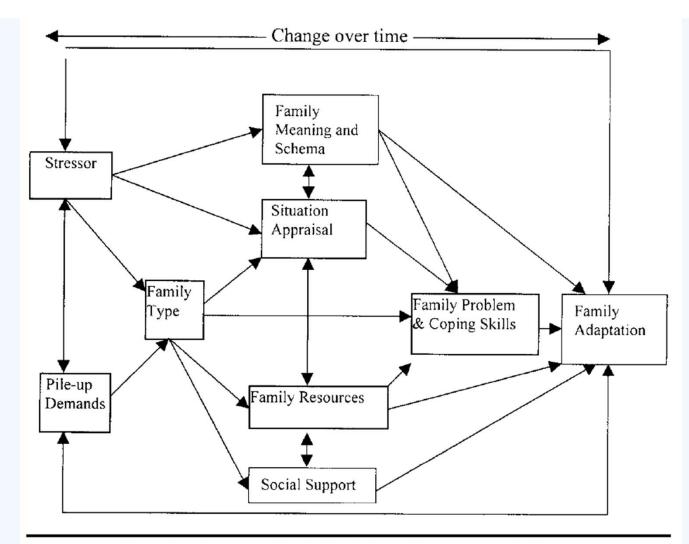


Figure 4: The Resiliency Model of Family Stress, Adjustment, and Adaptation
Source: McCubbin and McCubbin (1996).

Family Health Tasks

(Freeman and Heinrich, 1981, and Bailon and Maglaya, 1978)

- 1. Recognize the presence of a wellness state or health condition or problem
- 2. Make decisions about taking appropriate action
- 3. Provide nursing care to the sick, disabled, dependent, or at-risk members
- Maintain a home environment conducive to health maintenance and personal development
- 5. Utilize community resources for health care

Family Health: Significance in Healthcare Practice

Herberger and McEwan in Health and the Family: Studies on the Demography of Family Life Cycles and their Health Implications (WHO,1978):

- 1. Aggregation of the physical and mental well-being of the family members
- 2. Interaction of the individual health states of the members determine the health status of the family as a unit

(https://iris.who.int/bitstream/handle/10665/40336/16937_eng.pdf;jsessionid=C26B1B7055911823996064
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Family-Centered Care

"bringing the perspectives of patients and families directly into planning, delivery, and evaluation of healthcare, and thereby improving its quality and safety" (Institute for Patient-and Family-Centered Care, 2017)

"seemed to be about creating systems and policies to reduce waste and "shadowing" (DiGioia, Lorenz, Greenhouse, Bertoty, & Rocks, 2010) to better understand what patients and families actually experience in a health care setting.' (Bell, Family Nursing is more than Family-Centered Care in Journal fo Family Nursing, 2013)

Family-Centered Care: Core Principles

(Institute for Patient-and Family-Centered Care, 2017 and Kuo, et.al, 2011))

- Dignity and Respect
- Information-Sharing
- Participation, Negotiation, Partnership and Collaboration
- Care in the Context of Family and Community

Family Health Nursing Practice

Kaakinen, Hanson and Denham (2010):

- synthesis of nursing theory and public health theory applied to promoting, preserving and maintaining the health of populations through the delivery of personal health care services to individuals, families and groups.
- a philosophy and science based on the following assumptions:
 - Health and illness are family events
 - What affects one family member affects the whole family
 - Health care practices, decisions, and behaviors are made within the context of the family

Family Health Nursing: Definition and Scope

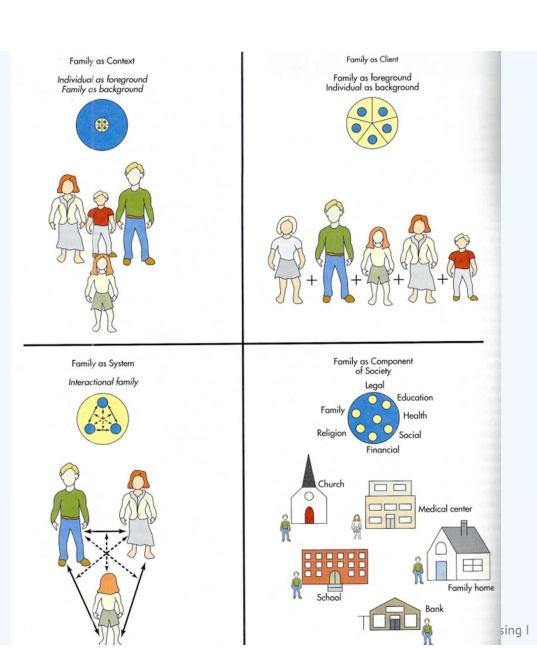
Generalist Competencies for Family Nursing Practice(International Family Nursing Association, 2017):

- 1. Educate and promote family health
- 2. Focus nursing practice on families' strengths; the support of family and individual growth; the improvement of family self-management abilities; the facilitation of successful life transitions; the improvement and management of health; and the mobilization of family resources.
- 3. Demonstrate leadership and systems thinking skills to ensure the quality of nursing care with families in everyday practice and across every context.
- 4. Commit to self-reflective practice based on examination of nurse actions with families and family responses.
- 5. Practice using an evidence-based approach.

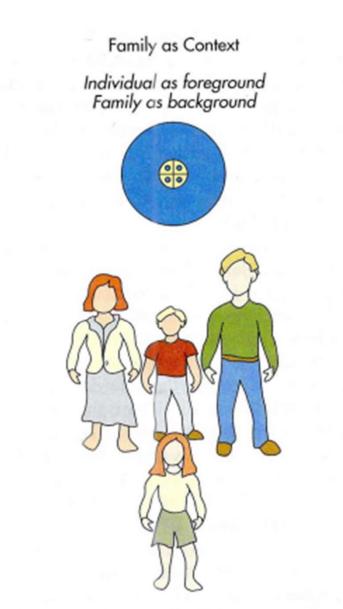
Family Health Nursing: Scope of work (WHO, 2000)

"help individuals and families to cope with illness and chronic disability, or during times of stress, by spending a large part of their time working in patients in homes and with their families. Such nurses *give advice* on lifestyle and behavioural risk factor as well as assisting families with matters concerning health. Through *prompt detection*, they can ensure that the health problems of families are treated at an early stage. With their knowledge of public health and social issues and other social agencies, they *can identify the effects of socioeconomic factors on a family's health and refer them to the appropriate agency*. They can facilitate the early discharge of people from hospital by *providing nursing care at home*, and they can act as the lynchpin between the family and the family health physician, substituting for the physician when the identified needs are more relevant to nursing expertise."

- 1. Family as Context
- 2. Family as Client
- 3. Family as a System
- 4. Family as a Component of Society



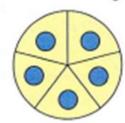
- 1. Family as Context
- Places the individual first and the family second
 - Family serves as either a strength or a stressor to individual health and illness issues

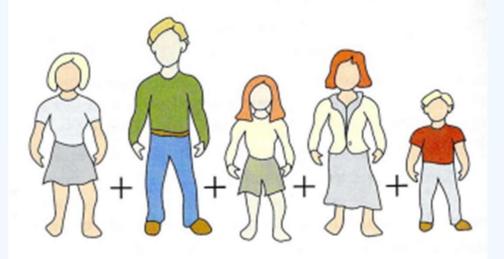


- 2. Family as Client
- Primary focus is the family
- Family seen as sum of the individual members (how a family as a whole is interacting to the event when a family experiences a health issue and how each member is affected by the health event)

Family as Client

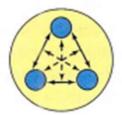
Family as foreground Individual as background

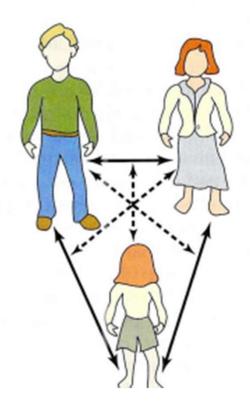




- 3. Family as a System
- Focus is on the family as a client and as an interactional system in which the whole is more than the sum of its part
- Interactions among family members become the target of interventions

Family as System Interactional family





- 4. Family as a Component of Society
- Family as one of many interacting institutions in society

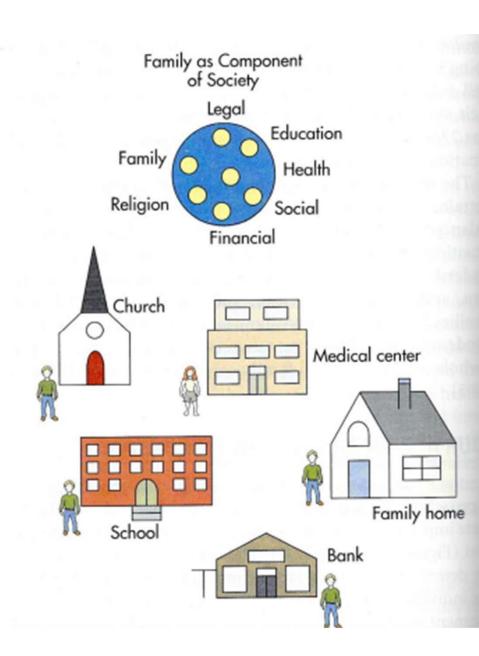
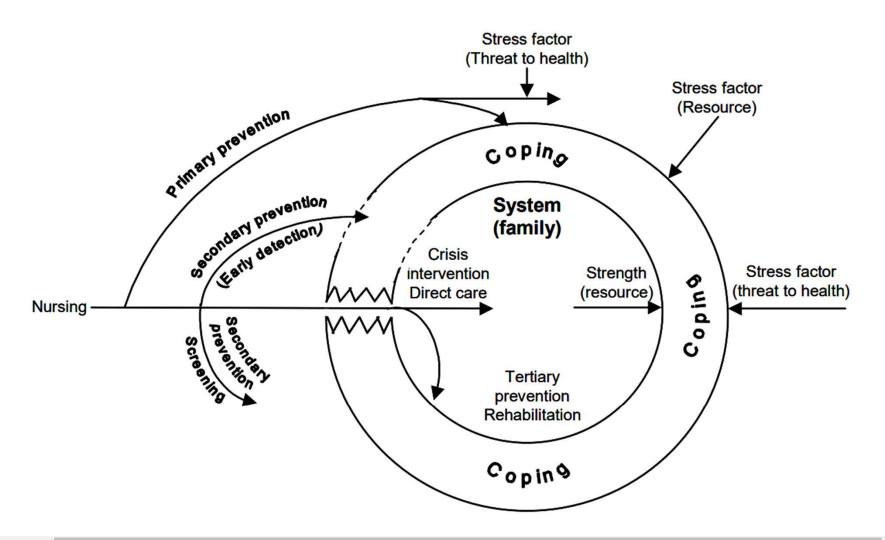


Fig. 3. Family health nursing: helping the family to maintain health and cope with threats to health



Nursing Process in Family Health

 The main framework in nursing practice and the means by which nurses work with client-partners

• Phases:

- 1. Establishing a working relationship
- 2. Assessment
- 3. Diagnosis
 - 1. Presence of Wellness Condition, Health threat, Health Deficit, or Foreseeable Crisis
 - 2. Performance of Family Health Tasks
- 4. Planning of Outcomes and Interventions
- 5. Evaluation