



What is Family Nursing?





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Outline



- ◆ Definitions
 - ◆ Family, Family Nursing, Family Systems Nursing, Family Systems Approach (FSA)
- ◆ Brief discussion of how we are doing in terms of integrating **family** into nursing research, theory, education and practice
- ◆ Benefits of using a FSA
- ◆ Challenges of incorporating a FSA into practice
- ◆ Strategies to put a FSA into practice



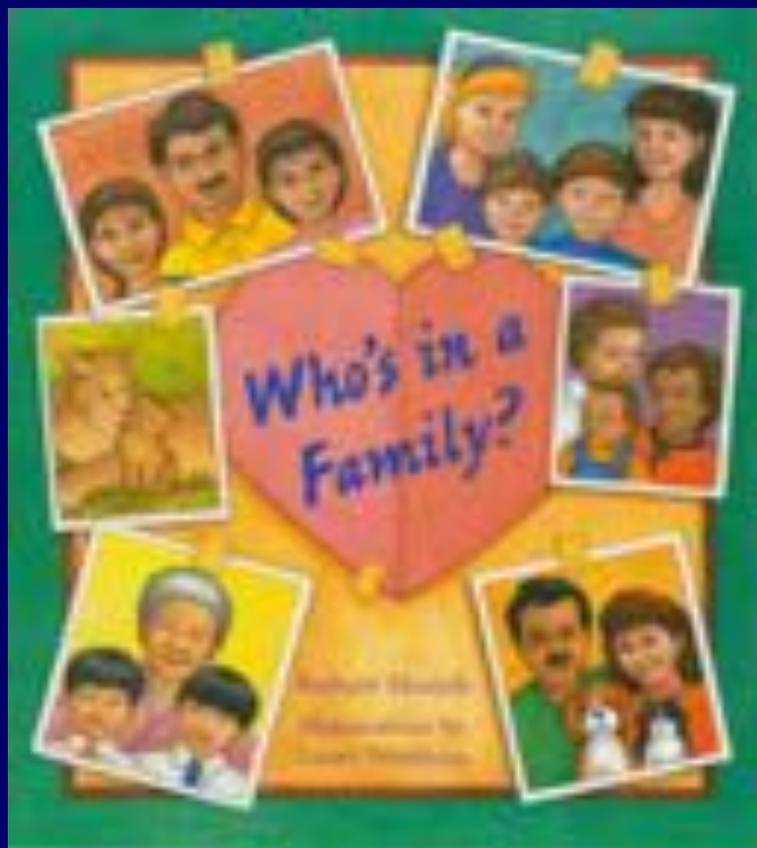
Family

- How do you define family?
- How do your patients define family?
- How does the way we define family vary from one culture to the next?





Who is in? Who is out?



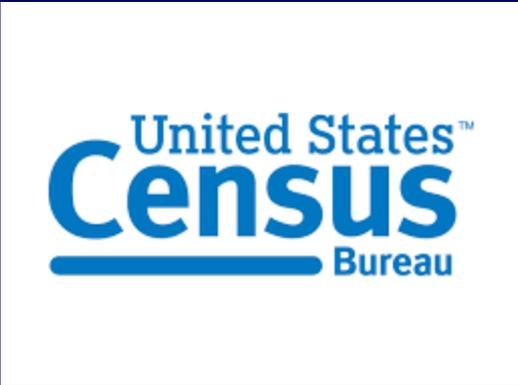


Common Definitions of Families

- ◆ **Biological** - shared ancestry & genetic ties
- ◆ **Legal** - marriage, adoption
- ◆ **Structural** - positions & roles such as mother & caregiver
- ◆ **Functional** - contributions to members & society such as socialization & nurturance
- ◆ **Subjective** - sense of commitment & attachment; individual perceptions, interpretations, and meanings of who is family



Definition of Family

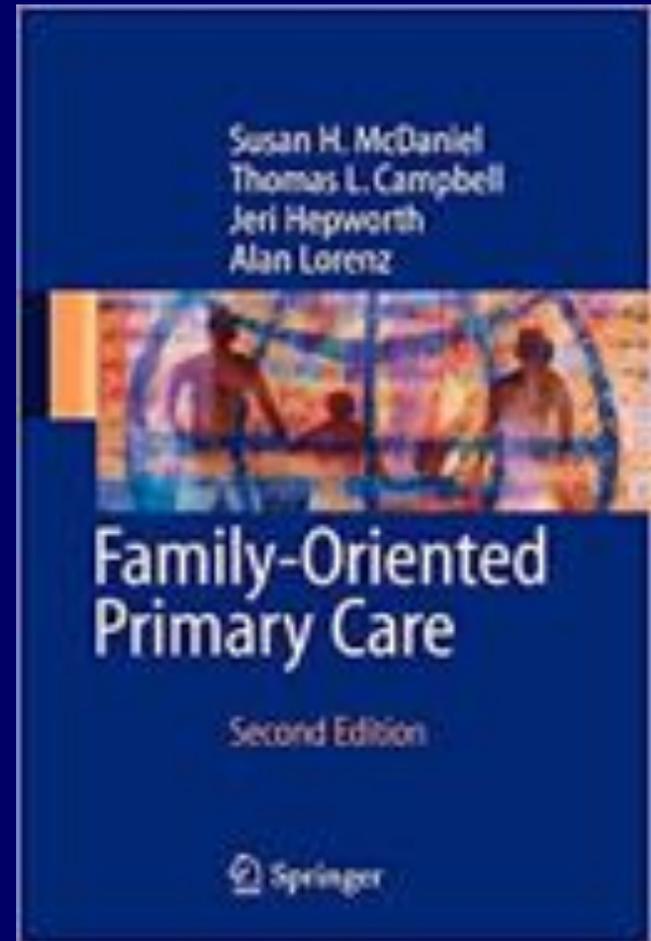


A family is defined by the United States Census Bureau for statistical purposes as *"a group of two people or more (one of whom is the householder) related by birth, marriage, or adoption and residing together; all such people (including related subfamily members) are considered as members of one family."*



Definition of Family

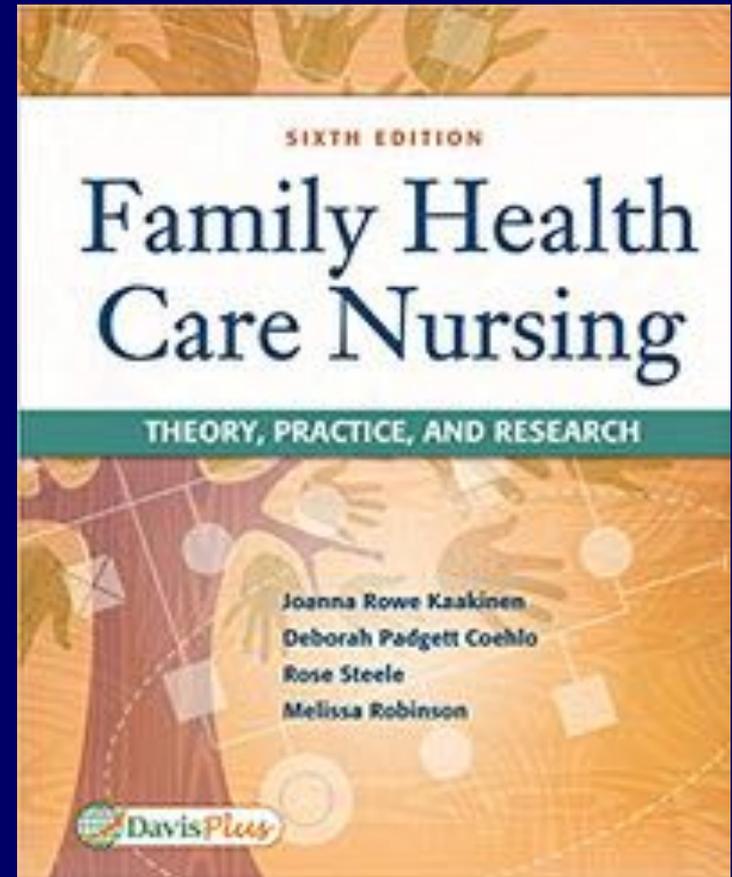
"Any group of people related either biologically, emotionally, or legally."





Definition of Family

"Two or more individuals who depend on one another for emotional, physical, and economic support. The members of the family are self-defined"

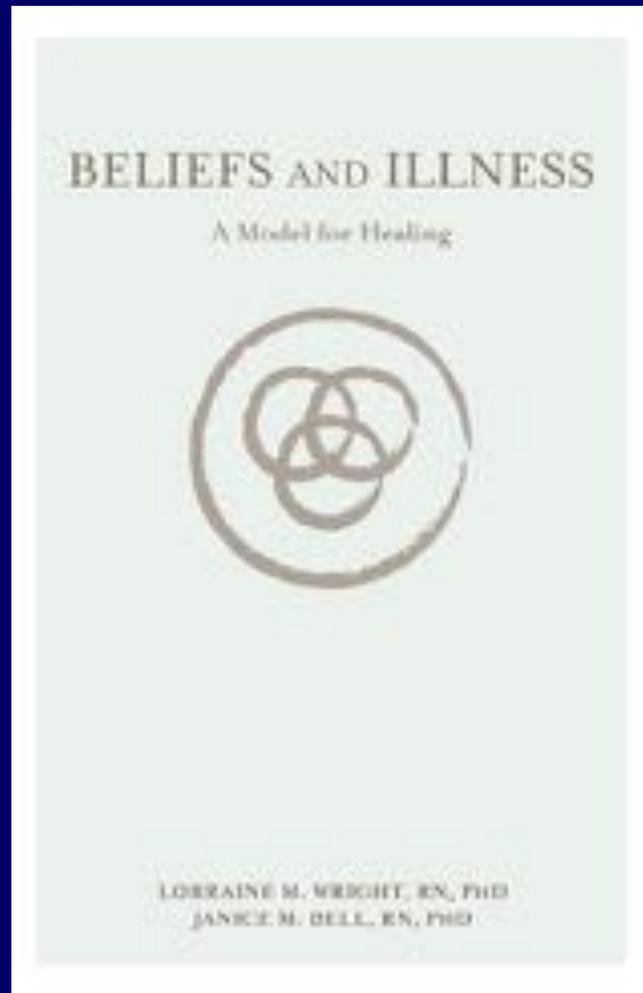




Definition of Family

- *"Group of individuals who are bound by strong emotional ties, a sense of belonging, and a passion for being involved in one another's lives*

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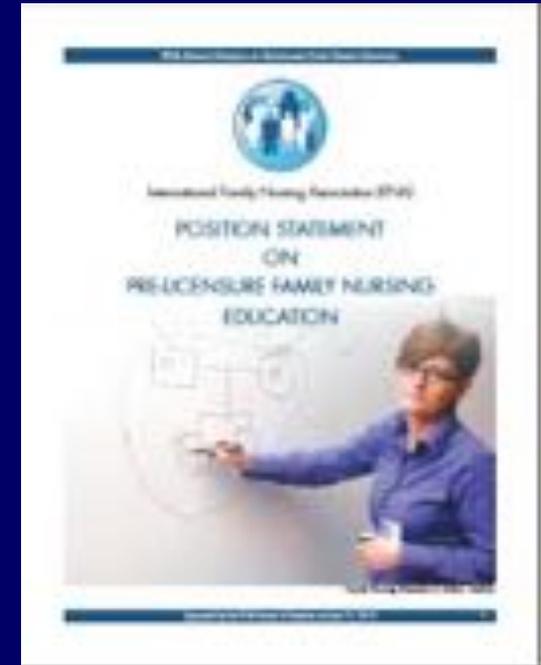
More and more family scholars are using a very broad definition of Family

"Whoever they say they are"



Many definitions of family nursing (IFNA 2013)

- One common attribute in the definitions, the integration of nursing care to both the family as a whole and individual family members, with attention to relationships among members (Denham, 2003; Friedman, Bowden, & Jones, 2003; Wright & Leahey, 2013).





Family Nursing

- Nurses and families working together to improve the success of the family and its members
 - in adapting to normative and situational transition
 - in responding to health and illness



Core Assumptions of Family Nursing:

- Health/Illness affects all members of a family (Wright & Leahey, 2013)





Core Assumptions (cont)

- Families influence, and are influenced by, how individual family members respond to life changes (e.g. birth, bereavement, ill-health)





Other Names for Family Nursing

- Family-Centered Care
- Family-Centered Nursing
- Family-Focused Nursing





Family Systems Nursing (FSN), (Duhamel, 2017)



- The practice of including the family unit in the care of patients experiencing illness/loss/disability, rather than only focusing on the patient with an individual perspective



Family Systems Nursing (FSN)

(Wright & Leahey, 2013; Bell & Wright, 2015)

- Overarching theoretical orientation concerned with:
 - Interaction
 - Reciprocity
 - Relationships between the illness, the patient, the family and the larger systems within which they reside
- **Goal of FSN:** sustaining health and promotion healing



Family Systems Approach

(Duhamel, 2017)

- A collaborative, strength-focused relationship between:
 - health care professionals and the family and collaboration between health care professionals to deal with chronic illness management, a complex process characterized by uncertainty and unpredictable changes.



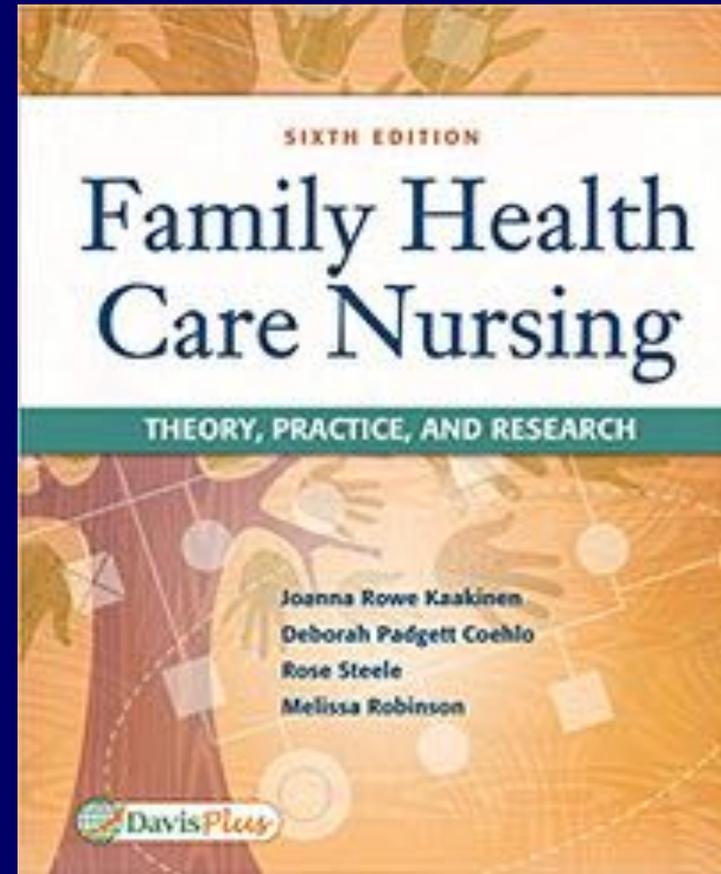


How are we doing in terms of integrating family into nursing theory, research, education and practice?



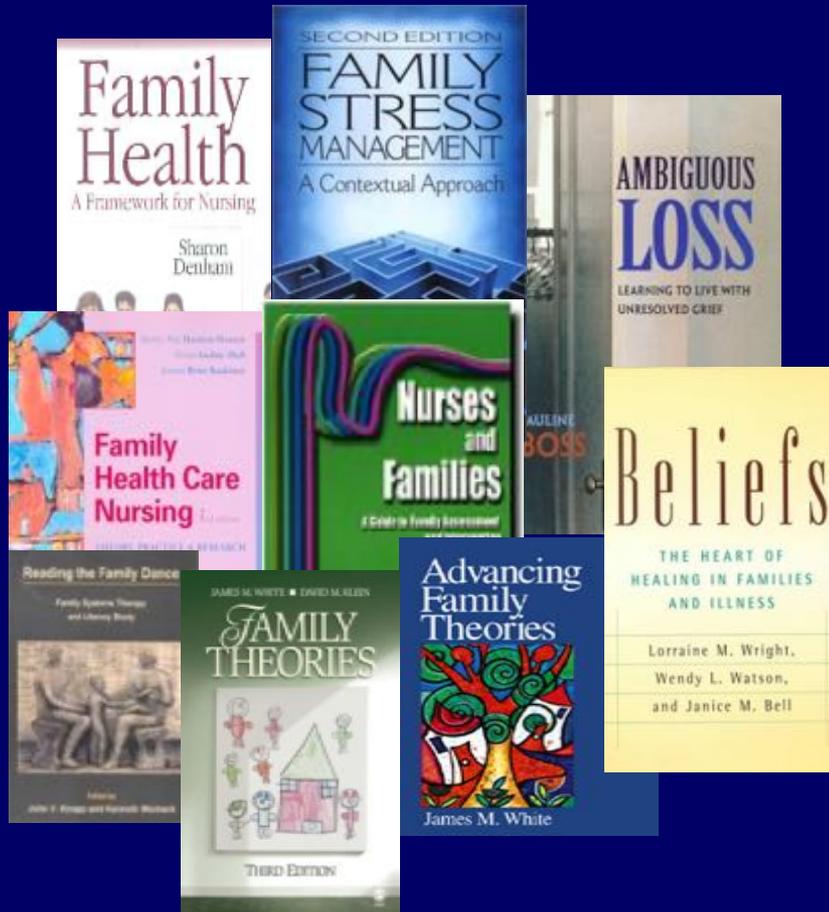
During the past 30 years,

- Family nursing has gained a great deal of strength and momentum





Family Nurse Theorists



- Have developed impressive mid-range family theories
 - Calgary Family Assessment/ Intervention Model
 - Illness Beliefs Model
 - Family Management Framework
 - Resiliency Model of Stress, Adjustment & Adaptation

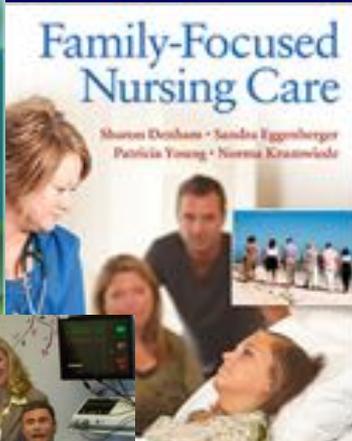
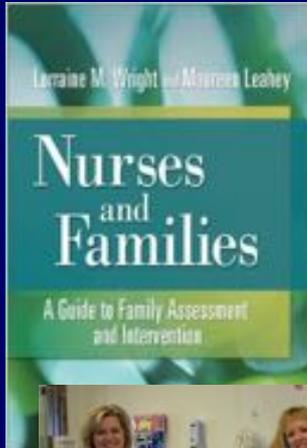


Family Nurse Researchers

- Have conducted important family research in areas such as:
 - Responses of families & family members to various states of health (e.g. health, illness)
 - Responses of families & family members to life transitions (e.g., birth, death)
 - Identification of predictors of family & family member health outcomes
 - Theory formulation & testing related to family & family member health outcomes



Family Nurse Educators

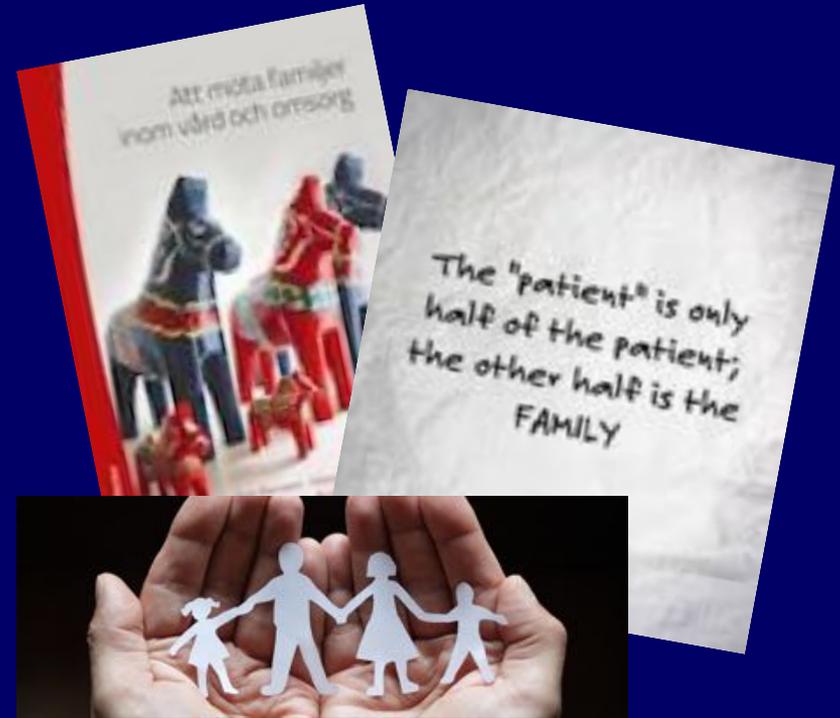


- Have developed and implemented creative teaching strategies for integrating family into patient care
- Have also developed position statements



And Practicing Family Nurses

- Have used their Family Systems Nursing (FSN) knowledge and skills to enhance the quality of care they provide to patients and families





At the international level, there has been an International Family Nursing Conference every few years since 1988

- ❖ 1988: 1st IFNC Calgary Alberta, Canada
- ❖ 1991: 2nd IFNC Portland, Oregon, USA
- ❖ 1994: 3rd IFNC Montreal, Quebec, Canada
- ❖ 1997: 4th IFNC Valdivia, Chile
- ❖ 2000 - 5th IFNC Chicago, Illinois, USA
- ❖ 2003: 6th IFNC Gaborone, Botswana, Africa (cancelled)
- ❖ 2005: 7th IFNC Victoria, British Columbia, Canada
- ❖ 2007: 8th IFNC Bangkok, Thailand
- ❖ 2009: 9th IFNC Reykjavik, Iceland
- ❖ 2011: 10th IFNC Kyoto, Japan
- ❖ 2013: 11th IFNC Minneapolis MN, USA
- ❖ 2015: 12th IFNC Odense, Denmark
- ❖ 2017: 13th IFNC Pamplona, Spain
- ❖ 2019: 14th IFNC Washington DC, USA
- ❖ 2021: 15th IFNC Dublin, Ireland



In 1995, the 1st issue of the Journal of Family Nursing was published

- A peer-reviewed, quarterly journal of nursing research, practice, education, and policy issues, as well as empirical and theoretical analyses on the subject of family health.
 - Interdisciplinary
 - International
 - Collaborative perspectives
 - Families in different cultures are examined, as well as families across the life cycle





An International Family Nursing Organized Was Formed in 2009

- ❖ 1988: Initial discussions probably began at the 1st International Family Nursing Conference (IFNC) in Calgary, Alberta Canada
- ❖ 2005: More serious discussions took place at the 7th IFNC in Victoria, BC, Canada
- ❖ 2009: IFNA was formally launched at the 9th IFNC Conference in Reykjavik, Iceland
- ❖ 2013: First International Family Nursing Conference hosted by IFNA



<http://internationalfamilynursing.org/>



Despite all these impressive accomplishments in Family Nursing



- A gap still exists between family theory, research, education and practice
- In many clinical settings, family nursing is visibly absent or developing very slowly



Many nurses & other health care providers

- Do not "Think Family"
- Instead, they continue to think in an individualistic manner rather than thinking **interactionally**



THINK! Family





What are the benefits of incorporating a Family Systems Approach into clinical practice?

- Positive changes for individual family members and the family as a whole
- Improved family-nurse collaboration
- Enhanced interprofessional collaboration
- Increased job satisfaction

(Afzelius et al., 2017; Benzein et al., 2015; Braun & Foster, 2011; Deek et al., 2016; Dorell et al., 2016; Knafel et al., 2017; Leahey et al., 1995; Leahey & Wright, 2016; Lee et al., 2012; LeGrow & Rossen, 2005; Martinez et al., 2007; Østergaard et al., 2018; Ostlund et al., 2016; Ris et al., 2019; Svavarsdottir et al., 2012; Sveinbjarnardottir et al., 2011; Voltelen et al., 2016).



Positive changes for individual family members and the family as a whole

- Greater awareness of the needs and concerns of patients and families
 - Nurses are spending more time listening
- Enhanced family communication
- Increased support from family members





According to a study by Duhamel et al 2015

Nurses who use a FSA are confident that their encounters with patients and families have triggered conversations among and between family members that compelled them to listen to one another better and to deal more directly with family issues



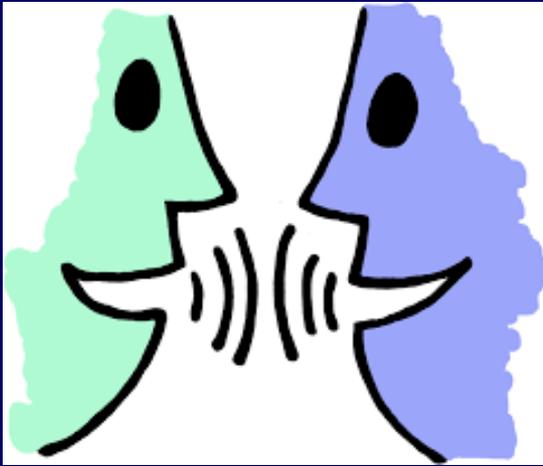
One nurse said,



- *"We facilitate communication between family members and, in a way, become witness to a dialogue that might not have taken place if we hadn't been there to initiate the conversation. The daughter told me she was happy with how I intervened and that, finally, it had opened up communication as she hoped without her trying to force matters. Because she was also listening."*



Family Conversations promote Family Support



- Family members come to new understandings that help them cope with the illness experience
 - "I could see things differently. And now I feel better, calmer."



Improved family-nurse collaboration



- When nurses incorporate the FSA into clinical practice the family-nurse relationship is **more open, reciprocal, caring, respectful, positive, and honest.**
- Nurses who use the FSA are **more receptive to family expertise.**



Duhmal et al noted that...

- Nurses who use the FSA report having more harmonious relations with families, which help promote collaboration in patient care
- Good rapport and collaboration with the family can even speed up the discharge process.
 - *"So, when you address the family, you get a lot fewer complaints and the situation gets managed."*



Enhanced interprofessional collaboration



- Nurses who conduct a family assessment are able to provide the health care team with a better understanding of a patient's family context
 - This in turn, has a positive impact on how the team deals with the family.
 - Information from a family assessment can help resolve family issues and ensure continuity of care (in the event of transfer to other health institutions) and improve quality of care.



Family nurses in the study by Duhamel et al 2015 said ...

- *"The fact the family shared everything with me gave us another understanding of the family situation. And I think there's a link with how the whole team intervened with this family afterwards."*
- *"My colleagues recognize that I may possess some knowledge since they'll consult me about their own family"*



Increased job satisfaction



- Nurses who have incorporated the FSN approach into care report:
 - Improvements in their professional practice
 - Enhanced self-esteem
 - Greater satisfaction in their work





- *"Nurses feel more rewarded and more satisfied with the quality of their work. I think they enjoy their day-to-day [work] more because they really have the impression they're making a difference in people's lives. It's also satisfying because it gives meaning to what you do."*



What are the main challenges of incorporating a Family Systems Approach (FSA) into clinical practice?

- Organizational and social processes in clinical contexts
- The nature and level of the evidence, applicability, and usefulness for clinical practice of the knowledge that has been produced
- Nurses' lack of knowledge and skills in family nursing
- Lack of mentors who can role model and demonstrate FSN clinical skills and demonstrate their benefits



Strategies to put FSA Knowledge into Practice

- *Do it slowly but surely."*
- *Formalize FSA: "Make it official and visible!"*
- *Short and purposeful interventions: "Make it short and to the point!"*
- *FSA tools and ritualizing interventions: "Make the useful a ritual!"*
- *FSA peer coaching: "Let's coach each other!"* Coaching