

MULTIPLE CHOICE

1. Which of the following is the best reason for a nurse to consider the family as a unit of care?
 1. The family is recognized as a unified whole.
 2. All family members are treated equally.
 3. Family members will receive care from other family members.
 4. The ill individual is given the best care possible.

ANS: 1

	Feedback
1	The family as a whole influences the individual family member.
2	Equality of treatment is not necessarily a goal of nursing care.
3	Care provided by family members is situational and not predictable.
4	No guarantee of the best care for the ill individual.

PTS: 1

KEY: Content Area: Support systems/Family dynamics | Integrated Process: Communication and Documentation | Client Need: Psychosocial Integrity | Cognitive Level: Application | Question Type: Multiple Choice | Chapter Objective: 3

2. Which of the following is not a domain of the Family Health Model?
 1. Structure
 2. Interaction
 3. Function
 4. Context

ANS: 2

Interaction will occur between family members but is not a domain of model.

PTS: 1

KEY: Content Area: Support systems/Family dynamics | Integrated Process: Nursing Process | Client Need: Psychosocial Integrity | Client Need: Physiological Integrity | Cognitive Level: Knowledge | Question Type: Multiple Choice | Chapter Objective: 4

3. Which of the following statements describe the new patient/health-care consumer role?
 - a. Provide only the information asked for by the provider
 - b. Obtain information from a variety of sources
 - c. Engage in self-management of care
 - d. Assume providers will understand their needs
 1. b only
 2. b and c
 3. a, b and c
 4. All of the above.

ANS: 2

	Feedback
1	Not the only descriptor of the new patient/consumer listed.
2	Both b and c describe the new patient/consumer.
3	Providing minimal information will not assist with problem solving.

4	Includes incorrect descriptors of patient/consumer.
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PTS: 1

KEY: Content Area: Health and Wellness | Integrated Process: Caring | Client Need: Health Promotion and Maintenance | Cognitive Level: Knowledge | Question Type: Multiple Choice | Chapter Objective: 2

4. Which of the following statements is most accurate concerning thinking family? A nurse who is thinking family:
1. Recognizes only the family members who are present with the ill family member.
 2. Realizes that all persons receiving nursing care are interdependent with family members.
 3. Only considers the point of view of the ill family member.
 4. Believes that including the family will improve patient care.

ANS: 2

	Feedback
1	Family is family no matter where members reside.
2	Interdependence is a characteristic of a functioning family.
3	Family members have opinions that will influence health and illness.
4	There is no guarantee that including family will improve care.

PTS: 1

KEY: Content Area: Family Dynamics | Integrated Process: Nursing Process | Client Need: Safe and Effective Care | Cognitive Level: Comprehension | Question Type: Multiple Choice | Chapter Objective: 1

MULTIPLE RESPONSE

1. The Institute for Patient- and Family-Centered Care proposes which of the following desired changes in the way health care is provided to individuals and their families? Select all that apply. Each health encounter should:
1. Include all family members.
 2. Enhance individual and family strengths.
 3. Build the confidence and competence of family members.
 4. Discourage care giving by family members.

ANS: 2, 3

Rationale:

1. Family members cannot always be present but can still be involved.
2. This will assist family members with health maintenance and promotion.
3. May lead to behaviors that promote and maintain health.
4. Care giving by family members is often necessary and desired.

PTS: 1

KEY: Content Area: Support systems/Family dynamics | Integrated Process: Communication and Documentation | Client Need: Psychosocial Integrity | Cognitive Level: Application | Question Type: Multiple Response | Chapter Objective: 6

2. Select all that apply. A family is a group of people
1. Living together.
 2. Related by blood.
 3. Connected emotionally.

4. Committed to each other.
5. Who call themselves family.

ANS: 2, 3, 4, 5

Rationale:

A family does not need to physically live together and may not be connected by blood or emotion.

PTS: 1

KEY: Content Area: Support systems/Family dynamics | Integrated Process: Communication and Documentation | Client Need: Psychosocial Integrity | Cognitive Level: Application | Question Type: Multiple Response | Chapter Objective: 2

3. Select all that apply. According to the WHO, a family health nurse:
 1. Possesses the usual knowledge expected of a competent nurse.
 2. Is a generalist with specialty knowledge of culture and family.
 3. Attempts to create a healthy family by addressing health problems.
 4. Only works with families in the community setting.

ANS: 1, 2, 3

Rationale:

Number 4 is not correct because a family health nurse coordinates care among the diverse settings where care is provided.

PTS: 1

KEY: Content Area: Case Management | Content Area: Collaboration | Integrated Process: Caring | Client Need: Management of Care | Cognitive Level: Knowledge | Question Type: Multiple Response | Chapter Objective: 2

4. Which of the following assumptions about family will assist the nurse to plan and deliver meaningful care? Select any that apply.
 1. The nurse has limited information about family function.
 2. Individual family members seldom have only one problem at a time.
 3. Disease management may be influenced by family responsibilities.
 4. Family members are not able to prioritize activities related to health care.

ANS: 1, 2, 3

Rationale:

Conducting a family assessment that includes function, other problems, and family roles will provide necessary information for developing goals for family members. Family members are able to prioritize, and when they do, compliance with treatments may not be possible.

PTS: 1

KEY: Content Area: Management of Care | Integrated Process: Caring | Client Need: Safe and Effective Care | Cognitive Level: Knowledge | Question Type: Multiple Response | Chapter Objective: 6

COMPLETION

1. _____ is established as individual members find their places within the family household and then separate themselves from it.

ANS: Family identity

PTS: 1

KEY: Content Area: Family dynamics | Integrated Process: Nursing Process | Client Need: Psychosocial Integrity | Cognitive Level: Knowledge | Question Type: Completion | Chapter Objective: 3

2. Families who had children with type 1 diabetes and had _____ family cohesion and _____ family conflict responded positively to a family-centered care approach, according to Hanson (1995).

ANS: high, low

PTS: 1

KEY: Content Area: Support systems/Family dynamics | Integrated Process: Caring | Client Need: Psychosocial Integrity | Cognitive Level: Knowledge | Question Type: Completion | Chapter Objective: 6

3. Family health as a whole implies a _____ that optimizes the actions and abilities of each member, which influence the good of all, yet regards the _____ of each individual.

ANS: Group functionality, needs

PTS: 1

KEY: Content Area: Support systems/Family dynamics | Integrated Process: Caring | Client Need: Psychosocial Integrity | Cognitive Level: Knowledge | Question Type: Completion | Chapter Objective: 5

SHORT ANSWER

1. List the pros and cons of the application of General Systems Theory to family nursing.

ANS:

Pros: Encourages consideration of the whole; connectedness and feedback; the whole and its parts are important. Cons: Ignores historical, cultural, and political factors; may overlook multiple forces and processes.

PTS: 1

KEY: Content Area: Support systems | Integrated Process: Nursing Process | Client Need: Psychosocial Integrity | Cognitive Level: Comprehension | Question Type: Short Answer | Chapter Objective: 4

2. Differentiate healthy families from unhealthy families, including three characteristics of each type.

Healthy families	Unhealthy families
<u>1</u>	<u>1</u>
<u>2</u>	<u>2</u>
<u>3</u>	<u>3</u>

ANS:

Healthy: Nurturing, supportive, balancing. Unhealthy: inability to complete usual tasks, satisfy social obligations, or fulfill customary roles

PTS: 1

KEY: Content Area: Support systems/Family dynamics | Integrated Process: Nursing Process |

3. Define family health and list processes that influence it.

ANS:

According to Denham (2003), family health is defined as a phenomenon that includes the complex interactions and relationships members have with one another within the household, and the potential ways they collaborate to maximize individual abilities to develop and maintain what they view as meaningful and healthful ways. Examples of processes include interaction, coping, integrity, development.

PTS: 1

KEY: Content Area: Support systems/Family dynamics|Content Area: Management of care |
Integrated Process: Communication | Client Need: Psychosocial Integrity | Client Need: Physiological Integrity | Cognitive Level: Knowledge | Question Type: Short Answer | Chapter Objective: 5

4. Explain what is meant by this statement: “Changes in the household experience can negatively or positively influence the health of family members.”

ANS:

Resources (presence or absence), and location of household (isolated or urban) are important influencing factors of health.

PTS: 1

KEY: Content Area: Health promotion and maintenance | Integrated Process: Nursing Process | Client Need: Psychosocial Integrity | Client Need: Physiological Integrity | Cognitive Level: Application |
Question Type: Short Answer | Chapter Objective: 5