**BACHELOR OF SCIENCE IN NURSING:**

**COMMUNITY HEALTH NURSING I**

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| **COURSE MODULE** | **COURSE TOPIC** | **WEEK** |
| 1 | 4 | 4 |
| **OVERVIEW OF PUBLIC HEALTH NURSING IN THE PHILIPPINES** | | |
| **FAMILY HEALTH NURSING** | | |

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* Read course and unit objectives
* Read study guide prior to class attendance
* Read required learning resources; refer to unit

terminologies for jargons

* Proactively participate in classroom/online discussions
* Participate in weekly discussion board (Canvas)
* Answer and submit course unit tasks

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At the end of this unit, the students are expected to:

**Cognitive**

* Discuss appropriate health care delivery system and actions holistically and comprehensively.
* Define the meaning of family.
* Enumerate the stages of the Family Cycle.

**Affective**

* Integrate relevant principles of social, physical, natural and health sciences and humanities in a given health and nursing situation in the community.
* Value the importance of the Nurses in the Family setting.

**Psychomotor**

* Model professional behavior as a community health nurse.
* Participate actively during class discussions and group activities
* Express opinion and thoughts during class
* Be able to perform unit task



**FAMILY**

**DEFINITION OF FAMILY**

Definition of *family* according to:

1. **National Statistical Coordination Board, NSCB 2008** “The family is a group of persons usually living together and composed of the head and other persons related to the head by blood, marriage, or adoption.”

2. **Johnson, 2000** “The family is a social unit interacting with the larger society.”

3. **Allen et al., 2000** “A family is characterized by people together because of birth, marriage, adoption or choice.”

4. **Freidman et al., 2003 “**A family is a two or more persons who are joined together by bonds of sharing and emotional closeness and who identify themselves as being part of the family.”

**TYPES OF FAMILY**

1. **Nuclear Family** – husband, wife, and their immediate children-natural, adopted or both
2. **Dyad Family** -husband and wife
3. **Extended Family**- consist of three generations—married sibling, or grandparents
4. **Blended Family**- one or both spouses brings a child or children from previous marriage into one living arrangement
5. **Compound Family**- where a man has more than one spouse
6. **Cohabiting Family** – live-in arrangement between an unmarried couple
7. **Single Parent** – results from a death of spouse, separation or pregnancy outside of wedlock
8. **The Gay or Lesbian Family** – cohabiting couple of the same sex

**FUNCTIONS OF THE FAMILY**

1. **PROCREATION-** Despite the changing forms of the family, it has remained the universally accepted institution for reproductive functions and child rearing.
2. **SOCIALIZATION OF FAMILY MEMBERS-** Socialization is the process of learning how to become productive members of society. It involves transmission of the culture of a social group.
3. **STATUS PLACEMENT-** Society is characterized by a hierarchy of its members into social classes. The family confers it’s societal rank on the children. Depending on the degree of social mobility in a society, the family and the children’s future families may move from one social class to another
4. **ECONOMIC FUNCTION-** Observes that the Rural Family is a unit of production where the whole family works as a team participating in farming, fishing, or cottage industries.

**-**The Urban Family is more of a unit of consumption where economically productive members work separately to earn salaries or wages.

1. **PHYSICAL MAINTENANCE-** The family provides for the survival need (food, shelter, and clothing) of its dependent members, like young children and the aged.
2. **WELFARE AND PROTECTION-** The family supports spouses or partners by providing for companionship and meeting affective, sexual, and socioeconomic needs. By developing a sense of love and belonging, the family gives the children emotional gratification and psychological security.

**FAMILY AS A CLIENT**

* Community health nursing has long viewed the family as an important unit of health care, with awareness that the individual can be best understood within the social context of the family.

**Reasons it is important for the nurses to work with families:**

1. **The family is a critical resource.** The importance of family is giving care to its members.
2. **In a family unit, and dysfunctions (like illness, injury, separation) that affects one or more family members will affect the members and unit as a whole.** Also known as “ripple effect”
3. **“Case finding” is another reason to work with families.** The nurse may identify a health problem that necessitates identifying risks for the entire family.
4. **Improving nursing care.** The nurse can provide a better and more holistic care by understanding the family and it’s members.

**FAMILY AS A SYSTEM**

**General System Theory**- It is  way to explain how the family as a unit interacts with larger units outside the family and with smaller units inside the family.

* **Three Subsystem of the Family (Parke 2002)**
  + Parent-Child Subsystem
  + Marital Subsystem
  + Sibling-sibling Subsystem

**DEVELOPMENTAL STAGES OF THE FAMILY**

**Family Life Cycle**

* 1. Beginning family through marriage or commitment as a couple relationship
  2. Parenting the first child
  3. Living with adolescent(s)
  4. Launching family (youngest child leaves home)
  5. Middle-aged family (remaining marital dyad to retirement)
  6. Aging family (from retirement to death of both spouses)

**Stages and tasks of the family life cycle**

* 1. Marriage: joining of families
     1. Formation of identity as a couple
     2. Inclusion of spouse in realignment of relationships with extended families
     3. Parenthood: making decisions
  2. Families with young children
     1. Integration of children into family unit
     2. Adjustment of tasks: child rearing, financial and household
     3. Accommodation of new parenting and grandparenting roles
  3. Families with adolescents
     1. Development of increasing autonomy for adolescents
     2. Midlife reexamination of marital and career issues
     3. Initial shift towards concern for the older generation
  4. Families as launching centers
     1. Establishment of independent identities for parents and grown children
     2. Renegotiations of marital relationship
     3. Readjustment of relationships to include in-laws and grandchildren
     4. Dealing with disabilities and death of older generation
  5. Aging Families
     1. Maintaining couple and individual functioning while adapting to the aging process
     2. Support role of middle generation
     3. Support and autonomy of older generation
     4. Preparation for own death and dealing with loss of spouse and/or siblings and other peers

**FAMILY HEALTH TASKS**

**Family Health Tasks**

The first family health task is providing its members with means for health promotion and disease prevention. Breastfeeding an infant, a healthy diet for older family members, bringing a young child to the health center for immunizations, and teaching a child about proper handwashing are a few examples of family health t

**Health Tasks according to Freeman and Heinrich (1981)**

* **Recognizing interruptions of health or development.**
* **Seeking health care.**
* **Managing health and nonhealthy crisis.** The family’s ability to cope with crisis and develop from its experience is an indicator of a healthy family.
* **Providing nursing care to sick, disabled or dependent family members of the family**
* **Maintaining a home environment conducive to good health and personal development.** The home should also have an atmosphere of security and comfort to allow for psychosocial development.
* **Maintaining a reciprocal relationship with the community and it’s health institutions.**

**CHARACTERISTICS OF A HEALTHY FAMILY**

**Characteristics of a Healthy Family**

* Members interact with each other; they communicate and listen repeatedly in many contexts
* Healthy families can establish priorities. Members understand that family needs are priority
* Healthy Families affirm, support, and respect each other.
* The members engage in a flexible role relationships, share power, respond to change, support the growth and autonomy of others and engage in decision making that affects them.
* The family teaches family and societal values and beliefs and shares a spiritual core
* Health Families foster responsibility and value service to others
* Healthy families have a sense of play and humor and share leisure time.
* Healthy families have the ability to cope with stress and crisis and grow from problems.

**TRADITIONAL FILIPINO FAMILY VALUES AND TRAITS**

1. **Paggalang (Respect)**

* The English translation of *paggalang*means to be respectful or to give respect to a person.
* Filipinos are accustomed to using the words “po,” “opo,” and “ho” when they are conversing with older people or, sometimes, with those who are in a high role or a prestigious member of society. Using these words is customary in the Philippines, and it shows a sign of respect if you do so.
* *Paggalang*can also be shown toward your elders by kissing their hands before leaving/to say goodbye and upon arrival/to greet them.
* The younger members of the family can show respect toward older siblings by calling them *kuya*(older brother) or *ate*(older sister).

1. **Pakikisama (Helping Others)**

* *Pakikisama*has the connotation of getting along with people in general.
* There is a general yearning to be accepted and well-liked among Filipinos. This applies to one and his or her friends, colleagues, boss, and even relatives. This desire is what steers one to perform *pakikisama*.
* The word *pakikisama*literally translates to "helping others." Therefore, this trait usually fosters general cooperation and performing good or helpful deeds, which can lead to others viewing you in a favorable light.

1. **Utang na Loob (Debt of Gratitude)**

* *Utang na Loob*means to pay your debt with gratitude.
* With *utang na loob*, there is usually a system of obligation. When this value is applied, it imparts a sense of duty and responsibility on the younger siblings to serve and repay the favors done to them by their elders.

1. **Pagpapahalaga sa Pamilya (Prioritizing Family)**

* *Pagpapahalaga sa Pamilya.*In other words: putting importance on your family.
* This implies that a person will place a high regard on their family and prioritize that before anything else.
* For example, this is why it's not uncommon for a father or a mother in a Filipino family from the Philippines to seek employment abroad or a job they don't want just to earn a decent wage for their family. They've placed the utmost priority on meeting the family’s basic needs and toward practicing p*agpapahalaga sa pamilya*

1. **Hiya (Shame)**

* *Hiya* means shame.
* This controls the social behaviors and interactions of a Filipino. It is the value that drives a Filipino be obedient and respectful to their parents, older siblings, and other authorities.
* This is also a key ingredient in the loyalty of one’s family.

**Traditional Health Care Practices in the Philippines:**

Hilot - one of the practices of Filipino traditional medicine, thought of as ‘healing’. Hilot or massage makes use of the most popular and useful herbs: tanglad, lagundi, sambong and more native plants that have healing and therapeutic properties.

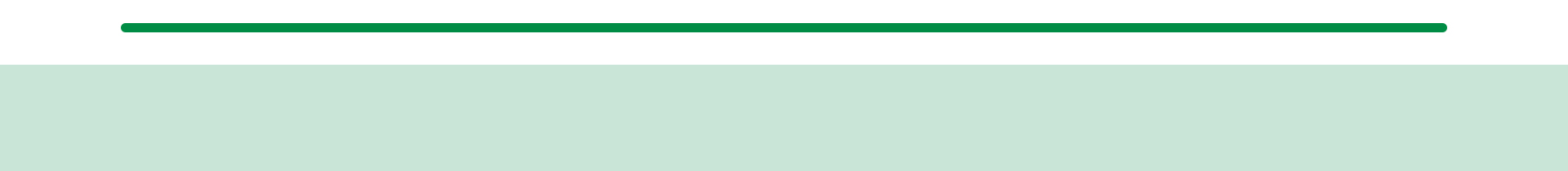
* there are different types of manghihilot:

1. Comadrona – expert in post-natal massage.
2. Acupressurist – aligns nerves and balances electrical energy.
3. Reflexologist – drains excess energy.
4. Herbalist – uses herbal in healing.

Cupping therapy - a form of alternative medication that uses “cups” on the skin to create suction. This suction is trusted to help in mobilizing blood flow and promote the healing of a broad range of medical ailments. Cupping is used in treating various diseases/conditions such as acne and facial paralysis, however, cupping can cause mild side effects, such as mild discomfort, burns, bruises, and skin infection.



Famorca, Z., Nies, M., & McEwen, M., (2013). Nursing Care of the Community. ELSEVIER MOSBY.





**Submit:** PowerPoint File

**Points:** 60 points

**Requirements:**  Attach a photo of your family.

**Question:**

Make a PowerPoint presentation of your Family:

1. Identify the type of Family you are in

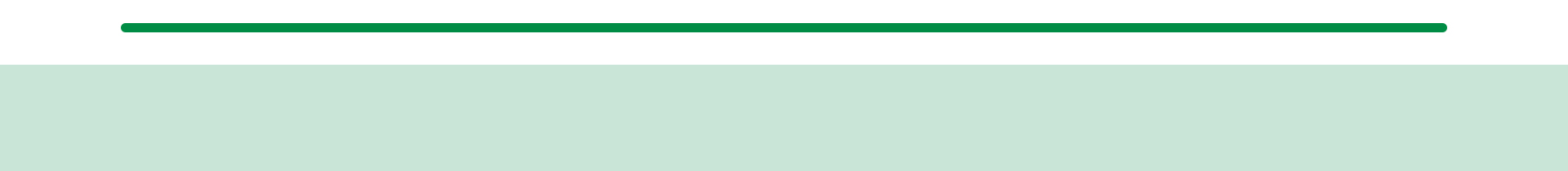
2. Introduce the members of your Family

3. Responsibility of each member

4. How do you make sure your family is healthy

5. Enumerate which Characteristics of a Healthy Family is evident in your Family

6. Enumerate Filipino Values and Traits practice in your family



Famorca, Z., Nies, M., & McEwen, M., (2013). Nursing Care of the Community. ELSEVIER MOSBY.

GEMINIANO, G. E. (2015) Filipino Family Values https://wehavekids.com/parenting/Filipino-Family-Values