FORMULATION OF NURSING DIAGNOSES

In a health care setting where the nurse is including the family unit as part of client care, nursing diagnoses may be general, or family issues may be included in the client’s nursing diagnoses. See the Box Nursing Diagnoses Related to Family, which presents commonly derived nursing diagnoses (40). The nurse will also formulate nursing diagnoses related to physical, emotional, and social health of family members.

Examples of a nursing diagnosis may be derived from some of the material presented earlier in the chapter. Using Family Systems Theory, state nursing diagnoses in the following manner:

1. Family system insufficiently open to internal (or external) environment related to inability of members to express feelings (or impaired ability to interact with neighbors)
2. Impaired communication processes in family system related to power struggles
3. Unmet family goals and functions related to disorganized family lifestyle patterns
4. Dysfunctional family system related to ineffective communication among family members, including extended family
5. Impairment in fulfilling family functions and activities related to inadequate material resources
6. Disruptive family interpersonal relationships related to power conflicts and lack of closeness
7. Altered family coping (tension between partners) related to work stress and disagreements about parental discipline

Using a genogram, state nursing diagnoses as follows:

1. Altered family relationships related to death, divorce, or remarriage
2. Unachieved family goals related to inability to use family resources

INTERVENTION WITH THE FAMILY

Help families understand processes and dynamics underlying interaction so that they, in turn, learn to respect the uniqueness of the self and of each other. Certainly members in the family need not always agree with each other. Instead, they can learn to listen to the other person describe feelings and accept each person’s impression as real for the self. This attitude becomes the basis for mutual respect, honest communication, encouragement of individual fulfillment, and freedom to be. There is then no need to prove or defend the self. Help the person work through problems stemming from low self-esteem. Utilize the principles of communication presented in Chapter 2.

Validate with families about the forces pulling them apart. Reinforce that people need one place—their home—where they can act without self-consciousness, where the pretenses and roles demanded in jobs, school, or social situations can be put aside. Emphasize that the family home should be a place where communication takes place with ease, each knows what to expect from the other, a cohesiveness exists that is based on nonverbal messages more than verbal, and each person is accepted.

Once the attitude “we are all important people in this family” is established, conflicts can be dealt with openly and constructively. Name calling and belittling are out of place. Families need to structure time together; otherwise individual schedules will allow them less and less time to meet. Parents need to send consistent messages to their children. For example, to say “don’t smoke” while immediately lighting a cigarette is hardly effective.

Times of communication are especially necessary when children are feeling peer pressure. Children should be praised for what they do right rather than reprimanded for what they do wrong. Children need structure but should be told the reason for the structure if they are old enough to comprehend. As you help family members achieve positive feelings toward and with each other, they are better equipped to fulfill their tasks, roles, and functions. Review the adaptive mechanisms of families described in this chapter.

The person’s health problems, especially emotional ones, may well be the result of the interaction patterns in childhood or in the present family. Teach about variables influencing family interaction—parents’ self-esteem and upbringing, number of siblings, person’s ordinal position in the family, cultural norms, and family rituals. Assist the person in talking through feelings related to past and present conflicts. Sometimes helping the person understand the effect of socialization and gender expectations in relation to the spouse’s upbringing and behavior can be the first step in overcoming current marital problems. In turn, overcoming negative effects helps the parents avoid repeating them in parenting. With intervention, support, and teaching, the parent may be able to resolve personal conflicts and more effectively work with the developing child. Each stage of development is a crisis to resolve. See Chapter 2 for communication principles.

You may help families explore and resolve ethical dilemmas related to their decisions about use of newer technology for getting pregnant. Technology that allows infertile couples to become

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**Nursing Diagnoses Related to Family**

<table>
<thead>
<tr>
<th>Caregiver Role Strain</th>
<th>Disabled Family Coping</th>
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<tbody>
<tr>
<td>Risk for Caregiver Role Strain</td>
<td>Readiness for Enhanced Family Coping</td>
</tr>
<tr>
<td>Parental Role Conflict</td>
<td>Readiness for Enhanced Self-Concept</td>
</tr>
<tr>
<td>Ineffective Coping</td>
<td>Chronic Low Self-Esteem</td>
</tr>
</tbody>
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Source: Reference 40.