



International Family Nursing Association (IFNA)

Position Statement on Graduate Family Nursing Education

Background

This International Family Nursing Association (IFNA) Position Statement on Graduate Family Nursing Education outlines the standards for graduate family nursing education and encourages nurse educators to develop graduate programs that promote the care of families. This document provides a guide for graduate level family nursing education and is built upon the IFNA Position Statement on Pre-Licensure Family Nursing Education (2013) and is complementary to the IFNA Position Statement on Advanced Practice Competencies for Family Nursing (2017). This document further advances the teaching and learning of graduate level nursing education worldwide. Graduate education prepares all nurses for an advanced level of nursing practice. Some graduate programs prepare nurses for direct patient care roles (often referred to as advanced practice nurses). Advanced practice nurses include clinical nurse specialists, nurse practitioners, nurse midwives, and nurse anesthetists (Canadian Nurses Association, 2008, 2010; DiCenso et al., 2010; Hamric, Hanson, Tracy, & O'Grady, 2014; IFNA Position Statement on Advanced Practice Competencies for Family Nursing, 2017; Martin-Misener et al., 2010; Moules, Bell, Paton, & Morck, 2012). In addition, other programs prepare nurses for advanced indirect practice roles such as nurse educator, nurse administrator, and nurse researcher. This document addresses preparation of all graduate nursing students to accomplish the vision of IFNA which is "to transform health for families worldwide" (<https://internationalfamilynursing.org/association-information/mission/>).

The family unit is self-defined, "the family is who they say they are" (Wright & Leahey, 2013, p. 55). As a relational experience of a group of people, 'family' is characterized by affectional bonds (Claveirole, Mitchell, & Whyte, 2001; Hartrick Doane & Varcoe, 2005). A

family's life world is, therefore, an integrative experience of individual and collective health and illness.

Family-focused nursing is a mindset or philosophical approach to care that recognizes the importance of families and supports families in health and illness (Denham, 2003; Denham, Eggenberger, Young, & Krumweide, 2016; Friedemann, 1989; Miller & Janosik, 1980). A family-focused nurse will view all health care issues by "'thinking' family, demonstrating 'intentional actions' with individuals and family unit" (Denham et al., 2016, p. vii). A family-focused nurse adopts a lens of seeing families as the unit of care and then develops family-focused interventions to implement in practice.

There is a need for interdisciplinary and inter-professional dialogue, which can be led by family-focused educated nurses, to advance family health and family care across all settings and delivered by all health care professionals. Family-focused nurses are part of an interdisciplinary health care team whose members such as physicians, social workers, and other allied health professionals collaborate, share knowledge and skills to solve problems or provide services, and produce outcomes that would not be achievable if practicing independently. This collaboration to provide family-focused care is essential in light of the complex nature of the modern health care system.

Family nursing education at the graduate level encompasses the teaching of practice-based and evidence-informed scientific and theoretical knowledge which is essential for all roles— those in direct (advanced practice nurses) as well as in indirect care areas (education, administration, or research) at either the masters or doctoral level. Nurses prepared at the graduate level should be able to function as described by The Swedish Council for Higher Education (2012):

Complex phenomena, issues and situations also demonstrate the ability to identify and formulate issues critically, autonomously and creatively as well as to plan and, using appropriate methods, undertake advanced tasks within predetermined time frames contributing to the formation of knowledge as well as the ability to evaluate this work.

Graduates of family nursing focused graduate education programs have the enhanced capacity to expand family nursing through the way in which they conceptualize the world and the nursing discipline. Thus, all members of a community can contribute to the base of knowledge within the community through critical reflection and reflective discourse. The translation of family research to practice and the development of nursing knowledge related to family nursing science are critical components of the role of graduate level nurses.

Advanced practice family nurses provide direct care that requires the nurse to continually integrate conceptual,

perceptual, and executive competencies to meet the demands for both person-centered and family-centered care (Wright & Bell, 2009; Wright & Leahey, 2013). The importance of including family while providing nursing care to individuals is fundamental to the holistic nursing care of persons of all ages and in all settings (Abraham & Moretz, 2012). Advanced family-focused nursing occurs across the spectrum of nursing specialties and settings of care, from perinatal (Veltri, Wilson-Mitchell, & Bell, 2015), to pediatrics (Butler, Copnell, & Willetts, 2013; Position Statement on Family-Centered Care Content in the Nursing Education Curriculum, 2009), to end-of-life, home care (Gjerberg, Førde, & Bjørndal, 2011), to trauma (Clukey, Hayes, Merrill, & Curtis, 2009), to acute care (Holtslander, Solar, & Smith, 2013), and to public health nursing (Stanhope & Lancaster, 2012). Regardless of the advanced practice role or setting, wherever nurses interact with individuals and families there is a need to foster the health and healing of the family by providing effective graduate nursing education.

Graduate Family Nursing Education Model

Graduate family nursing education can be best conceptualized using the IFNA Graduate Family Nursing Education Model (Figure 1) which is based on six core curriculum components: family nursing competencies, mission and philosophy statement, program and student outcomes, family nursing content, teaching-learning strategies, and evaluation strategies. A graduate curriculum should include a *philosophy* that is family focused and driven by established *competencies* such as those described in the IFNA Position Statement on Advanced Practice Competencies for Family Nursing (2017) as well as others identified by professional nursing and other health care education organizations. Family-focused *program and student learning outcomes* are identified which drive both the content and teaching-learning strategies. As in all curricula, *evaluation* is based on identified student outcomes, which allows for validation of learning or revision of *content, clinical experiences, and teaching-learning strategies*.

Because the IFNA Graduate Family Nursing Education model contains core curriculum components specific to

family nursing, the model can be incorporated for all types of graduate nursing education – masters or doctoral.

Graduate nursing education builds on the experienced nurse's competence and confidence in effectively supporting the health of family members. Additional content is necessary for graduate programs with a family nursing focus, which produce direct care providers whose practice includes patients and families. For nurses in these advanced practice nursing graduate programs, having a patient population specialization as well as knowledge and skills related to family assessment and family intervention are essential. Knowledge and skills are clinically developed through supervised practice experiences and simulations (Anderson & Friedemann, 2010; Astedt-Kurki, Paavilainen, Paunonen, & Nieminen, 1998; Bell, 2010; Eggenberger & Reagan, 2010; Holtslander et al, 2013; Moriyama, 2008; Moules et al., 2012; Nyirati, Denham, Raffle, & Ware, 2012; Wacharasin & Theinpichet, 2008; Wright & Bell, 2009). Advanced practice nurses are prepared to provide complex care for families.

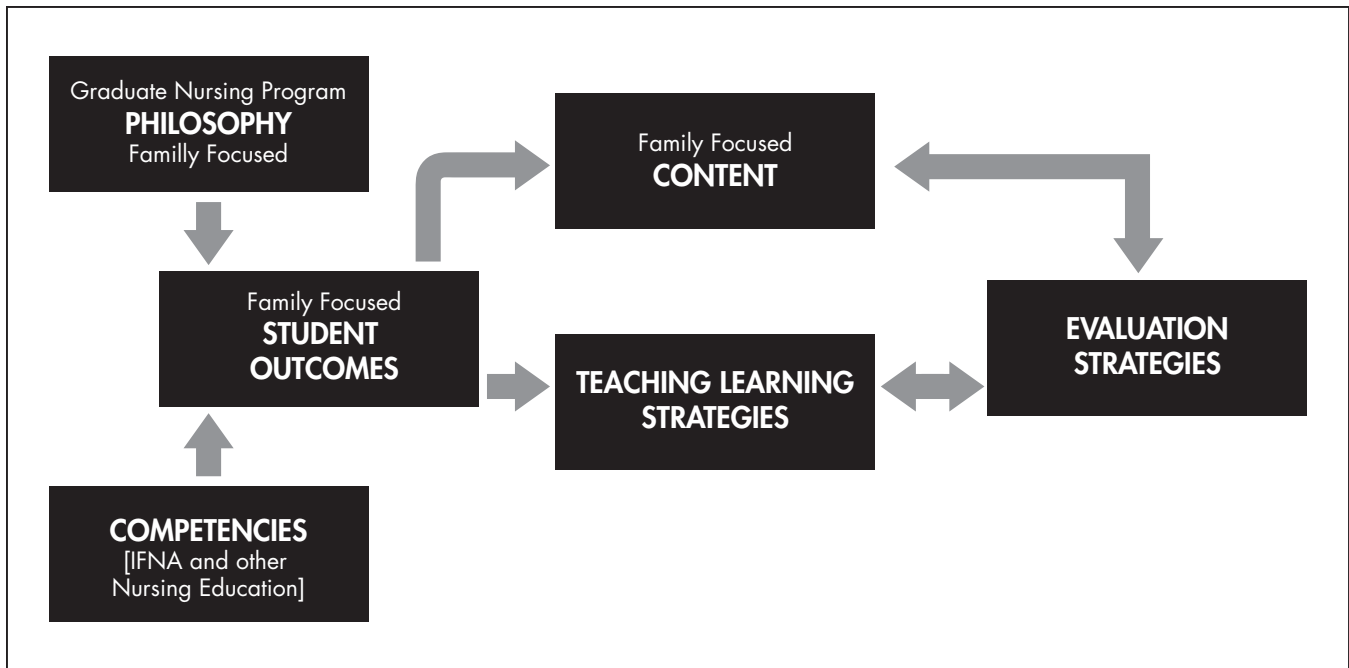


Figure 1. IFNA Graduate Family Nursing Education Model

Position Statement

This document provides a vision for graduate family nursing education and was developed with acknowledgment of the different institutional, governmental, and cultural influences on nursing education across the world. This position statement advocates that all graduate nursing education programs be based on the following core curriculum components: family nursing competencies, mission and philosophy statements, program outcomes, student learning outcomes; family nursing content teaching-learning strategies, and evaluation strategies.

The International Family Nursing Association (IFNA) Position Statement on Graduate Nursing Education:

1. Supports nurse educators in the design of nursing curriculum in all graduate nursing programs to recognize the family unit as an essential focus of nursing care.
2. Advocates the use of family science, family nursing, and theoretical frameworks to guide discipline-specific and interdisciplinary dialogue regarding graduate family nursing education outcomes, family-focused practice, family healthcare, and reflective practice with families.
3. Recognizes that the graduate level family nursing education is strengthened through integrated teaching-learning strategies that use an inter-professional approach to the healthcare team.
4. Recognizes that graduate family nursing education should build on both foundational and family nursing competencies at an advanced level.
5. Supports the integration of professional responsibility, accountability, and leadership in the ethical conduct of the care of families across the life span and in any setting.

Graduate Family Nursing Education Program Content

One of the primary mechanisms for developing the knowledge and skills necessary to effectively provide family-focused nursing care is the clear and intentional inclusion of family content during all aspects of graduate nursing education. This can be ensured by incorporating this in the mission or philosophy statements of the program curriculum. A focus on family nursing should extend beyond a single course to be integrated throughout the nursing curricula, in ways that influence the critical thinking and clinical judgment associated with the delivery of all nursing actions.

Graduate programs focused on preparing nurses for indirect roles such as nursing education and administration, can include family nursing content to meet an outcome such as: “applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations” (American Association of Colleges of Nursing, Essential VII: Clinical Prevention and Population Health for Improving Health, 2011, p. 5).

The IFNA Position Statement on Advanced Practice Competencies for Family Nursing (2017) identifies competencies specifically applicable to graduate nursing programs preparing advanced practice nurses. This Position Statement contains four core competency domains that can be used to guide curriculum development: (a) advanced practice family nursing care; (b) collaboration and leadership; (c) evidence-based family nursing; and (d) professional responsibility and accountability. These competencies for family nursing practice would guide the desired learner outcomes in the curriculum.

Graduates of this program would be equipped to:

1. Establish a relationship with the family for health promotion, disease prevention, and symptom

- management during complex health transitions.
2. Collect comprehensive data pertinent to the family’s health status.
3. Determine the family’s response to health and disease conditions during complex health transitions.
4. Systematically use evidence and informed clinical reasoning to formulate family nursing judgments in practice.
5. Consistently intervene *with* the family in preventing, maintaining, and restoring well-being during complex health transitions.
6. Facilitate family health within family responses to complex health transitions.
7. Actively engage in deliberate family nursing practice.
8. Draw on a formal approach to monitor and evaluate family responses to interventions.

In turn, the content in graduate nursing curricula should be included to facilitate students to achieve competencies and to meet program and student learning outcomes. Content is evidence informed and derived from family science frameworks. Teaching-learning strategies and practicum experiences can enable students to learn reflective family-focused practice within three domains: the individual with family as context, the family as client, and the family focused healthcare system (as illustrated in Figure 2).

IFNA believes that all graduate nursing students must be engaged in learning about the importance of the family to individual health and well-being, and to assess, plan, implement, and evaluate family-focused interventions during didactic and clinical learning. Quality individual nursing care is intricately linked to assessment and intervention with families in ways that promote and preserve the health and well-being of the family unit. Family members, as well as family relationships, should be included in the assessment processes, plans for delivery of nursing actions, and evaluation of care outcomes.

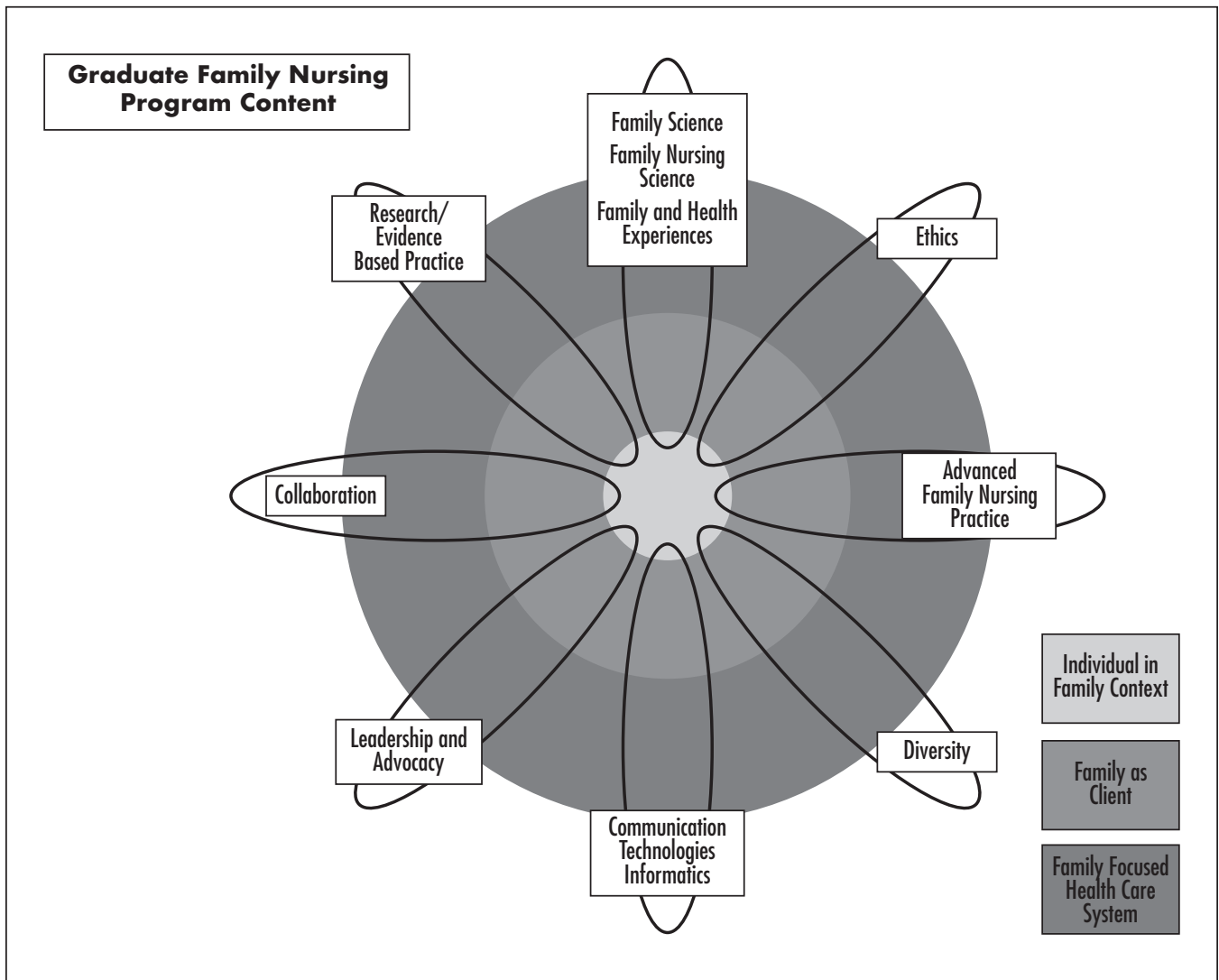


Figure 2. Graduate Family Nursing Education Program Content

Conclusion

IFNA maintains that family-focused nursing care should be a standard of practice across the lifespan, as cultural, spiritual, ethnic, and personal preferences are considered. All nurses, during graduate education, should have access to systematic and consistent education that ensures they are prepared with the appropriate advanced competencies in family-focused care as they develop their expertise in nursing. The quest for discovering, analyzing, synthesizing, and

disseminating knowledge regarding family nursing offers a new way of thinking and embraces the transformation of education and the capacity of nurses to deal with complex family nursing situations. The implementation of this Position Statement will require graduate nursing education programs to revise and periodically update their curriculum towards desired goals that evolve over time to meet the changing needs of families.

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