

April Newsletter Australia and New Zealand Chapter IFNA



Newsletter Number 28: April 2023

[Australian and New Zealand Chapter News](#)



This month's newsletter has a focus on the International Family Nursing Conference's (IFNC's) and how theories and models influencing Family Nursing practice, education and research have informed our Chapter members work presented at IFNC's. Through exploration of these resources and the associated variety of literature, it is hoped that you will be able to explore these 'notions of family nursing' and develop an understanding which can be transferred into your clinical practice, education, and research.

Theory. Give me a break please and let me get on with nursing care for families!

'Theory' may be thought of as being 'a little dull' let me introduce you to some wonderful applications of theory that helps guide family nursing.

From a quick look across the 20th Century, nursing care is emerging out of a biomedical model that has dominated much of how we nurse. The biomedical model provided strong guidance and influenced who received what services from nurses and the multidisciplinary team of healthcare professionals. The 21st Century however, holds promise of an evolved 'way of working'. The role and need for Family Nursing is expanding to recognise nurses walking in trusted partnerships with patients and their family guided by their priorities, and seamless timely multidisciplinary collaboration inclusive of independent nursing. What is your vision for Family Nursing?

Family Nursing is a complex phenomena that requires a theory based approach to practice that is fit-for-purpose. Theories related to families come from many differing perspectives and they all can inform our services and practices. To set the scene, I think of a theory as a set of beliefs that help explain the phenomena (family functioning towards health and wellbeing) and a model as the translation of theory to practices. What do you think of when you hear the words 'theory' and 'model' of nursing?



Theories of Family Nursing are best seen in the models they inspire. A good model based on a strong theory can transcend professional boundaries. The Person-Centred Care model is an example of a universal model implemented by different healthcare professional groups and nurses.

Theories may not be consciously considered as much as they should be. However, we all have in our minds understandings of how families function, the importance (or not) of family engagement in nursing practice, and what is Family Nursing. These understandings are built from theories. Some theories are

specific to family functioning. Some theories may consider nursing practice generally or Family Nursing practice as an advanced nursing practice. Other theories may attempt to understand human development, health, and wellness universally. To advance the science of Family Nursing, it is useful to understand why & how theories matter.

Using theory

Lets look at how a some Australia and New Zealand IFNA Chapter members use family related theories and models

From past IFNC's we can see how theories have influenced our approach to nursing and families in Australia and New Zealand.

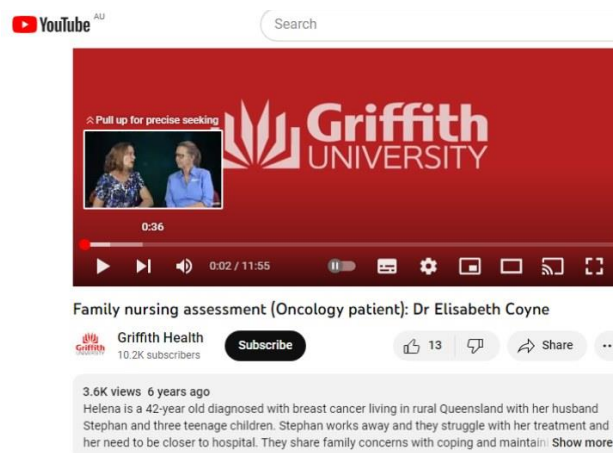
Calgary Family Assessment

Dr Elisabeth Coyne, Hazel Rands and Valda Frommolt applying the Calgary Family Assessment and Intervention model

Dr Elisabeth Coyne and the team from Griffith University have presented extensively on their teaching resources that demonstrate how to implement Family Systems Nursing and the Calgary Family Assessment and Intervention Models – developed by IFNA members Lorraine Wright and Maureen Leahey (2013). Family System Nursing responds to the belief that the 20th century way of nursing with a biomedical and “individual patient” focus is no longer fit for 21st century healthcare service. Nurses are shifting to a understanding of the importance of involving families in nursing care and even understanding the family as the focus of care.

A great resource shared by the team through IFNC's is available on YouTube:

Family nursing assessment (Oncology patient): Dr Elisabeth Coyne and Valda Frommolt
<https://youtu.be/LDIOFRbiAzc>



The image shows a screenshot of a YouTube video player. At the top, the YouTube logo is visible with 'AU' next to it, and a search bar. The video player itself has a red background with the Griffith University logo and name. A small video thumbnail shows two women. Below the video player, the title 'Family nursing assessment (Oncology patient): Dr Elisabeth Coyne' is displayed. Underneath the title, the channel name 'Griffith Health' is shown with '10.2K subscribers' and a 'Subscribe' button. To the right of the channel name are icons for likes (13), comments, shares, and a menu. Below this, the video statistics are shown: '3.6K views' and '6 years ago'. A short description follows: 'Helena is a 42-year old diagnosed with breast cancer living in rural Queensland with her husband Stephan and three teenage children. Stephan works away and they struggle with her treatment and her need to be closer to hospital. They share family concerns with coping and maintain...' followed by a 'Show more' link.

Bioecological Theory of Human Development

Dr Lindsay Smith uses the Bioecological Theory of Human Development and the Strengths-based Nursing model

Dr Lindsay Smith has presented at IFNC's on his work with a foundation of applying the Bioecological Theory of Human Development through the Strengths-Based Nursing model (SBN). SBN has developed by a IFNA member Laurie Gottlieb. SBN recognises that people respond to their challenges through their strengths and the strengths found around them in their family and the community, that includes the strengths of the healthcare system.



One of the resources shared through IFNC's is available through the Queensland Health, Child & Youth Health Practice Manual (2020 pg. 440). <https://www.childrens.health.qld.gov.au/wp-content/uploads/PDF/qcycn/cy-prac-manual-pt1.pdf>



Needs of Children Questionnaire

Dr Mandie Foster, Professor Lisa Whitehead, Professor Diana Arabiat, Professor Evalotte Morallus and Linda Frost focus on translating Family-Centred Care to children's needs during a hospital admission currently in a large NSW Health trial

During our Australia and New Zealand IFNA Chapter pre-conference workshop at IFNC15 in 2021 Mandie and the team shared about how they are transforming practice through applying the Child-

Centred Care model in their project “Parents’ And Staff Perceptions Of Parental Needs During A Child’s Hospital Admission” and developed the

developed the 'Needs of Children Questionnaire' (NCQ). This is the first to help nurses understand and measure children's self-reported psychosocial, physical, and emotional needs in during hospital admissions. The NCQ “advocates a collaborative inclusive approach focused on working with rather than on children to provide meaningful real time consumer feedback to direct care and is presently being evaluated for acceptability and usability among staff working at a Children’s’ Hospital in Australia” (<https://academics.aut.ac.nz/mandie.foster>).

During IFNC15 the NCQ video was played in which Mandie demonstrates the use of the NCQ: https://youtu.be/DDOM_uq810g

The Needs of Children Questionnaire
Mandie Foster, Lisa Whitehead, Diana Arabiat -
GdH, Crown University, University of Otago,
University of Jordan

Abstract
Child hospitalisation (CH) is a stressful experience for children, families and healthcare providers. The Needs of Children Questionnaire (NCQ) is a self-reported questionnaire designed to measure children's needs during hospital admission. The NCQ was developed by Mandie Foster, Lisa Whitehead, and Diana Arabiat. The NCQ is a 36-item questionnaire that measures children's needs in three domains: psychosocial, physical, and emotional. The NCQ is used to collect feedback from children and their families to improve the quality of care during hospital admission.

Phase 2: Item Generation
A literature review of children's needs in hospital from 1998 to 2014 generated 75 core statements, reduced to 69 statements during 2012. Focus groups with 7 health professionals and 7 parents generated 20 statements. A focus group with 7 health professionals and 7 parents generated 20 statements. A focus group with 7 health professionals and 7 parents generated 20 statements. A focus group with 7 health professionals and 7 parents generated 20 statements.

Variable	Study One	Study Two	Study Three
Country	New Zealand	New Zealand	New Zealand and Australia
Setting	PHU	PHU	paediatric Medical/Surgical
Sample	N=15	N=9	N=10
Admission Planned	N=0 (0%)	N=10 (100%)	N=16 (100%)
Unplanned	N=15 (100%)	N=9 (100%)	N=10 (100%)
Total Mean Score	122.4 (SD 13.12)	136.43 (SD 14.27)	129.76 (SD 14.69)
Importance Range	97.000	99.161	121.693 (SD 18.73)
Reliability	0.890	0.927	0.910
Cronbach Alpha	0.890	0.927	0.910

Phase 3: Pilot Studies
Study One: 18 school-aged children on the PHU (NZ) completed the NCQ during 2014. No items deleted. Cronbach Alpha .89. 56 items deleted. Study Two: 19 school-aged children on the PHU (NZ) completed the NCQ during 2015. Cronbach Alpha .91. Fulfillment subscale inserted, no items deleted. 9 statements modified. domains changed to: caring relationships, activities and play. Study Three: 10 school-aged children in medical/surgical wards (NZ and Australia) completed the NCQ during 2016-2017. No items deleted. Cronbach Alpha .94. psychometric analysis.

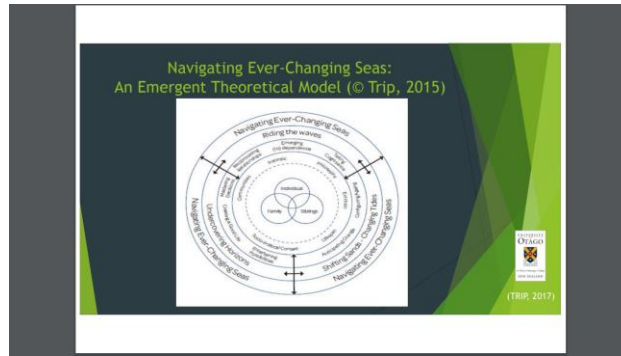
Photo: A young girl with blonde hair, wearing a blue and white striped shirt, is smiling and looking at a book she is holding.

(Mandie Foster, Lisa Whitehead, & Diana Arabiat, 2018, The Needs of Children Questionnaire, The 9th International Nursing Conference 2018. “Nurses at The Forefront in Transforming Care, Science, and research”)

Decision making with families

Dr Henrietta Trip has developed a model that places the individual alongside their family and siblings at the centre of care

Henrietta Trip presented at IFNC a model Navigating Ever-Changing Seas: An Emergent Theoretical Model for Supported Decision-Making Across the Lifespan that was developed during her PhD (Trip, H., 2015. Navigating Ever-changing Seas: Ageing with an Intellectual Disability: a Thesis Submitted for the Degree of Doctor of Philosophy, University of Otago Christchurch, New Zealand, Doctoral dissertation, University of Otago) supervised by Professors Lisa Whitehead and Marie Crowe. Henrietta has presented the model at IFNC’s and other venues. You can see the pdf of a presentation that includes a diagram of the model: <http://www.pandda.net/presentations/2017-CP-Navigating-Ever-Changing-Seas.pdf>



This model has been published with co-authors

Trip H, Whitehead L, Crowe M, Mirfin-Veitch B, Daffue C. Aging with Intellectual Disabilities in Families: Navigating Ever-Changing Seas—A Theoretical Model. *Qualitative Health Research*. 2019;29(11):1595-1610. doi:10.1177/1049732319845344

Resources on the IFNA website about Family Nursing Theories and models

Bibliography developed by [Dr. Kathleen Knafel](#), Professor, School of Nursing, University of North Carolina at Chapel Hill

[Download the Full Family Research Bibliography](#)

<https://internationalfamilynursing.org/2018/03/27/bibliography-family-research-conceptual-and-methodological-issues/>

Models for Nursing Practice with Families

14 different model used by Family Nurses in their nursing practice with families are reviewed at the IFNA website. The Calgary Family Assessment and Intervention Models used by the team from Griffith University and the Strengths-Based Nursing model used by Lindsay (both mentioned above) are listed with links that you may find useful.

<https://internationalfamilynursing.org/resources-for-family-nursing/practice/practice-models/>

Chapter member publications

Blamires, Julie and Annette, Dickinson and Napier, Sara and Foster, Mandie, 2023, Experiences and Perspectives of Children and Young People Living with Childhood Onset Systemic Lupus Erythematosus: An Integrative Review. Available at SSRN <http://dx.doi.org/10.2139/ssrn.4333203>

Foster M, Blamires J, Moir C, et al. Children and young people’s participation in decision-making within healthcare organisations in New Zealand: An integrative review. *Journal of Child Health Care*. 2023;0(0). doi:10.1177/13674935231153430

Spurr, S.; Danford, C.A.; Roberts, K.J.; Sheppard-LeMoine, D.; Machado Silva-Rodrigues, F.; Darezzo Rodrigues Nunes, M.; Darmofal, L.; Ersig, A.L.; Foster, M.; Giambra, B.; Lerret, S.; Polfuss, M.; Smith, L.; Somanadhan, S. Fathers' Experiences of Caring for a Child with a Chronic Illness: A Systematic Review. *Children* 2023, 10, 197. <https://doi.org/10.3390/children10020197>

Foster, M. J., Blamires, J., Neill, S., Coyne, I., Kristjánsdóttir, G., Feeg, V. D., Paraszczuk, A. M., & Al-Motlaq, M. (2023). The long-term impact of COVID-19 on nursing: An e-panel discussion from the International Network for Child and Family Centred Care. *Journal of Clinical Nursing*, 00, 1– 12. <https://doi.org/10.1111/jocn.1668>

REASONS why YOU should Become a Member of IFNA

Currently fees for Chapter members NEW IFNA Member - \$75.00 (USD) is 40% off the usual membership fee for a limited time.

<https://protect-au.mimecast.com/s/iUQDC81ZPoh67nkRqInSSZq?domain=internationalfamilynursing.org/> (*about:blank*)

Benefits of joining IFNA

To interact with a global community of nurse scholars and practitioners who care about the health and healing of families.

Develop international friends and mentors.

To attend webinars about family nursing theory, practice, and research

Don't forget to connect with the main International Family Nursing Association and join to access extensive family nursing resources. <https://internationalfamilynursing.org/> (*about:blank*)

Registration for the 16th International Family Nursing Conference (IFNC16) is OPEN!

I wonder what treasure will be shared by our IFNA Chapter members at the next International conference for International Family Nursing in Dublin, June 20 to 23rd. See you there.

SAVE THE DATE

16th International Family Nursing Conference

**Global Innovations in Family Nursing:
Advancing Family Health**

Dublin City University
Dublin, Ireland

HaPenny Bridge
Dublin, Ireland

**International Family
Nursing Association**

Pre-Conference Workshops
Tuesday, June 20, 2023

Conference
Wednesday, June 21, 2023 – Friday, June 23, 2023
Dublin City University, Glasnevin Campus | Dublin, Ireland

#IFNC16

Preconference workshops included within the conference registration cost! A great range of workshops to choose from.

Pre-conference Workshops

The conference planning committee have taken the decision to **include the Pre-Conference Workshops within the conference registration fee**. This will provide additional value for money for our attendees and a bigger audience for each workshop, providing more opportunities for delegates to engage with each other as well.

IFNC16 is offering 8 Pre-conference Workshops (4 in the Morning and 4 in the Afternoon). The description for each workshop is provided below.

Morning Workshops

Delivering Culturally Safe Clinical Care Across Population Groups and the Lifespan (limited capacity)

Career Cartography to Find your Destination to Enhance the Practice and Family (limited capacity)

Incubating Family Nurse Scientists Across the Globe (limited capacity)

Innovations in Collaborative Family Research Methods: Exploring Meaningful Family and Family-Nurse Interactions to Inform Nursing Actions (limited capacity)

Afternoon Workshops

Pediatric Mental Health Issues: A New Perspective for Assessment and Intervention

The Family Systems Care Unit FSCU, Winterthur: How A Vision Comes Alive At The Zurich University Of Applied Sciences ZHAW, Switzerland

Best Practices for Engaging Families across the Lifespan in Research: Lessons Learned from International Experts

Fostering International Collaborations and Health Policy to Advance Family Health

Next meeting Wednesday • April 12th , 1100-1200 AEST

Microsoft Teams meeting

Join on your computer, mobile app or room device

[Click here to join the meeting](#)

Written by Dr Lindsay Smith

Edited by Dr Elisabeth Coyne